

Statistics of Income

Individual Income Tax Returns Line Item Estimates











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Department of the Treasury Internal Revenue Service

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Individual Income Tax Returns, Line Item Estimates, 2021

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This 2021 Statistics of Income (SOI) line item estimates publication provides estimates of frequencies and amounts of the entries on the lines of the forms and schedules filed with individual tax returns as shown on the 2021 Individual SOI Complete Report weighted file. The estimates presented here are based on returns filed in Processing Year 2022 that were sampled statistically and then weighted to estimate the entire 2021 Tax Year.

Variations of the Form 1040 include electronically filed returns. The form variations were categorized into the basic forms according to the data reported on the return. For example, if a return was filed electronically and its characteristics indicated that it would otherwise have been filed on paper as a 1040, then it was classified as such statistically.

2021 Complete Report estimates: 160,824,340 Total, all individual returns filed

Estimates of returns filed electronically: 150,269,738 Total, all individual returns filed

Suggested Citation

Statistics of Income—2021 Individual Income Tax Returns Line Item Estimates Internal Revenue Service Washington, D.C.

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Totals for Forms and Schedules

Line Item Estimate Totals for Tax Year 2021

In total, the Statistics of Income (SOI) Division collected data from more than 60 IRS individual income tax forms and schedules to produce the estimates in this report. The table presented here breaks these forms and schedules out by number and name, and by total number filed and total number filed electronically.

Totals for Forms and Schedules from Line Item Estimates for Tax Year 2021

Type of Form	Total	Electronically Filed
All returns filed	160,824,340	150,269,738
Form 1040, U.S. Individual Income Tax Return	144,117,439	135,428,729
Form 1040-SR, Supplemental Income and Loss	16,706,900	14,841,009
Schedule 1, Additional Income and Adjustments to Income	68,036,337	63,525,347
Schedule 2, Additional Taxes	35,531,183	33,416,934
Schedule 3, Additional Credits and Payments	41,817,723	40,043,693
Schedule A, Itemized Deductions	15,058,347	14,077,031
Schedule B, Interest and Ordinary Dividends	21,343,724	19,712,842
Schedule C, Profit or Loss From Business (Sole Proprietorship)	33,257,275	30,704,645
Schedule D, Capital Gains and Losses	29,449,908	27,817,518
Schedule E, Supplemental Income and Loss	19,706,152	18,472,408
Schedule EIC, Earned Income Credit	17,107,667	16,598,820
Schedule F, Profit or Loss From Farming	1,801,274	1,677,894
Schedule R, Credit for the Elderly or Disabled	43,350	38,191
Schedule SE, Self-Employment Tax	22,972,718	21,169,133
Schedule 8812, Credits for Qualifying Children and Other Dependents	47,575,711	45,824,425
Form 461, Limitation on Business Losses	43,824	42,092
Form 965-A, Individual Report of Net 965 Tax Liability	25,429	24,883
Form 982, Reduction of Tax Attributes Due To Discharge of Indebtedness (and Section 1082 Basis Adjustment)"	99,543	97,520
Form 1116, Foreign Tax Credit	5,464,312	5,211,817
Form 2106, Employee Business Expenses	351,740	318,051
Form 2439, Notice to Shareholder of Undistributed Long-Term Capital Gains	4,575	4,575
Form 2441, Child and Dependent Care Expenses	6,813,340	6,609,822
Form 2555, Foreign Earned Income	476,323	366,105
Form 3468, Investment Credit	27,664	25,252
Form 3800, General Business Credit	736,515	699,359
Form 3903, Moving Expenses	98,047	96,914
Form 4136, Credit for Federal Tax Paid on Fuels	241,533	231,725
Form 4562, Depreciation and Amortization (Including Information on Listed Property)	10,351,077	9,795,722
Form 4684, Casualties and Thefts	166,275	153,600
Form 4797, Sales of Business Property	3,544,694	3,350,277
Form 4835, Farm Rental Income and Expenses	454,633	418,822
Form 4952, Investment Interest Expense Deduction	1,327,589	1,249,968
Form 5329, Additional Taxes on Qualified Plans (including IRAs) and Other Tax-Favored Accounts	2,551,270	2,449,053

Totals for Forms and Schedules from Line Item Estimates for Tax Year 2021—Continued

Type of Form	Total	Electronically Filed
Form 5405, Repayment of the First-Time Homebuyer Credit	75,184	71,661
Form 5695, Residential Energy Credits	2,736,596	2,578,767
Form 5884, Work Opportunity Credit	14,811	14,605
Form 6251, Alternative Minimum TaxIndividuals	5,749,454	5,445,836
Form 6252, Installment Sale Income	461,165	436,007
Form 6765, Credit for Increasing Research Activities	11,412	10,027
Form 6781, Gains and Losses From Section 1256 Contracts and Straddles	578,706	543,806
Form 8283, Noncash Charitable Contributions	2,980,762	2,759,794
Form 8396, Mortgage Interest Credit	101,172	97,105
Form 8582, Passive Activity Loss Limitations	8,012,324	7,569,585
Form 8586, Low-Income Housing Credit	1,750	1,670
Form 8606, Nondeductible IRAs	3,076,146	2,923,121
Form 8615, Tax for Certain Children Who Have Unearned Income	406,867	384,159
Form 8801, Credit for Prior Year Minimum Tax—Individuals, Estates, and Trusts	244,604	229,530
Form 8814, Parents' Election To Report Child's Interest and Dividends	95,770	88,657
Form 8824, Like-Kind Exchanges	89,215	85,866
Form 8829, Expenses for Business Use of Your Home	3,336,126	3,136,594
Form 8839, Qualified Adoption Expenses	84,183	80,574
Form 8846, Credit for Employer Social Security and Medicare Taxes Paid on Certain Employee Tips	21,858	21,137
Form 8853, Archer MSAs and Long-Term Care Insurance Contracts	148,393	135,820
Form 8863, Education Credits (American Opportunity and Lifetime Learning Credits)	9,206,360	8,867,243
Form 8880, Credit for Qualified Retirement Savings Contributions	9,297,000	8,950,189
Form 8889, Health Savings Accounts (HSAs)	15,511,487	14,926,358
Form 8910, Alternative Motor Vehicle Credit	27,642	26,315
Form 8911, Alternative Fuel Vehicle Refueling Property Credit	89,700	84,345
Form 8936, Qualified Plug-in Electric Drive Motor Vehicle Credit	168,942	162,047
Form 8938, Statement of Specified Foreign Financial Assets	528,551	462,804
Form 8959, Additional Medicare Tax	6,838,587	6,569,041
Form 8960, Net Investment Income TaxIndividuals, Estates, and Trusts	8,555,824	8,138,318
Form 8962, Premium Tax Credit (PTC)	8,315,026	7,888,932
Form 8990, Limitation on Business Interest Expense Under Section 163(J)	140,564	137,814
Form 8992, U.S. Shareholder Calculation of Global Intangible Low-Taxed Income (GILTI)	24,233	19,701
Form 8994, Employer Credit for Paid Family and Medical Leave	11,149	9,030
Form 8995, Qualified Business Income Deduction Simplified Computation	38,399,332	36,470,762
Form 8997, Initial and Annual Statement of Qualified Opportunity Fund (QOF) Investments	31,987	29,775

Limitations and Guidelines for the 2021 Line Item Estimates

Since SOI obtained the line counts and amounts used in this package from the Tax Year 2021 Individual SOI Complete Report File, they are subject to the same data limitations as the data included in the Complete Report File. These limitations are derived from the fact that these data are statistically sampled, meaning that the line counts and amounts are estimates based on samples, and should not be mistaken for actual counts or amounts of the entire filing population. While most forms and items are present often enough to provide accurate estimates, some less popular items should be used with a high degree of caution. SOI removed all line items with a sample count of fewer than 10.

The sample used in this study is one of a large number of samples that could have been selected using the same sample design. The estimates calculated from these different samples would vary. The sample estimate and an estimate of its standard error (SE) permit the construction of interval estimates with prescribed confidence that the interval includes the population value. Shown below are 95% confidence intervals for dollar amounts of selected Form 1040 items. (For example, the population amount for salaries and wages, with 95% confidence, is between 8,993,042,060 and 9,051,663,823.) These confidence intervals correspond to the estimates for all individual income tax returns filed for Tax Year 2021.

95-Percent Confidence Intervals for Number of Returns for Selected Items on All Forms 1040

Item	Line amount (in thousands)	CV (%)	Lower 95% bound	Upper 95% bound
Salaries and wages	9,022,352,941	0.17	8,993,042,060	9,051,663,823
Taxable interest	103,535,203	0.81	101,888,231	105,182,175
Tax-exempt interest	55,518,422	2.26	53,057,410	57,979,435
Ordinary dividends	386,961,461	0.52	383,003,725	390,919,197
Qualified dividends	295,906,194	0.58	292,533,565	299,278,823
Taxable IRA distributions	408,382,461	0.97	400,652,275	416,112,647
Taxable pensions and annuities	858,038,339	0.69	846,485,747	869,590,932
Total Social Security benefits	791,161,174	0.53	782,964,808	799,357,540
Taxable Social Security benefits	412,830,233	0.63	407,703,722	417,956,744
Total income	14,936,967,974	0.07	14,916,046,103	14,957,889,844
Adjusted gross income	14,795,614,070	0.07	14,774,694,396	14,816,533,745
Basic standard deduction	2,452,790,173	0.12	2,447,144,886	2,458,435,460
Additional standard deduction	52,824,316	0.56	52,247,078	53,401,555
Total itemized deductions	659,680,547	0.54	652,725,121	666,635,973
Qualified business income deduction	205,779,729	0.47	203,900,824	207,658,633
Taxable income	11,767,185,281	0.09	11,747,542,617	11,786,827,946
Income tax before credits	2,290,478,645	0.10	2,286,033,900	2,294,923,391
Total credits	150,056,640	0.45	148,729,485	151,383,794
Income tax after credits	2,136,650,742	0.11	2,132,061,363	2,141,240,122
Total tax liability	2,287,567,821	0.11	2,282,836,874	2,292,298,769
Tax due at time of filing	305,053,445	0.40	302,656,699	307,450,191
Overpayment	494,571,248	0.31	491,553,867	497,588,629

Forms whose line entries have weak estimates (implying a returns-sampled count less than 50) are listed below and not included in the publication:

Form 4972 Form 5884-A

Form 8609-A

Form 8834

Form 8903

Form 8941

Description of the Sample for the Line Item Estimates

his section describes the domain of the study, the sample design and selection, data capture and cleaning, the method of estimation, the sampling variability of the estimates.

Domain of Study

The statistics in this report are estimates from a probability sample of unaudited Individual Income Tax Returns (Form 1040 and 1040-SR (including electronic returns)) filed by U.S. citizens and residents during Calendar Year (CY) 2022.

All returns processed during 2022 were subjected to sampling except tentative and amended returns. Tentative returns were not subjected to sampling because the revised returns may have been sampled later, while amended returns were excluded because the original returns had already been subjected to sampling. A small percentage of returns were not identified as tentative or amended until after sampling. These returns, along with those that had no income information, frivolous income information, or fraudulent income information, when recognized, were excluded in calculating estimates.

The estimates in this report are intended to represent all returns filed for Tax Year (TY) 2021. While most of the returns processed during CY 2022 were filed for Tax Year 2021, the remaining returns were mostly for prior years, and a few for noncalendar years ending during 2019 and 2020.

Sample Design and Selection

The sample design is a stratified probability sample in which the population of tax returns is classified into subpopulations, called strata, and an independent sample is randomly selected from each stratum. Strata are defined by the following characteristics:

- 1. Nontaxable (including no alternative minimum tax) with adjusted gross income or expanded income of \$200,000 or more.
- 2. High business receipts of \$50,000,000 or more.

- 3. Presence or absence of special forms or schedules (Form 2555, Form 1116, Form 1040 Schedule C, and Form 1040 Schedule F).
- 4. Indexed positive or negative income. Sixty variables are used to derive positive and negative incomes. These positive and negative income classes are deflated using the Chain-Type Price Index for the Gross Domestic Product to represent a base year of 2016. (See footnote [1] for details.)

Tax data processed to the IRS Individual Master File at the Enterprise Computing Center at Martinsburg during CY 2022 were used to assign each taxpayer's record to the appropriate stratum and to determine whether the record should be included in the sample. Records are selected for the sample either if they possess certain combinations of the four ending digits of their Social Security number (SSN), or if their five ending digits of an 11-digit number generated by a mathematical transformation of the SSN is less than or equal to the stratum sampling rate times 100,000.

Data Capture and Cleaning

Data capture for the SOI sample begins with the designation of a sample of administrative records. While the sample was being selected, the process was continually monitored for sample selection and data collection errors. In addition, a small subsample of returns was selected and independently reviewed, analyzed, and processed for a quality evaluation.

The administrative data and controlling information for each record designated for this sample were loaded into an online submission processing database. Computer data for the selected administrative records were then used to identify inconsistencies, questionable values, and missing values, as well as any additional variables that an editor needed to extract for each record.

After the completion of the submission processing center review, data were further validated, tested, and balanced. Adjustments and imputations for selected fields based on prior-year data and other available information were used to make each record internally consistent. Finally, prior to publication, all statistics and tables were reviewed for accuracy and reasonableness considering the provisions of the tax law, taxpayer reporting variations and limitations, economic conditions, and comparability with other statistical series.

Some returns designated for the sample were not available for SOI processing because other areas of the IRS needed the return at the same time. For TY 2021, about 0.11% of the sample returns were unavailable.

Due to the COVID-19 pandemic, delays in processing TY 2020 returns occurred because of the temporary closing of submission processing centers. Approximately 4.5 million returns were ultimately processed during the beginning of TY 2021. These returns were moved into the TY 2020 study.

Method of Estimation

Weights were obtained by dividing the population count of returns in a stratum by the number of sampled returns for that stratum. The weights were adjusted to correct for misclassified returns and were then applied to the sample data to produce all the estimates in this report.

Sampling Variability

The sample used in this study is one of a large number of samples that could have been selected using the same sample design. The estimates calculated from these different samples would vary. The SE of an estimate is a measure of the variation among the estimates from the possible samples and, thus, is a measure of the precision with which an estimate from a particular sample approximates the average of the estimates calculated from all possible samples.

Line Item Estimates, by Individual Income Tax Form and Schedule for Tax Year 2021

The total estimated line counts for each individual tax form and schedule follow. The number of returns for the lines appears on the pages on the left, while the corresponding amount (in thousands of dollars) for the lines appears on the colored pages on the right.

2021 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Total of all	returns	s filed =	160,824,340	Elec	tronical	lly Filed Retu	ırns =	50,269,738					
1040			he Treasury—Internal Rev			(99)	0M 9	4					
	U.S	S. I <u>nd</u>	<u>ivi</u> dual Inco <u>n</u>	ie Tax	Ret	urn /		OMB No.	1545-00	74 IRS Use			or staple in this space.
Filing Status	81,422,	, 759 Single	54,161,246 Married filing joi	ntly [3,91 Marri	2,940 ed filing sej	parately (N	/IFS)	10,317	usehold (HOF	87,	, <mark>078</mark>	ving widow(er) (QW)
Check only		-		, –	_	• .	• `	, <u>—</u>		•	· —	•	ame if the qualifying
one box.	,		child but not your de			you. opour	o , ou c		J J. Q	2011, 01110			arrio ir ario quamiyirig
Your first name and middle initial Last name Your social security number										al security number			
If joint return, spouse's first name and middle initial Last name Spouse's social security number Spouse's social security number									social security number				
Home address	(numbe	er and stre	eet). If you have a P.O.	box, see	instruct	ions.				Apt. no.			al Election Campaign re if you, or your
City, town, or p	ost offic	ce. If you	have a foreign addres	s, also co	mplete s	spaces below	<i>1</i> .	State	ZI	P code	Y = *	3,183,	509 Y = ** 4,737,751
											bo	x below	will not change
Foreign country	/ name					Foreign prov	ince/state/	county	Fo	oreign postal co	ode you	_	r refund. You Spouse
At any time du	ring 20	021, did	you receive, sell. ex			erwise disp		financial inte	rest in a	ny virtual cu	ırrency		Yes ☐ No
Standard	Som	eone ca	ın claim: You	7,234 as a de		π Γιγο	4,135 our spous	e as a depend	lent				
Deduction		Spouse i	temizes on a separ							Currency	yes =	= 6,65	3,482 no = 152,58
A (DIIl	_	_	29.525.305			255,257	7	1	2,486,8	319		75,	873
	-		ere porn petore Jan	uary ∠, i	957 [Are blind	· ·			perore Janua			is blind
Dependents	•	instructi irst name	ons): Last nam	e			ial security umber	(3) Relation		1	ır qualifi ax credit	1 '	see instructions): edit for other dependents
If more than four	(1)	ii ot riarrio	<u> Last Harri</u>								967,706		
dependents,											,998,362	_	
see instructions and check	s									7,9	922,482	_	
here ▶ □										2,	157,516		
	1	Wages	, salaries, tips, etc.	Attach F	orm(s)	W-2	1	txbl schlrshps	s	860,399		1	126,082,290
Attach	2a	Tax-ex	empt interest	. :	2a	6,569,32	7	b Taxable in	terest			2b	48,990,485
Sch. B if required.	3a	Qualifie	ed dividends	. ;	3a	30,524,80	00	b Ordinary d	ividends	3		3b	32,247,057
required.	4a	IRA dis	tributions		4a	16,635,3	57	b Taxable an	nount .			4b	15,584,165
	5a	Pensio	ns and annuities .	. !	5а	32,171,3		b Taxable an	nount .			5b	29,357,159
Standard	6a	Social	security benefits .	. [6a	31,293,00	66	b Taxable an	nount .		· <u>·</u>	6b	23,798,351
• Single or	7	•	gain or (loss). Atta			f required.	lf not requ	ired, check h	ere .)	▶ 🔲	7	28,571,454
Married filing separately,	8		ncome from Sched									8	60,900,997
\$12,550	9		es 1, 2b, 3b, 4b, 5b			•	total inc	ome			. ▶	9	158,096,247
 Married filing jointly or 	10	,	ments to income fro		•							10	33,327,588
Qualifying widow(er),	11		ct line 10 from line		•	•			1 1			11	158,154,566
\$25,100	12a		ard deduction or it			•		•	12a	*** See B			
 Head of household, 	b		ble contributions if	'			`	′	12b	47,979,5		10-	450 074 454
\$18,800	C 12		es 12a and 12b . ed business income									12c	156,871,451
If you checked any box under	13 14							8995-A				13 14	25,924,668 156,248,101
Standard Deduction,	14 15		es 12c and 13 . le income. Subtrac									15	128,519,569
see instructions.	13	iaxab	e income. Subilat	: IIII C 14	II OIII III	10 11.11 201	0 01 1655,	CITI C I -U				13	120,013,003

Standard Deduction = 141,872,935

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Form **1040** (2021)

Cat. No. 11320B

14,842,685 **Itemized Deductions =**

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Total of all re	eturns	filed = 160,824,340 Elec	tronica	Illy Filed F	Return	s = 1	50,	269,738					
1040	Depar	tment of the Treasury—Internal Revenue Servi		(99) turn	2	02	1	OMB No. 154	15-007	4 IRS Use Only	∕—Do no	ot writ	e or staple in this space.
Filing Status Check only one box. Single Married filing jointly Married filing separately (MFS) Head of household (HOH) Qualifying widow(er) (QW) If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent													
Your first name and middle initial Last name Your social security number										ial security number			
If joint return, spouse's first name and middle initial Last name Spouse's social security number										social security number			
		mot hame and middle milla	20011								Орос		
Home address (r	number	and street). If you have a P.O. box, see	instruc	tions.						Apt. no.	Chec	ck he	tial Election Campaign ere if you, or your
City, town, or po	st offic	e. If you have a foreign address, also co	mplete	spaces be	elow.		Stat	e	ZIP	code	to go	to t	filing jointly, want \$3 his fund. Checking a
Foreign country	name			Foreign p	rovinc	e/state/o	count	у	Fore	eign postal code	1		w will not change or refund. You Spouse
At any time duri	ing 20:	21, did you receive, sell, exchange,	or oth	erwise di	ispose	e of any	fina	ncial interes	t in an	y virtual curre	ncy?		Yes No
Standard		eone can claim: You as a de						a dependent		<u> </u>			
Deduction	□ s	pouse itemizes on a separate retur	n or yo	u were a	dual-	status	alien						
Age/Blindness	You:	Were born before January 2, 1	957	Are b	lind	Spo	use	: Was b	orn be	fore January 2	2, 195	7	☐ Is blind
Dependents	(see i	nstructions):		(2)		security		(3) Relations	ship	(4) ✓ if q	ualifies	1 `	see instructions):
If more	(1) Fir	st name Last name			num	ber		to you		Child tax c	redit	С	redit for other dependents
than four dependents,													
see instructions													
and check here ►	-												
	1	Wages, salaries, tips, etc. Attach F	orm(s)	W-2 .	' . '	. 1*	txbl	schirshps	4,	692,377	. T	1	9,022,352,941
Attach	2a	1	2a 🗍	55,518	,422		b Ta	axable intere				2b	103,535,203
Sch. B if required.	3a	Qualified dividends	3a	295,900	6,194		b 0	rdinary divid	ends		. [3b	386,961,461
required.	4a	IRA distributions	4a	473,45	1,893		b Ta	axable amou	nt .		. [4b	408,382,461
	5a	Pensions and annuities	5a	1,506,94			b Ta	axable amou	nt .		. L	5b	858,038,339
Standard	6a	Social security benefits	6a	791,16°	1,174		b Ta	axable amou	nt .			6b	412,830,233
• Single or	7	Capital gain or (loss). Attach Scheo	dule D	if require	d. If n	ot requ	ired,	check here		▶	┚┟	7	2,032,553,466
Married filing separately,	8	Other income from Schedule 1, lin									.	8	1,686,737,583
\$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,			our to	tal inco	me				▶	9	14,936,967,974
iointly or	10	Adjustments to income from Sche									_	10	141,160,696
Qualifying	11	Subtract line 10 from line 9. This is	•	-	_							11	14,795,614,070
\$25,100	12a	Standard deduction or itemized		`			,			*** See Belo			141 252 004
 Head of household, 	b	Charitable contributions if you take				•		uctions) 1	2b	17,928,056		10-	141,353,904
\$18,800	C 13	Add lines 12a and 12b						 5-Δ	•		_	12c	3,183,954,011 205,779,729
any box under	13 14							o-A	•		_	13 14	3,381,030,109
Dedication	15	Taxable income. Subtract line 14										15	11,767,185,281
see instructions.	10	raxable income. Gubtract line 14	11011111		2010 0	n 1033,	Citto		•		.	10	11,101,100,201
For Disclosure, P	Privacy	Act, and Paperwork Reduction Act N	otice, s	see separa	ate ins	truction	ıs.		Ca	:. No. 11320B			Form 1040 (2021)
,,,,,,		**	* S	tandard	l Ded	uctior	1 =	2,506,538 659,680	3,615				

2021 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Form 1040 (2021	1)									Page 2
	16	Tax (see instructions). Che	ck if any from Form	(s): 1 881	14 2 4972	3 🗌			16	127,618,301
	17	Amount from Schedule 2,	line 3						17	2,873,036
	18	Add lines 16 and 17							18	127,874,599
	19	Nonrefundable child tax c	redit or credit for c	ther depende	nts from Schedul	e 8812			19	11,778,814
	20	Amount from Schedule 3,	line 8						20	30,378,319
	21	Add lines 19 and 20							21	38,209,132
	22	Subtract line 21 from line	•						22	123,335,518
	23	Other taxes, including self							23	33,820,967
	24	Add lines 22 and 23. This						. ▶	24	130,170,240
	25	Federal income tax withhe								
	а	Form(s) W-2				25a	117,91		-	
	b	Form(s) 1099				25b	37,57			
	C	Other forms (see instruction	,				5,455			
	d	Add lines 25a through 25c							25d	137,245,950
If you have a	26	2021 estimated tax payme				1 1			26	10,159,899
qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC Check here if you were	•			27a	32,21	0,103	1	
		January 2, 2004, and y	ou satisfy all the	e other requ	irements for					
	b	taxpayers who are at least Nontaxable combat pay e	-		14,026					
	C	Prior year (2019) earned in			2.538.605					
	28	Refundable child tax credit			, ,	28	37,77	1 612		
	29	American opportunity cred				29	6,027			
	30	Recovery rebate credit. Se				30	12,18			
	31	Amount from Schedule 3,				31	15,50			
	32	Add lines 27a and 28 thro							32	69,332,726
	33	Add lines 25d, 26, and 32							33	151,295,084
Refund	34	If line 33 is more than line	24, subtract line 2	4 from line 33	. This is the amou	ınt you (overpaid		34	125,949,019
Herana	35a	Amount of line 34 you war	nt refunded to yo u	J. If Form 888	8 is attached, che	eck here		▶ 🗌	35a	112,779,775
Direct deposit?	►b	Routing number			▶ c Type:	Check	king 🔲	Savings		
See instructions.	►d	Account number								
	36	Amount of line 34 you war	nt applied to your	2022 estimat	ed tax >	36	3,781	,189		
Amount	37	Amount you owe. Subtra				1 1		. ▶	37	32,771,171
You Owe	38	Estimated tax penalty (see				38	12,21	1,598		
Third Party Designee		you want to allow anoth structions	ner person to disc				Yes. C	omplete b	elow.	□No
		signee's		Phone				onal identif		57,678,376
Sign	Un	me ► der penalties of perjury, I declar			d accompanying sc		and stateme		the bes	t of my knowledge and
Here		ief, they are true, correct, and co	omplete. Declaration of		1	ased on a	ali informatio			, ,
	Yo	ur signature		Date	Your occupation			Prote	ction Pl	nt you an Identity N, enter it here
Joint return?									nst.) ▶	
See instructions. Keep a copy for your records.	Sp	ouse's signature. If a joint returi	n, both must sign.	Date Spouse's occupation				Ident	f the IRS sent your spouse an dentity Protection PIN, enter it here see inst.) ►	
	Ph	one no.		Email address	1			1		
D-1-1		eparer's name	Preparer's signat	l		Date		PTIN		Check if:
Paid										Self-employed
Preparer	Fir	m's name ▶	•					Phon	e no.	
Use Only	Fir	m's address ▶						Firm'	s EIN 🕨	·
Go to www.ire.a	ov/Forn	a1040 for instructions and the la	atest information							Form 1040 (2021)

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 1040 (2021	1)										Page 2
	16	Tax (see	instructions). Check	if any from Form	n(s): 1 881	4 2 🗌 4972	3 🗌			16	2,281,017,505
	17	Amount 1	from Schedule 2, lir	ne 3						17	9,456,106
	18	Add lines	s 16 and 17							18	2,290,478,645
	19	Nonrefun	ndable child tax cre	dit or credit for c	ther depender	nts from Schedule	8812			19	8,724,570
	20	Amount f	from Schedule 3, lir	ne 8						20	56,263,649
	21	Add lines	s 19 and 20							21	65,024,054
	22	Subtract	line 21 from line 18	3. If zero or less,	enter -0					22	2,225,454,591
	23	Other tax	xes, including self-e	employment tax,	from Schedule	e 2, line 21				23	160,102,500
	24	Add lines	s 22 and 23. This is	your total tax					▶	24	2,385,860,259
	25	Federal i	ncome tax withheld	from:			1 1				
	а	Form(s) V	W-2				25a	1,275,5	505,679		
	b	Form(s) 1	1099				25b	173,0	57,656		
	С	Other for	rms (see instruction	s)			25c	14,44	7,476		
	d	Add lines	s 25a through 25c							25d	1,470,768,559
If you have a	26	2021 est	imated tax paymen	ts and amount a	pplied from 20	20 return				26	534,373,752
qualifying child,	27a	Earned in	ncome credit (EIC)				27a	65,68	4,435		
attach Sch. EIC.		January	nere if you were l 2, 2004, and yours s who are at least a	u satisfy all the	e other requi	rements for					
	b	Nontaxal	ble combat pay ele	ction		111,463					
	С	Prior yea	ar (2019) earned inc	ome	. 27c	35,682,413					
	28	Refundab	ole child tax credit o	r additional child	tax credit from	Schedule 8812	28	115,8	69,125		
	29		n opportunity credit		•		29	5,17	0,213		
	30	Recovery	y rebate credit. See	instructions .			30	20,86	3,054		
	31		from Schedule 3, lir				31		<u>11,356</u>		
	32		s 27a and 28 throug								576,524,485
	33		s 25d, 26, and 32. T	-						33	2,577,329,763
Refund	34	If line 33	is more than line 24	4, subtract line 2	4 from line 33.	This is the amou	nt you c	overpaid	· <u>·</u>	34	125,949,019
	35a		of line 34 you want	refunded to you	u. If Form 8888				. ▶ _	35a	378,564,518
Direct deposit? See instructions.	►b	Routing n	number			▶ c Type:	Check	ing	Savings	;	
oee manachons.	►d	Account r		<u> </u>	<u> </u>						
	36		of line 34 you want				36		06,730		
Amount	37		you owe. Subtract				1 1		. ▶	37	32,771,171
You Owe	38		d tax penalty (see i				38	1,95	1,700		
Third Party Designee	ins	tructions	nt to allow another	•				Yes. C	·		□No
		signee's ne ▶			Phone no. ▶				ional ider iber (PIN)	itification	57,678
Sign	Und	der penalties						nd stateme	ents, and	to the bes	st of my knowledge and er has any knowledge.
Here	You	ur signature	•		Date	Your occupation			Pro	otection P	nt you an Identity IN, enter it here
Joint return?										e inst.) ▶	
See instructions. Keep a copy for your records.	Spo	ouse's signa	ature. If a joint return,	both must sign.	Date	Spouse's occupat	on		Ide		nt your spouse an ection PIN, enter it here
		one no.			Email address						
Paid Preparer	Pre	parer's nam	ne	Preparer's signat	ture		Date		PTIN		Check if: Self-employed
- 1 PU MI P											
	Firr	n's name ▶	•						Ph	one no.	
Use Only		n's name ▶ n's address								one no. m's EIN ▶	>

2021 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Electronically Filed Returns =	150,269,738

1040)		rtment of the Treasury—Internal Revenue Ser S. Individual Income Ta		(99) turn	2	02	1	OMB No. 1	545-0	0074	IRS Use Only	–Do r	ot wri	te or staple ir	n this space.
Filing Status	75 S	,666,	557 50,670,019 Single Married filing jointly	3,5 Mar	66,148 ried tiling	separ	ately (N	/IFS)	20,287	,894	ouseho	old (HOH)	79,1	20 Juan	ıvına wide	ow(er) (QW)
Check only one box.		If yo	u checked the MFS box, enter the on is a child but not your dependen	name o	Ū	•	• •	,	_			` '				` , ` ,
Your first name	e ai	nd mi	ddle initial	Last r	name								You	r soc	ial security	y number
If joint return, s	spo	use's	first name and middle initial	Last r	name								Spo	use's	social sec	urity number
Home address	(n	umbe	r and street). If you have a P.O. box, se	e instruc	tions.						Ap	t. no.			tial Election	on Campaign or your
City, town, or p	oos	t offic	ce. If you have a foreign address, also c	omplete	spaces be	elow.		Sta	te		ZIP cod	е ү	.~ 9	J .J .	,466 Y =	** 4,237,305 change
Foreign country	y n	ame			Foreign p	rovinc	e/state/	count	ty		Foreign	postal code	you	tax	or refund.	Spouse
At any time du	ırir	ng 20	21, did you receive, sell, exchange	e, or oth	nerwise d	ispose	e of any	/ fina	ancial intere	est in	any v	irtual currer	ncy?		☐ Yes	☐ No
Standard Deduction		_	eone can claim: You as a d	rn or yo	ou were a	dual-	•								000	
Age/Blindness	s `	You:	☐ Were born before January 2,	1957	☐ 225 , Are b	olind	Spo	use	: Was	born	befor	e January 2	2, 195	57	, 696 Is bli	nd
Dependent : If more	S		instructions): rst name Last name		(2)	Social num	security ber	,	(3) Relation to yo)	(4) ✓ if que Child tax cr		- 1	(see instruc Credit for oth	ctions): er dependents
than four dependents,												35,535	,704			
see instruction	ıs -											21,187	-		L	
and check here ►	-											7,615, 2,062,				
	$\overline{}$	1_	Wages, salaries, tips, etc. Attach	Form(s) W-2 .								. [1	119,4	468,808
Attach Sch. B if		2a	Tax-exempt interest	2a	6,160	,676		b T	axable inte	rest			.	2b	45,2	91,300
required.		3a	Qualified dividends	3a	28,674			b C	ordinary div	riden	ds .		.	3b	30,1	05,367
)	4a	IRA distributions	4a	15,255			b T	axable amo	ount			.	4b		80,704
		5a	Pensions and annuities	5a	29,509	•	_		axable amo				.	5b		47,037
Standard Deduction for—		6a	Social security benefits	6a	28,270				axable amo				<u>.</u>	6b		97,040
Single or		7	Capital gain or (loss). Attach Scho		if require	ed. If n	ot requ	iired	, check her	re		▶ ∟	┙┟	7		82,792
Married filing separately,		8	Other income from Schedule 1, li			٠.				•			.	8		58,849
\$12,550		9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7		•	our to	tal inco	ome		•		'	-	9		192,916 77,660
 Married filing jointly or 		0	Adjustments to income from Sch		•					•			.	10		
Qualifying widow(er),	_	1 2a	Subtract line 10 from line 9. This Standard deduction or itemized							12a	1	See Belo	>	11	140,	243,844
\$25,100	П	b	Charitable contributions if you take		•			,	· ·	12b		5,104,900				
 Head of household, 		C	Add lines 12a and 12b	J 111 0 516	ariuaru ut				´ L					12c	147	088,843
\$18,800 If you checked	1	3	Qualified business income deduc	tion fro	m Form 8									13		28,432
any box under		4												14		086,799
Standard Deduction,		5	Taxable income. Subtract line 14											15		156,821
see instructions.) '			5,,,,,		_0.00		2.10								-,
For Disclosure,	, Pı	ivacy	Act, and Paperwork Reduction Act	Notice, s	see separ	ate ins	truction	ıs.			Cat. No	. 11320B			Form	1040 (2021)

Standard Deduction = 133,078,972 13,886,948

Itemized Deductions =

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

	Ele	ctronica	ally Filed F	Returns =	50,2	69,738				
1040	Department of the Treasury—Internal Revenue Ser U.S. Individual Income Ta		(99) turn	202	1	OMB No. 1545	-0074	IRS Use Only-	–Do not wri	te or staple in this space.
Filing Status Check only one box.	Single Married filing jointly [If you checked the MFS box, enter the person is a child but not your dependent	name o	_					, ,		fying widow(er) (QW) name if the qualifying
Your first name	and middle initial	Last r	name						Your soc	ial security number
If joint return so	ouse's first name and middle initial	Last r	name						Snouse's	social security number
Home address (number and street). If you have a P.O. box, se	e instruc	tions.					Apt. no.	Check he	tial Election Campaign ere if you, or your
City, town, or po	ost office. If you have a foreign address, also c	omplete	spaces be	low.	State	•	ZIP c	ode	to go to t	filing jointly, want \$3 this fund. Checking a
Foreign country	name		Foreign p	rovince/state/o	county	,	Forei	ign postal code		w will not change or refund. You Spouse
At any time dur	ing 2021, did you receive, sell, exchange	e, or oth	nerwise di	spose of any	finar	ncial interest i	n any	virtual curren	ісу?	Yes No
Standard Deduction	Someone can claim: You as a do	•		Your spous		dependent				
	You: Were born before January 2,		Are b		use:	☐ Was bor	n bet	fore January 2	. 1957	☐ Is blind
	(see instructions):		7	Social security		(3) Relationsh				(see instructions):
If more	(1) First name Last name			number		to you		Child tax cre	edit C	Credit for other dependents
than four dependents,										
see instructions										
and check here ►										
	1 Wages, salaries, tips, etc. Attach	Form(s) W-2 .						1	8,583,172,250
Attach Sch. B if	2a Tax-exempt interest	2a	51,713		b Ta	xable interes	t.		2b	92,722,383
required.	3a Qualified dividends	3a	270,98		b Or	dinary divide	nds .		3b	354,676,712
	4a IRA distributions	4a	434,62			xable amoun			4b	375,607,812
	5a Pensions and annuities		1,396,85 715,54			xable amoun			5b	782,168,100
Standard Deduction for—	6a Social security benefits7 Capital gain or (loss). Attach Sche	6a				xable amoun	τ		6b 7	376,378,601
Single or Married filing	8 Other income from Schedule 1, lin		ii require	u. II Hot requ	ii eu,	CHECK HEIE	•		8	1,920,432,436 1,602,016,067
separately, \$12,550	9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,		This is vo	our total inc	ome				► 9	14,108,646,057
Married filing	10 Adjustments to income from Scho								10	131,881,599
jointly or Qualifying	11 Subtract line 10 from line 9. This i	is your	adjusted						11	13,976,764,458
widow(er), \$25,100	12a Standard deduction or itemized	deduc	ctions (fro	m Schedule	A)	12	a *	** See Belov	N	
Head of	b Charitable contributions if you take	e the sta	andard de	duction (see	instru	ctions) 12I	b	16,844,740		
household, \$18,800	c Add lines 12a and 12b								12c	2,981,441,721
If you checked any box under	13 Qualified business income deduc	tion fro	m Form 8	995 or Form	8995	5-A			13	195,044,813
Standard Deduction,									14	3,176,425,692
see instructions.	Taxable income. Subtract line 14	4 from I	ine 11. If :	zero or less,	enter	-0			15	1,117,930,871
	Division And and Branching And						0-4	N- 44000D		Form 1040 (2021)
For Disclosure, I	Privacy Act, and Paperwork Reduction Act I	Notice, s	see separa	ite instruction	ıs.		Cat.	No. 11320B		Form 1040 (2021)
	*	*** S	tandard	Deduction	1 =	2,354,369,	176			
	*	** It	emized	Deductions	5 =	610,333,5	528			

2021 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Form 1040 (2021)									Page 2
	16	Tax (see instructions). Chec	k if any from Form	(s): 1 881	4 2 4972	3 🗌			16	120,337,879
	17	Amount from Schedule 2, I	ine 3						17	2,729,376
	18	Add lines 16 and 17							18	120,579,724
	19	Nonrefundable child tax cre	edit or credit for c	ther depender	nts from Schedu	e 8812			19	10,825,586
	20	Amount from Schedule 3, I	ne 8						20	29,103,590
	21	Add lines 19 and 20							21	36,218,413
	22	Subtract line 21 from line 1	8. If zero or less,	enter -0					22	116,348,640
	23	Other taxes, including self-	employment tax,	from Schedule	2, line 21 .				23	31,687,624
	24	Add lines 22 and 23. This is	s your total tax					▶	24	122,458,323
	25	Federal income tax withhel	d from:							
	а	Form(s) W-2				25a	112,5	64,794		
	b	Form(s) 1099				25b	35,13	0,770		
	С	Other forms (see instruction	ns)			25c	5,15	3,318		
	d	Add lines 25a through 25c							25d	129,705,680
If you have a	26	2021 estimated tax payment	nts and amount a	pplied from 20	20 return				26	9,358,268
qualifying child, attach Sch. EIC.	27a	Earned income credit (EIC)				27a	31,01	3,665		
attacti Sch. Elo.		Check here if you were January 2, 2004, and yo taxpayers who are at least	ou satisfy all the	e other requi he EIC. See in	rements for structions ►					
	b	Nontaxable combat pay ele	ection	. 27b	13,019	_				
	С	Prior year (2019) earned inc	come	. 27c	2,466,870					
	28	Refundable child tax credit of	or additional child	tax credit from	Schedule 8812	28		88,569	-	
	29	American opportunity cred				29		7,165	-	
	30	Recovery rebate credit. Se	e instructions .			30		1,337	-	
	31	Amount from Schedule 3, I				31		4,901		
	32	Add lines 27a and 28 throu							32	66,135,864
	33	Add lines 25d, 26, and 32.							33	142,522,087
Refund	34	If line 33 is more than line 2				•	-	_	34	109,817,546
5	35a	Amount of line 34 you wan	refunded to you	J. If Form 8888		_	_		35a	107,016,951
Direct deposit? See instructions.	►b	Routing number			▶ c Type:	_ Check ∷ ∶	ing 📙	Savings		
	► d	Account number	<u> </u>	0000 - 1						
	36	Amount of line 34 you want						5,499		07.400.000
Amount You Owe	37 38	Amount you owe. Subtract				1 1		5,276	37	35,488,396
		Estimated tax penalty (see				38	11,3	15,276		
Third Party Designee	ins	you want to allow anothe tructions signee's	er person to disc					omplete b		No
		me ►		no. ►				iber (PIN)		
Sign Here		der penalties of perjury, I declare ief, they are true, correct, and co								
Joint return?	You	ur signature		Date	Your occupation			Prote		nt you an Identity IN, enter it here
See instructions. Keep a copy for your records.	Spo	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupa	ition		Ident		nt your spouse an ection PIN, enter it here
	Pho	one no.		Email address						
Paid	Pre	parer's name	Preparer's signat	ure		Date		PTIN		Check if: Self-employed
Preparer	Firr	m's name ▶						Phor	ne no.	
Use Only		n's address ▶							s EIN ▶	
Co to ununu iro ac		a1040 for instructions and the lat	act information							Form 1040 (2021)

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 1040 (2021	l)												Page 2
	16	Tax (see	instructions). Check	if any from Form	(s): 1 881	4 2 🗌 497	2 :	3 🔲			1	6	2,155,718,724
	17	Amount	from Schedule 2, lin	ne 3							1	7	8,845,842
	18	Add line	s 16 and 17								1	8	2,164,564,566
	19	Nonrefu	ndable child tax cred	dit or credit for o	ther depender	nts from Sched	dule 8	8812			1	9	7,578,459
	20	Amount	from Schedule 3, lin	ne 8							2	0	50,081,045
	21	Add line	s 19 and 20								2	1	57,659,981
	22	Subtract	t line 21 from line 18	B. If zero or less,	enter -0						2	2	2,106,904,585
	23	Other ta	xes, including self-e	employment tax,	from Schedule	e 2, line 21 .					2	23	149,216,495
	24	Add line	s 22 and 23. This is	your total tax)	▶ 2	4	2,256,121,855
	25	Federal	income tax withheld	I from:			,						
	а	Form(s)	W-2				.	25a	1,221,3	385,70	5		
	b	Form(s)	1099				.	25b	161,49	96,664	<u>. </u>		
	С	Other fo	rms (see instructions	s)			. [25c	13,27	<u>1,941</u>			
	d	Add line	s 25a through 25c								2	5d	1,399,435,843
If you have a	26	2021 est	timated tax payment	ts and amount a	pplied from 20	20 return	,				2	:6	499,382,440
qualifying child,	27a	Earned i	ncome credit (EIC)				. [27a	63,67	0,177			
attach Sch. EIC.		January	here if you were b 2, 2004, and you rs who are at least a	u satisfy all the	e other requi	rements for structions ► [_						
	b	Nontaxa	ible combat pay elec	ction	. 27b	105,453							
	С	Prior yea	ar (2019) earned inco	ome	. 27c	34,835,767							
	28		ble child tax credit or				- 1	28	112,2				
	29		n opportunity credit				-	29		1,688			
	30	Recover	y rebate credit. See	instructions .			.	30		9,356			
	31		from Schedule 3, lin				_	31	347,6				
	32		s 27a and 28 throug								_	2	547,629,907
	33		s 25d, 26, and 32. T	*							_	3	2,443,110,338
Refund	34	If line 33	is more than line 24	4, subtract line 2	4 from line 33.	This is the an	nount	t you	overpaid		3	4	-470,697,197
	35a		of line 34 you want	refunded to you	ı. If Form 8888	•				. ▶ ∟	3	5a	362,450,288
Direct deposit? See instructions.	►b	Routing i	number			c Type:	\Box	Check	king 🔲	Saving	ıs		
See instructions.	►d	Account											
	36		of line 34 you want				>	36	108,2	46,908			
Amount	37		you owe. Subtract			•	, I		1)	▶ 3	7	285,516,226
You Owe	38		ed tax penalty (see in				•	38	1,80	7,513			
Third Party Designee	ins	tructions	nt to allow another						☐ Yes. C				□ No
		signee's ne ▶			Phone no. ▶					onal ide ber (PIN		ion	
Sign	Und	der penaltie	es of perjury, I declare te true, correct, and com		ed this return and				and stateme	ents, and	to the		et of my knowledge and er has any knowledge.
Here	You	ur signature	Э		Date	Your occupation	on			P		n Pl	nt you an Identity N, enter it here
Joint return? See instructions. Keep a copy for your records.	Spo	ouse's sign	ature. If a joint return, I	both must sign.	Date	Spouse's occu	upatio	n		If Ic	the IRS	ser Prote	nt your spouse an ection PIN, enter it here
	Pho	one no.			Email address								
D-1-1		parer's nar	ne	Preparer's signat				Date		PTIN			Check if:
Paid													Self-employed
Preparer	Firr	m's name	>	1						ПР	hone no).	
Use Only		m's address									irm's El		•
		10101	etructions and the late										Form 1040 (2021)

Total Forms Filed = 68,036,337

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

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

20**21**Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Attachment Sequence No. 01 Your social security number

	(-)				,
Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes	s		1	3,150,440
2a	Alimony received			2a	258,837
b	Date of original divorce or separation agreement (see instructions)	-			
3	Business income or (loss). Attach Schedule C			3	28,652,345
4	Other gains or (losses). Attach Form 4797			4	1,995,827
5	Rental real estate, royalties, partnerships, S corporations, treschedule E			5	16,980,783
6	Farm income or (loss). Attach Schedule F			6	1,724,143
7	Unemployment compensation			7	15,809,172
8	Other income:				
а	Net operating loss	8a (1,155,701)	
b	Gambling income	8b	2,249,499		
С	Cancellation of debt	8c	798,188		
d	Foreign earned income exclusion from Form 2555	8d (430,205)	
е	Taxable Health Savings Account distribution	8e	533,041		
f	Alaska Permanent Fund dividends	8f	230,826		
g	Jury duty pay	8g	107,163		
h	Prizes and awards	8h	215,920		
i	Activity not engaged in for profit income	8i	47,384		
j	Stock options	8j	5,695		
k	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	8k	68,481		
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81	41		
m	Section 951(a) inclusion (see instructions)	8m	6,776		
n	Section 951A(a) inclusion (see instructions)	8n	11,240		
0	Section 461(I) excess business loss adjustment	80	43,082		
р	Taxable distributions from an ABLE account (see instructions) .	8p	3,754		
Z	Other income. List type and amount ▶	8z	6,384,708		
9	Total other income. Add lines 8a through 8z			9	12,095,579
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040-NR, line 8			10	60,900,997

Total Forms Filed =

SCHEDULE 1

68,036,337

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

SCHEDULE 1 (Form 1040)

Department of the Treasury

Internal Revenue Service

Additional Income and Adjustments to Income

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

OMB No. 1545-0074

2021

Attachment Sequence No. 01

Schedule 1 (Form 1040) 2021

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number Part I Additional Income Taxable refunds, credits, or offsets of state and local income taxes 1 3,567,122 2a 8,507,104 **b** Date of original divorce or separation agreement (see instructions) ▶ 411,501,369 3 50.686.440 4 4 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach 1,087,547,173 5 6 -26,141,944 7 7 208,872,354 8 Other income: 8a (185,261,326 8b 46,630,967 8c 6,955,173 **d** Foreign earned income exclusion from Form 2555 8d (28,104,316 677,875 e Taxable Health Savings Account distribution 8e 8f 374,151 8g 12.240 8h 876,687 196,433 8i 8i 397.708 **k** Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such 413,484 8k I Olympic and Paralympic medals and USOC prize money (see 81 299 m Section 951(a) inclusion (see instructions) 219,546 8_m 2,357,946 8n **n** Section 951A(a) inclusion (see instructions) 50,309,058 o Section 461(I) excess business loss adjustment 80 **p** Taxable distributions from an ABLE account (see instructions). 8p 4,934 Z Other income. List type and amount ► 50,539,343 8z 9 Total other income. Add lines 8a through 8z 9 -56,616,689 10 Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 10 1,686,737,583

Cat. No. 71479F

Schedule 1 (Form 1040) 2021 Page **2**

Par	Adjustments to Income		· ·
11	Educator expenses	11	3,115,144
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	273,260
13	Health savings account deduction. Attach Form 8889	13	1,933,557
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	94,125
15	Deductible part of self-employment tax. Attach Schedule SE	15	21,622,374
16	Self-employed SEP, SIMPLE, and qualified plans	16	998,658
17	Self-employed health insurance deduction	17	3,667,399
18	Penalty on early withdrawal of savings	18	306,653
19a	Alimony paid	19a	377,781
b c 20	Recipient's SSN	20	2,415,869
21	Student loan interest deduction	21	4,941,992
22	Reserved for future use	22	-,
23	Archer MSA deduction	23	1,997
24	Other adjustments:	20	
2 т а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l 24c 3,003		
d	Reforestation amortization and expenses		
е	Repayment of supplemental unemployment benefits under the Trade Act of 1974		
f	Contributions to section 501(c)(18)(D) pension plans 24f 22,525		
g	Contributions by certain chaplains to section 403(b) plans 24g 8,031		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations		
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	372,735
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	33,327,588

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Schedule 1 (Form 1040) 2021 Page 2 Part II Adjustments to Income 826,402 11 11 12 Certain business expenses of reservists, performing artists, and fee-basis government 2,082,951 12 5,888,886 13 13 268,955 Moving expenses for members of the Armed Forces. Attach Form 3903 14 14 38,595,947 15 Deductible part of self-employment tax. Attach Schedule SE 15 28,919,016 16 Self-employed SEP, SIMPLE, and qualified plans 16 30,805,238 17 17 123,875 18 18 9,743,923 19a c Date of original divorce or separation agreement (see instructions) ▶ 13,682,667 20 20 4.289.185 21 21 22 22 4.900 23 Archer MSA deduction 23 24 Other adjustments: a Jury duty pay (see instructions) 24a 4,179 **b** Deductible expenses related to income reported on line 8k from 309,078 24b the rental of personal property engaged in for profit c Nontaxable amount of the value of Olympic and Paralympic 8,753 medals and USOC prize money reported on line 8l 24c 126,814 24d e Repayment of supplemental unemployment benefits under the 20,077 24e 77,308 24f **f** Contributions to section 501(c)(18)(D) pension plans 34,294 **g** Contributions by certain chaplains to section 403(b) plans . . 24a h Attorney fees and court costs for actions involving certain 245,416 unlawful discrimination claims (see instructions) 24h i Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the 44,595 **24i** 47,698 j Housing deduction from Form 2555 **24i** k Excess deductions of section 67(e) expenses from Schedule K-1 403,915 24k Z Other adjustments. List type and amount ► 24z 4,502,757 25 25 5,795,511 141,160,696 26 Add lines 11 through 23 and 25. These are your adjustments to income. Enter 141,353,904 here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a 26 Schedule 1 (Form 1040) 2021

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2021 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Taxes

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

OMB No. 1545-0074

2021

Attachment
Sequence No. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number Total Forms Filed = 35,531,183 Part I Tax Alternative minimum tax. Attach Form 6251 1 1 243,550 2 Excess advance premium tax credit repayment. Attach Form 8962 2 2,632,104 3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17... 2,873,036 Part II Other Taxes 21,622,374 4 Self-employment tax. Attach Schedule SE 4 Social security and Medicare tax on unreported tip income. Attach Form 4137 5 72,440 Uncollected social security and Medicare tax on wages. Attach 52,748 7 119,251 Total additional social security and Medicare tax. Add lines 5 and 6 7 8 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required 8 4,484,060 9 9 172,532 Household employment taxes. Attach Schedule H 456,717 10 Repayment of first-time homebuyer credit. Attach Form 5405 if required 10 11 Additional Medicare Tax. Attach Form 8959 11 6,028,804 12 7,211,136 12 Net investment income tax. Attach Form 8960 13 Uncollected social security and Medicare or RRTA tax on tips or group-term life 609,799 13 14 Interest on tax due on installment income from the sale of certain residential lots 1.809 14 and timeshares

Interest on the deferred tax on gain from certain installment sales with a sales price

Recapture of low-income housing credit. Attach Form 8611

(continued on page 2)

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16

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

Cat. No. 71478U

Schedule 2 (Form 1040) 2021

8,736 37

^{*} Data not shown because of the small number of sample returns on which it is based.

SCHEDULE 2 (Form 1040)

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Department of the Treasury

Additional Taxes

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

OMB No. 1545-0074 Attachment

▶ Go to www.irs.gov/Form1040 for instructions and the latest information. Internal Revenue Service Sequence No. 02 Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number Total Forms Filed = 35,531,183 Part I Tax Alternative minimum tax. Attach Form 6251 1 1 5,598,598 2 Excess advance premium tax credit repayment. Attach Form 8962 2 3,862,542 3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17... 9,456,106 Part II Other Taxes 4 Self-employment tax. Attach Schedule SE 4 77,180,298 Social security and Medicare tax on unreported tip income. Attach Form 4137 5 13,531 Uncollected social security and Medicare tax on wages. Attach 6 29,055 7 42,113 Total additional social security and Medicare tax. Add lines 5 and 6 . . . 7 8 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required 8 5,199,727 1,215,538 9 Household employment taxes. Attach Schedule H 9 220,396 10 Repayment of first-time homebuyer credit. Attach Form 5405 if required 10 14,590,722 11 11 12 59,697,612 12 Net investment income tax. Attach Form 8960 13 Uncollected social security and Medicare or RRTA tax on tips or group-term life 209,730 13 Interest on tax due on installment income from the sale of certain residential lots 14 14 7.626 and timeshares Interest on the deferred tax on gain from certain installment sales with a sales price 15 15 153,379

(continued on page 2)

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

Cat No. 71478U

Schedule 2 (Form 1040) 2021

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Recapture of low-income housing credit. Attach Form 8611

^{*} Data not shown because of the small number of sample returns on which it is based.

Schedule 2 (Form 1040) 2021 Page **2**

Part II Other Taxes (continued) Other additional taxes: a Recapture of other credits. List type, form number, and amount > 17a 7,111 **b** Recapture of federal mortgage subsidy. If you sold your home in 17b 17c c Additional tax on HSA distributions. Attach Form 8889 242,794 d Additional tax on an HSA because you didn't remain an eligible 17d 22,108 8,029 Additional tax on Archer MSA distributions. Attach Form 8853. 17e f Additional tax on Medicare Advantage MSA distributions. Attach 1.001 17f Form 8853 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 3,399 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 17i j Section 72(m)(5) excess benefits tax 17j 23,430 **k** Golden parachute payments 17k 156 171 Tax on accumulation distribution of trusts . . . m Excise tax on insider stock compensation from an expatriated 17m n Look-back interest under section 167(q) or 460(b) from Form 9,315 17n o 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 5,662 17p from, and dispositions of, stock of a section 1291 fund **q** Any interest from Form 8621, line 24 17q 31 Z Any other taxes. List type and amount ► COBRA 57,197 17z 18 Total additional taxes. Add lines 17a through 17z 18 374,109 19 Additional tax from Schedule 8812 19 1,106,411 20 Section 965 net tax liability installment from Form 965-A . . . 21 Add lines 4, 7 through 16, 18, and 19. These are your total other taxes. Enter here

Schedule 2 (Form 1040) 2021

21

and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b 33,820,967.

Schedule 2 (Form 1040) 2021 Page **2**

Part II Other Taxes (continued) Other additional taxes: a Recapture of other credits. List type, form number, and amount ▶ 17a 15,895 **b** Recapture of federal mortgage subsidy. If you sold your home in 17b 17c c Additional tax on HSA distributions. Attach Form 8889 72,424 d Additional tax on an HSA because you didn't remain an eligible 17d 3.003 2,428 Additional tax on Archer MSA distributions. Attach Form 8853. 17e f Additional tax on Medicare Advantage MSA distributions. Attach 1.039 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 17,799 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 17i j Section 72(m)(5) excess benefits tax 17j 140,833 **k** Golden parachute payments 17k 3,048 171 I Tax on accumulation distribution of trusts m Excise tax on insider stock compensation from an expatriated 17m n Look-back interest under section 167(q) or 460(b) from Form 77,672 17n o Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR 17o **p** Any interest from Form 8621, line 16f, relating to distributions 25,564 17p from, and dispositions of, stock of a section 1291 fund **q** Any interest from Form 8621, line 24 17q 287 Z Any other taxes. List type and amount ► COBRA 249,897 17z 18 Total additional taxes. Add lines 17a through 17z 18 611,859 19 19 1,249,767 258.499 Section 965 net tax liability installment from Form 965-A . . . 20 21 Add lines 4, 7 through 16, 18, and 19. These are your total other taxes. Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b . . . 160,102,500 21

Schedule 2 (Form 1040) 2021

^{*} Data not shown because of the small number of sample returns on which it is based.

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

► Attach to Form 1040, 1040-SR, or 1040-NR. ► Go to www.irs.gov/Form1040 for instructions and the latest information. OMB No. 1545-0074

2021

Attachment
Sequence No. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR **Total Forms Filed = 41,817,723**

Your social security number

Par	t I Nonrefundable Credits				
1	Foreign tax credit. Attach Form 1116 if required			1	10,826,959
2	Credit for child and dependent care expenses from Form 2447 Form 2441	•		2	601,920
3	Education credits from Form 8863, line 19			3	8,122,952
4	Retirement savings contributions credit. Attach Form 8880			4	9,199,130
5	Residential energy credits. Attach Form 5695			5	2,606,659
6	Other nonrefundable credits:				
а	General business credit. Attach Form 3800	6a	522,507		
b	Credit for prior year minimum tax. Attach Form 8801	6b	124,228		
С	Adoption credit. Attach Form 8839	6с	71,702		
d	Credit for the elderly or disabled. Attach Schedule R	6d	40,263		
е	Alternative motor vehicle credit. Attach Form 8910	6e	22,513		
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f	166,244		
g	Mortgage interest credit. Attach Form 8396	6g	90,788		
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h	10		
i	Qualified electric vehicle credit. Attach Form 8834	6i	7,340		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j	87,508		
k	Credit to holders of tax credit bonds. Attach Form 8912	6k	2,804		
I	Amount on Form 8978, line 14. See instructions	6 I	2,238		
Z	Other nonrefundable credits. List type and amount ▶	6z	2,475		
7	Total other nonrefundable credits. Add lines 6a through 6z			7	1,096,247
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040	-SR,	or 1040-NR,		
	line 20			8	30,378,319
			/	1 !	

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

Cat. No. 71480G

(continued on page 2)
Schedule 3 (Form 1040) 2021

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

► Attach to Form 1040, 1040-SR, or 1040-NR. ► Go to www.irs.gov/Form1040 for instructions and the latest information. OMB No. 1545-0074

2021

Attachment
Sequence No. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
Total Forms Filed = 41,817,723

Your social security number

	10tal Forms Filed = 41,817,723				
Par	t I Nonrefundable Credits		-		
1	Foreign tax credit. Attach Form 1116 if required			1	29,482,592
2	Credit for child and dependent care expenses from Form 2447 Form 2441	1, lin 	e 11. Attach	2	1,077,709
3	Education credits from Form 8863, line 19			3	8,279,606
4	Retirement savings contributions credit. Attach Form 8880			4	1,759,140
5	Residential energy credits. Attach Form 5695			5	5,333,333
6	Other nonrefundable credits:				
а	General business credit. Attach Form 3800	6a	7,067,166		
b	Credit for prior year minimum tax. Attach Form 8801	6b	1,493,146		
С	Adoption credit. Attach Form 8839	6c	335,203		
d	Credit for the elderly or disabled. Attach Schedule R	6d	3,734		
е	Alternative motor vehicle credit. Attach Form 8910	6e	103,380		
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f	1,037,358		
g	Mortgage interest credit. Attach Form 8396	6g	136,590		
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h	77		
i	Qualified electric vehicle credit. Attach Form 8834	6i	14,891		
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j	42,683		
k	Credit to holders of tax credit bonds. Attach Form 8912	6k	27,601		
I	Amount on Form 8978, line 14. See instructions	6 I	52,194		
z	Other nonrefundable credits. List type and amount ▶	6z	53,083		
7	Total other nonrefundable credits. Add lines 6a through 6z			7	10,366,908
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040				
	line 20			8	56,263,649
			·		ued on page 2)
For Pa	perwork Reduction Act Notice, see your tax return instructions. Cat. No.	o. 71480	DG	Schedu	ile 3 (Form 1040) 2021

2021 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Schedule 3 (Form 1040) 2021 Page **2**

Par	t II Other Payments and Refundable Credits				
9	Net premium tax credit. Attach Form 8962			9	4,343,215
10	Amount paid with request for extension to file (see instructions)			10	2,579,513
11	Excess social security and tier 1 RRTA tax withheld			11	1,896,100
12	Credit for federal tax on fuels. Attach Form 4136			12	241,533
13	Other payments or refundable credits:				
а	Form 2439	13a	3,453		
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021 $\cdot\cdot\cdot\cdot$	13b	1,185,058		
С	Health coverage tax credit from Form 8885	13c	25,897		
d	Credit for repayment of amounts included in income from earlier years	13d	14,235		
е	Reserved for future use	13e			
f	Deferred amount of net 965 tax liability (see instructions)	13f	542		
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g	5,632,571		
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h	1,198,515		
Z	Other payments or refundable credits. List type and amount ▶	13z	21,397		
14	Total other payments or refundable credits. Add lines 13a through	13z		14	7,084,474
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 104 line 31	,	•	15	15,507,852

Schedule 3 (Form 1040) 2021

Schedule 3 (Form 1040) 2021

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Schedule 3 (Form 1040) 2021 Page 2 Part II Other Payments and Refundable Credits 3,625,006 9 10 333,198,369 Amount paid with request for extension to file (see instructions) 10 5,011,595 11 Excess social security and tier 1 RRTA tax withheld 11 236,397 12 Credit for federal tax on fuels. Attach Form 4136 12 13 Other payments or refundable credits: **a** Form 2439 13a 2,569 **b** Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021 13b 4,734,950 13c **c** Health coverage tax credit from Form 8885 35,459 d Credit for repayment of amounts included in income from earlier 78,679 13d 13e 744 **f** Deferred amount of net 965 tax liability (see instructions) . . . 13f g Credit for child and dependent care expenses from Form 2441, 11,980,877 13q h Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021 13h 5,434,617 z Other payments or refundable credits. List type and amount ▶ 13z 224,767 22,477,177 14 Total other payments or refundable credits. Add lines 13a through 13z 14 15 Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, 15 | 369,011,356

2021 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

SCHEDULE A (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Itemized Deductions

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

Attachment Sequence No. 07

OMB No. 1545-0074

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Name(s) shown on Form 1040 or 1040-SR Your social security number Total schedules filed = 15,058,347 Caution: Do not include expenses reimbursed or paid by others. Medical and 1 Medical and dental expenses (see instructions) 1 3,693,434 2 Enter amount from Form 1040 or 1040-SR, line 11 2 **Dental 3** Multiply line 2 by 7.5% (0.075) **Expenses** 3.689.290 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-... 3,693,434 **Taxes You** 5 State and local taxes. Paid a State and local income taxes or general sales taxes. You may include Income Taxes = 10.770.045 either income taxes or general sales taxes on line 5a, but not both. If General Sales Tax = 3,540,640 you elect to include general sales taxes instead of income taxes, 5a 14,310,685 **b** State and local real estate taxes (see instructions) 5b <u>12,779,463</u> **c** State and local personal property taxes 5c 5,710,239 **d** Add lines 5a through 5c 14,644,905 e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing 5e 14,644,905 6 Other taxes. List type and amount ▶ 843,125 **7** Add lines 5e and 6 7 14,687,846 Interest 8 Home mortgage interest and points. If you didn't use all of your home You Paid mortgage loan(s) to buy, build, or improve your home, see Caution: Your mortgage interest a Home mortgage interest and points reported to you on Form 1098. deduction may be limited (see 8a 11,371,650 instructions). b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., 8b 288,008 ----c Points not reported to you on Form 1098. See instructions for special 8c 966.680 8d **d** Mortgage insurance premiums (see instructions) 11,538,228 9 Investment interest. Attach Form 4952 if required. See instructions . 790.820 11,754,235 10 Gifts to 11 Gifts by cash or check. If you made any gift of \$250 or more, see Charity 11,205,939 Caution: If you 12 Other than by cash or check. If you made any gift of \$250 or more, made a gift and see instructions. You **must** attach Form 8283 if over \$500. . . . 12 6,518,539 got a benefit for it, see instructions. 285,802 **14** Add lines 11 through 13 12,117,590 Casualty and theft loss(es) from a federally declared disaster (other than net qualified Casualty and 15 disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See Theft Losses 10,137 16 Other—from list in instructions. List type and amount ▶ Other Gambling Loss Deduction = 565,974 Other than gambling deduction = 337,774 Itemized **Deductions** 16 Property income, casualty and theft deduction = 40,210 934,061 Total Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Itemized 17 14,842,685 Deductions 18 If you elect to itemize deductions even though they are less than your standard deduction,

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

SCHEDULE A (Form 1040)

Department of the Treasury

Itemized Deductions

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

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074 202 Attachment

Sequence No. 07 Internal Revenue Service (99) Name(s) shown on Form 1040 or 1040-SR Your social security number Total schedules filed = 15,058,347 Caution: Do not include expenses reimbursed or paid by others. Medical and 1 Medical and dental expenses (see instructions) 101,860,682 **Dental** 2 Enter amount from Form 1040 or 1040-SR, line 11 2 **Expenses 3** Multiply line 2 by 7.5% (0.075) 25,974,356 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-. . . 75,886,325 **Taxes You** 5 State and local taxes. Paid a State and local income taxes or general sales taxes. You may include Income Taxes = 250.997.086 either income taxes or general sales taxes on line 5a, but not both. If General Sales Tax = 7,642,643 you elect to include general sales taxes instead of income taxes, 5a 258,639,729 **b** State and local real estate taxes (see instructions) 5b 99,984,344 **c** State and local personal property taxes 4,202,143 **d** Add lines 5a through 5c 5d 362,507,801 e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing 5e 11<u>6,865,059</u> 6 Other taxes. List type and amount ▶ 2,358,043 119,541,517 Interest 8 Home mortgage interest and points. If you didn't use all of your home You Paid mortgage loan(s) to buy, build, or improve your home, see Caution: Your mortgage interest a Home mortgage interest and points reported to you on Form 1098. deduction may be limited (see 8a 136,189,746 instructions). b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., 8b 2,675,432 c Points not reported to you on Form 1098. See instructions for special 8с 1,526,640 8d **d** Mortgage insurance premiums (see instructions) 8e 143,469,233 9 Investment interest. Attach Form 4952 if required. See instructions . 9 | 19,804,509 163,273,742 Gifts to 11 Gifts by cash or check. If you made any gift of \$250 or more, see 11 162,797,205 Charity Caution: If you 12 Other than by cash or check. If you made any gift of \$250 or more, made a gift and see instructions. You must attach Form 8283 if over \$500. . . . 12 121,375,072 got a benefit for it, see instructions. 13 19,553,910 263.250.541 Casualty and theft loss(es) from a federally declared disaster (other than net qualified Casualty and 15 **Theft Losses** disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See 725,693 16 Other—from list in instructions. List type and amount ▶ Other Itemized Gambling Loss Deduction = 30,699,169 Other than gambling deduction = 4,533,713 **Deductions** 16 Property income, casualty and theft deduction = 1,679,640 36,912,522 Total Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Itemized 659,688,164 Deductions 18 If you elect to itemize deductions even though they are less than your standard deduction,

SCHEDULE B (Form 1040)

Interest and Ordinary Dividends

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

OMB No. 1545-0074

Internal Revenue Serv		► Attach to Form 1040 or 1040-SR.		Sequence	No. 0	8
Name(s) shown on r		Total schedules filed = 21,343,724	Your	social securi		
Part I Interest (See instructions and the Instructions for Form 1040, line	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address ▶		Am	ount	
2b.) Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.			1			
	2	Add the amounts on line 1	2	17,766,	456	
	3 4	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3	5,160	0	
		line 2b	4			
		If line 4 is over \$1,500, you must complete Part III.		Am	ount	
Part II	5	List name of payer ▶				
Ordinary Dividends						
(See instructions and the Instructions for Form 1040, line 3b.)			5			
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's						
name as the payer and enter the ordinary dividends shown						
on that form.	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6	17,038,	193	
		If line 6 is over \$1,500, you must complete Part III.	ļ			
Part III		nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividen account; or (c) received a distribution from, or were a grantor of, or a transferor to, a			Yes	No
Foreign Accounts and Trusts	7a	At any time during 2021, did you have a financial interest in or signature authority of account (such as a bank account, securities account, or brokerage account) locat country? See instructions				
Caution: If required, failure to file FinCEN Form 114 may	b	If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See Find and its instructions for filing requirements and exceptions to those requirements. If you are required to file FinCEN Form 114, enter the name of the foreign counterparts.	CEN F	orm 114		
result in substantial penalties. See instructions.	8	financial account is located ► During 2021, did you receive a distribution from, or were you the grantor of, or t				

SCHEDULE B (Form 1040)

Interest and Ordinary Dividends

OMB No. 1545-0074

Department of the Tre Internal Revenue Serv		Attach to Form 1040 or 1040-SR.		Attachme Sequence	nt No. 0 8	8
Name(s) shown on r		Total schedules filed = 21,343,724	Your	social securi		
Part I	1	List name of payer. If any interest is from a seller-financed mortgage and the		Amo	ount	
Interest	•	buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address ▶				
(See instructions and the Instructions for Form 1040, line 2b.)						
Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that			1			
form.	2	Add the amounts on line 1	2	99,071,2	204	
	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3	16,41		
	4	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b	4	10,11	<u> </u>	
Part II	Note:	If line 4 is over \$1,500, you must complete Part III. List name of payer ▶		Amo	ount	
Ordinary Dividends		List name of payer				
(See instructions and the Instructions for Form 1040, line 3b.)			5			
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm,						
list the firm's name as the payer and enter the ordinary						
dividends shown on that form.	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6	381,444,	115	
Part III		If line 6 is over \$1,500, you must complete Part III. nust complete this part if you (a) had over \$1,500 of taxable interest or ordinary divide	nds: (b) had a		
		n account; or (c) received a distribution from, or were a grantor of, or a transferor to, a			Yes	No
Foreign Accounts and Trusts	7a	At any time during 2021, did you have a financial interest in or signature authority of account (such as a bank account, securities account, or brokerage account) locat country? See instructions				
Caution: If required, failure to file FinCEN		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See FinC and its instructions for filing requirements and exceptions to those requirements.	CEN F	orm 114		
Form 114 may result in substantial	b	If you are required to file FinCEN Form 114, enter the name of the foreign cour financial account is located ▶				
penalties. See instructions.	8	During 2021, did you receive a distribution from, or were you the grantor of, or t foreign trust? If "Yes," you may have to file Form 3520. See instructions				

SCHEDULE C (Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

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

OMB No. 1545-0074 Attachment

Department of the Treasury

Internal Revenue Service (99) Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.

ivallie	of proprietor Total schedules filed	= 33,2	257,275				ocial Sec	curity number (SSN)
A	Principal business or profession	n, incli	uding product or service	(see instr	ructions)	В	Enter co	de from instructions
С	Business name. If no separate	busine	ess name, leave blank.			D	Employe	r ID number (EIN) (see instr.)
E	Business address (including s	uite or	room no.) ►					
_	City, town or post office, state							
F		Cash	· · · —					
G 					2021? If "No," see instructions for			
H			-					
					n(s) 1099? See instructions			
Par		requir	ea Form(s) 1099?			•		Yes No
1					f this income was reported to you odd		1	27.592.394
2						.	2	547,870
3						-	3	27,592,754
4	•	,				-	4	4,243,216
5							5	27,633,224
6			_		refund (see instructions)		6	1,169,655
7						•	7	27,972,515
Par							40	0.074.440
8	Advertising	8	7,059,340	18	Office expense (see instructions)	-	18	9,271,148 104,200
9	Car and truck expenses (see		45 244 540	19	Pension and profit-sharing plans	٠ ا	19	104,200
40	instructions)	9	15,311,549	20	Rent or lease (see instructions):		00 -	2 000 070
10	Commissions and fees .	10	1,556,350	a	Vehicles, machinery, and equipme		20a	2,090,978
11	Contract labor (see instructions)	11	2,559,101 60,869	b	Other business property	_ 	20b	3,614,838
12 13	Depletion	12	00,009	21 22	Repairs and maintenance Supplies (not included in Part III)	-	21	5,275,353
	expense deduction (not			23	Taxes and licenses		23	13,430,975 6,545,650
	included in Part III) (see instructions)	13	5,427,496	24	Travel and meals:		20	0,343,030
14	Employee benefit programs		209.836	а.	Travel	.	24a	5,044,629
15	(other than on line 19) . Insurance (other than health)	14 15	6,878,330	b	Deductible meals (see instructions)		24b	7,331,491
15 16	Insurance (other than health) Interest (see instructions):	15	0,070,000	25	Utilities	_ 	25	15,661,675
а	Mortgage (paid to banks, etc.)	16a	448,483	26	Wages (less employment credits	- +	26	1,030,784
b	Other	16b	1,435,057		Other expenses (from line 48) .		27a	14,308,581
17	Legal and professional services	17	9,554,513	b	Reserved for future use	-	27b	<u>, , , </u>
28	Total expenses before expen			_		•	28	24,930,879
29	Tentative profit or (loss). Subtr					. [29	29,032,792
30	Expenses for business use o	f vour	home. Do not report the	ese expe	enses elsewhere. Attach Form 88	29		
	unless using the simplified me	•	•					
	Simplified method filers only	: Enter	the total square footage	of (a) you	ur home: 2.493.130			
	and (b) the part of your home	used fo	or business: 2	,492,11	2 . Use the Simplified			
	Method Worksheet in the instr	ructions	s to figure the amount to	enter on	line 30	. [30	4.413.759
31	Net profit or (loss). Subtract	line 30	from line 29.		,			
	 If a profit, enter on both Sch checked the box on line 1, see 		, ,		, , ,		31	28,652,345
	• If a loss, you must go to line					_		
32	If you have a loss, check the b		t describes your investme	ent in this	s activity. See instructions.			
	 If you checked 32a, enter the 				1-	otal	Boxes	Checked = 7,402,3
	SE, line 2. (If you checked the		line 1, see the line 31 inst	ructions.)	Estates and trusts, enter on		32a 🗌	All investment is at risk.
	Form 1041, line 3.		nondeductible loss (+)/susp	ended loss carryover (-)		32b 🗌	Some investment is not
	• If you checked 32b, you mu	st attac	ch Form 6198. Your loss	mav be I	imited. 172,559			at risk.

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

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

Attachment

OMB No. 1545-0074

Department of the Treasury

Internal Revenue Service (99) Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.

Name	of proprietor Total schedules filed	= 33,2	257,275			Social	security number (SSN)
A	Principal business or profession	n, incl	uding product or service (s	ee instru	uctions)	B Ente	r code from instructions
С	Business name. If no separate	busine	ess name, leave blank.			D Empl	loyer ID number (EIN) (see instr.)
E	Business address (including s	uite or	room no.) ►				
-	City, town or post office, state						
F	Accounting method: (1)		• • —	—	Other (specify) ►		
G					2021? If "No," see instructions for		
Н							
I					n(s) 1099? See instructions		
J		requir	ed Form(s) 1099?				<u> </u> Yes <u> </u> No
Par							
1					this income was reported to you		1,834,086,335
•	Returns and allowances				1		8,175,909
2 3						. 3	1.825.910.426
4	Cost of goods sold (from line 4						503,102,615
5	Gross profit. Subtract line 4 fi	,					1,322,807,811
6	•				refund (see instructions)		27,811,773
7							1,350,619,584
Part							1,000,010,004
8	Advertising	8	20,882,700	18	Office expense (see instructions	. 18	19,293,734
9	Car and truck expenses (see			19	Pension and profit-sharing plans	· -	1,473,795
	instructions)	9	116,761,001	20	Rent or lease (see instructions):		
10	Commissions and fees .	10	24,354,859	a	Vehicles, machinery, and equipme	ent 20a	13,398,291
11	Contract labor (see instructions)	11	92,370,069	b	Other business property		44,774,024
12	Depletion	12	592,656	21	Repairs and maintenance		28,340,790
13	Depreciation and section 179			22	Supplies (not included in Part III)		65,062,652
	expense deduction (not included in Part III) (see			23	Taxes and licenses	. 23	23,483,560
	instructions)	13	65,735,123	24	Travel and meals:		
14	Employee benefit programs			а	Travel	. 24a	16,963,384
	(other than on line 19) .	14	3,365,241	b	Deductible meals (see		
15	Insurance (other than health)	15	25,416,282		instructions)	. 24b	15,138,730
16	Interest (see instructions):			25	Utilities	. 25	38,089,068
а	Mortgage (paid to banks, etc.)	16a	3,579,797	26	Wages (less employment credits	3) 26	109,622,257
b	Other	16b	7,106,056	27a	' '	. 27a	174,132,872
17	Legal and professional services	17	17,634,318	b	Reserved for future use	. 27b	
28	Total expenses before expen			ld lines 8	3 through 27a	▶ 28	927,622,923
29	Tentative profit or (loss). Subtr					. 29	422,996,661
30	•	•	•	se expe	nses elsewhere. Attach Form 88	29	
	unless using the simplified me			£ (=)	r home· 5,231,198		
	Simplified method filers only			96,763		_	
	and (b) the part of your home				. Use the Simplified		12,835,251
24	Method Worksheet in the instr		_	nter on i	ine 30	. 30	12,000,201
31	Net profit or (loss). Subtract IIf a profit, enter on both Sch			on Cak	odulo SE line 9 /lf vo.:		
	checked the box on line 1, see		• • • •		' '	31	411,501,369
	 If a loss, you must go to line 		onong. Lotates and irusts	, ciilei O	11 O 111 10-11, IIIIE 3.	31	
32	· · · · · · · · · · · · · · · · · · ·		t describes vour investmer	nt in thic	activity. See instructions		
UL.	•		•		· \	otal Box	es Checked = 7,671
				• • •	inic o, and on ochedule		All investment is at risk.
		20X 011	nondeductible loss (+	·)/susp	ended loss carryover (-)	-	Some investment is not
	• If you checked 32b, you mu st	st attac	ch Form 6198. Your loss m	nay be li	mited. 1,339,959		at risk.
32	If you have a loss, check the bound of the second of the s	e loss o box on	on both Schedule 1 (Form line 1, see the line 31 instru nondeductible loss (+	1040), luctions.) -)/susp	line 3, and on Schedule Estates and trusts, enter on ended loss carryover (-)	32 a [Some investmen

Scriedu	le C (1 0111 1040) 2021			rage z
Part	Cost of Goods Sold (see instructions)			,
33	Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (att		planation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor of "Yes," attach explanation		. 🗌 Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	1,118,526	
36	Purchases less cost of items withdrawn for personal use	36	2,237,609	
37	Cost of labor. Do not include any amounts paid to yourself	37	487,706	
38	Materials and supplies	38	1,908,331	
39	Other costs	39	930,107	
40	Add lines 35 through 39	40		
41	Inventory at end of year	41	1,094,955	
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		
Part	Information on Your Vehicle. Complete this part only if you are claiming car or are not required to file Form 4562 for this business. See the instructions for line Form 4562.			
43	When did you place your vehicle in service for business purposes? (month/day/year) /			
44	Of the total number of miles you drove your vehicle during 2021, enter the number of miles you used your	vehicle	e for:	
а	Business b Commuting (see instructions) c (Other		
45	Was your vehicle available for personal use during off-duty hours?		🗌 Yes	☐ No
46	Do you (or your spouse) have another vehicle available for personal use?		🗌 Yes	☐ No
47a	Do you have evidence to support your deduction?		🗌 Yes	☐ No
	If "Yes," is the evidence written?			☐ No
Part	Other Expenses. List below business expenses not included on lines 8–26 or lin	ie 30.		
40	Takel attack and an income Cotton have and an line O7-	T		

	e C (Form 1040) 2021			Page 2
Part	Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (atta	ıch ex	planation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing invento If "Yes," attach explanation	,	. Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	47,379,018	8
36	Purchases less cost of items withdrawn for personal use	36	290,731,77	<u>'3</u>
37	Cost of labor. Do not include any amounts paid to yourself	37	43,933,44	0
38	Materials and supplies	38	83,317,34	4
39	Other costs	39	85,340,604	4
40	Add lines 35 through 39	40		
41	Inventory at end of year	41	47,599,56	3
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		
Part		truck		
43	When did you place your vehicle in service for business purposes? (month/day/year) /	/		
44	Of the total number of miles you drove your vehicle during 2021, enter the number of miles you used your	/ehicle	e for:	
а	Business b Commuting (see instructions) c C	ther		
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?		Tes	☐ No
47a	Do you have evidence to support your deduction?		Tes	☐ No
_b Part	If "Yes," is the evidence written?	e 30	· · ☐ Yes	☐ No
48	Total other expenses. Enter here and on line 27a	48		

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

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

OMB No. 1545-0074

Attachment Sequence No. **12**

Department of the Treasury Internal Revenue Service (99)

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Name(s) shown on return Your social security number Total schedules filed = 29,449,908 Total Sales Reported with Form 1099 = 25,250,905 Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes ■ No 22,221,179

Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions)

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmento gain or loss Form(s) 8949, I line 2, column	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)			
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.	5,758,807	5,706,543			5,641,196			
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	12,860,016	12,802,031	4,899,60	1	12,542,158			
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	4,241,659	3,794,980	293,583		3,891,368			
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	2,444,567	2,412,323	145,260		2,361,199			
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	604,235			
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	5	1,067,088						
6	6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions								
7		Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back							

Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (see instructions)

lines This	instructions for how to figure the amounts to enter on the below. form may be easier to complete if you round off cents to le dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, I line 2, column	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)	
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.	4,858,586	4,818,360			4,744,925	
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	9,497,919					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked	5,274,661	4,851,563	215,86	5,861 4,952,379		
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	2,965,249	2,759,511	1,277,4	176	2,136,962	
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	2,754,222	
12	Net long-term gain or (loss) from partnerships, S corporat	ions, estates, and	trusts from Sched	dule(s) K-1	12	1,913,854	
13	Capital gain distributions. See the instructions				13	12,461,608	
14	4 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions						
15	Net long-term capital gain or (loss). Combine lines 8a on the back	15	22,445,215				

SCHEDULE D (Form 1040)

Department of the Treasury

Capital Gains and Losses

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

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

OMB No. 1545-0074

Attachment Sequence No. **12** ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Internal Revenue Service (99) Name(s) shown on return Your social security number Total schedules filed = 29,449,908 Total Sales Reported with Form 1099 = 13,833,265,149 Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (d) Adjustments Subtract column (e) lines below. (e) to gain or loss from Proceeds from column (d) and Cost This form may be easier to complete if you round off cents to (sales price) Form(s) 8949. Part I. (or other basis) combine the result whole dollars. with column (g) line 2. column (a) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1,253,338,532 8,602,995 1,244,735,537 1b Totals for all transactions reported on Form(s) 8949 with **Box A** checked 8.242.395.147 8,687,382,436 459.580.539 14,593,250 2 Totals for all transactions reported on Form(s) 8949 with **Box B** checked 1,654,413 470,705,750 481,664,112 12,612,776 Totals for all transactions reported on Form(s) 8949 with Box C checked 4.556.214 740,175,213 732.023.886 -3.595.114 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 5,746,808 5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 51.786.728 6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 221,232,322 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long--134,290,487 term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back Part II Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (g) (h) Gain or (loss) Adjustments Subtract column (e) lines below. Proceeds to gain or loss from Cost from column (d) and This form may be easier to complete if you round off cents to (or other basis) Form(s) 8949, Part II, (sales price) combine the result whole dollars. line 2, column (g) with column (g) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions 456,560,379 98,858,638 357,700,230 on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with 1,058,801,840 857,673,115 17,912,297 219,041,022 Box D checked Totals for all transactions reported on Form(s) 8949 with 479,548,862 255,665,612 -17,693,627 206,189,624 Box E checked

12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover

11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss)

1,131,739,424

710,301,994

Cat. No. 11338H

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

515,854,503 11 549,365,210

209,897,572

13 132,231,193

304,364,912)

15

1,627,079,840

10 Totals for all transactions reported on Form(s) 8949 with

Schedule D (Form 1040) 2021 Page **2**

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	28,571,454
	• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.		
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.		
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.		
17	Are lines 15 and 16 both gains? Yes. Go to line 18.		
	No. Skip lines 18 through 21, and go to line 22.		
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18	76,443
19	If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19	2,368,059
20	Are lines 18 and 19 both zero or blank and are you not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below.		
	☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:		
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21	()
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?		
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.		
	■ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

Schedule D (Form 1040) 2021

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Schedule D (Form 1040) 2021 Page 2 Part III Summary 1,492,789,23 16 Combine lines 7 and 15 and enter the result 16 • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. ■ No. Skip lines 18 through 21, and go to line 22. If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 amount, if any, from line 7 of that worksheet 18 7,137,074 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see 19 instructions), enter the amount, if any, from line 18 of that worksheet 19 63,276,215 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. ☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. 21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.

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

SCHEDULE E (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

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

OMB No. 1545-0074

2021

Attachment
Sequence No. 13

Name(s) shown on return

Total schedules filed = 19.706.152

Your social security number

	Total Sci	19,700,152									
Part		om Rental Real Estate and Roructions. If you are an individual, rep	-		-						
		in 2021 that would require you to									
		ile required Form(s) 1099?								<u>. 🗆 '</u>	res 🗌 No
1a		h property (street, city, state, ZIF		•							
Α		th Rental Properties = 9,635,		Te			f Rental Pr	_			6,743,589
В	Number of Returns	s with Royalties = 1,832,	776		Tota	l Numb	er of Roya	Ities		2	2,639,065
C	Time of Discounts 0					Foir	Rental	Dor	oonol	Hoo	
1b	Type of Property (from list below)	For each rental real estate propabove, report the number of fa personal use days. Check the	ir renta	al and			Nentai Days	Per	sonal Days		QJV
Α		if you meet the requirements to	o file a	sa İ	Α						
В		qualified joint venture. See inst	ructio	ns.	В						<u> </u>
_ C					С						
1 Sing	, ,	3 Vacation/Short-Term Rental 4 Commercial		nd yalties		7 Self- 8 Othe	Rental r (describe)				
Incom	e:	Properties:		REN			OYALTY B				C
3	Rents received		3	9,072	,278						
4	Royalties received		4				1,763,787	7			
Expen	ses:										
5	Advertising		5								
6	Auto and travel (see instr		6								
7	Cleaning and maintenand		7								
8	Commissions		8								
9	Insurance		9								
10	= -	onal fees	10								
11	_		11								
12		banks, etc. (see instructions)	12	4,676	,418						
13	Other interest		13							508,	561
14	Repairs		14								
15	Supplies		15	8,121	366						
16 17	Taxes		16 17	0,121	,,500						
18	Utilities	depletion	18	7,431	678		725,045	!			
19	Other (list)	·	19	7,431	,070		725,045)			
20	` ′	s 5 through 19	20	9,212	2 642		1,174,774	4			
21	•	e 3 (rents) and/or 4 (royalties). If		3,212	-,0		.,	-			
21		ructions to find out if you must									
	file Form 6198		21	9,418	8,948		1,757,112	2			
22		tate loss after limitation, if any,				r	ondeducti		ental	loss =	1,763,133
	on Form 8582 (see instru		22	(4,250	,090						1,046,736)
23a	Total of all amounts repo	rted on line 3 for all rental prope	rties			23a	9,072,278				
b	Total of all amounts repo	rted on line 4 for all royalty prop	erties			23b	1,763,787	1			
С	Total of all amounts repo	rted on line 12 for all properties				23c	4,676,418				
d		rted on line 18 for all properties				23d	8.045.283				
е	•	rted on line 20 for all properties				23e	10,145,176	6			
24	·	mounts shown on line 21. Do no		•				.	24	7,047	
25	Losses. Add royalty losses	s from line 21 and rental real estate	losses	s from lir	ne 22. E	nter tota	al losses here	e .	25	4,758	,212)
26		and royalty income or (loss).									
		and line 40 on page 2 do not		-				on	.		
	Schedule 1 (Form 1040),	line 5. Otherwise, include this ar	nount	in the t	otal on	line 41	on page 2		26	9,525	5,796

SCHEDULE E (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.) ► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

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

OMB No. 1545-0074 Attachment Sequence No. 13

Name(s) shown on return

Your social security number

()	Total	schedules filed = 19,	706,152								•	
Part		From Rental Real Estate										se
		nstructions. If you are an indiv	ridual, repo	ort farı	m rental i	ncome o	or loss f	rom Form 48	35 on pa	age 2, line	40.	
A Dic	l you make any paymer	nts in 2021 that would requi	ire you to	file F	orm(s) 1	099? S	ee inst	ructions .		🗆	Yes 🗌	No
B If "	Yes," did you or will yo	ou file required Form(s) 109	9?							\square	Yes 🗌	No
1a	Physical address of e	each property (street, city, s	state, ZIP	code	e)							
Α												
В												
С												
1b	Type of Property (from list below)	For each rental real es above, report the num personal use days. Ch	state prop	erty l r rent	isted al and			Rental Days		nal Use ays	QJ/	/
Α		if you meet the require	ements to	file a	ısa İ	Α						
В		qualified joint venture	. See insti	ructio	ns.	В						
С						С						
	of Property:											
_	le Family Residence	3 Vacation/Short-Term						Rental				
	ti-Family Residence	4 Commercial		6 Ro	yalties			r (describe)				
Incom			perties:			ATA		ROYALTYB	3		С	
3				3	387,57	9,287						
_ 4				4				42,074,08	8			
Expen				_								
5				5								
6	·	nstructions)		6								
7	•	ance		7								
8				8 9								
9				10								
10 11	_	ssional fees		11								
12	_	d to banks, etc. (see instruc		12	52,784	1 320						
13			-	13	32,70	+,320				6.75	2,842	
14				14						0,70	2,042	
15				15								
16				16	57,83	8,844						
17				17								
18		or depletion		18	102,55	8,778		4,432,54	2			
19		' 		19								
20		ines 5 through 19		20	371,71	18,414		11,353,64	19			
21	Subtract line 20 from	line 3 (rents) and/or 4 (roya	alties). If									
		nstructions to find out if yo										
	file Form 6198			21	15,86	0,873		30,720,43	39			
22		estate loss after limitation	, if any,				- 1	nondeducti	ble rent	tal loss =	35,328,	213
	on Form 8582 (see in:	•		22	(56,56	6,666		suspended		arryover	= <u>19,070,</u>	869)
23a		eported on line 3 for all rent						387,579,28				
b		eported on line 4 for all roya		erties			23b	42,074,08				
С		eported on line 12 for all pro	-					52,784,320				
d		eported on line 18 for all pro	•					106,991,32				
е		eported on line 20 for all pro	-				23e	383,072,06				
24	•	e amounts shown on line 2			-						82,444	
25		sses from line 21 and rental r								5 (76,5	43,788)
26		ate and royalty income or										
		V, and line 40 on page 2			-							
	ochequie i iForm 104	0). line 5. Otherwise, include	ue this an	nount	ın met	บเลเ ดท	iine 41	on page 2	. 12	6 62.8	38.656	

Schedu	ule E (Form 1040) 2021						А	ttachment Sequence N	No. 13		Page 2		
Name(s	s) shown on return. Do not enter na	me and social secu	urity number if sho	own on	other side.		-		Your so	cial securi	ty number		
<u> </u>	TI IDO							0 -					
Part	on: The IRS compares am III Income or Loss F									a dietribut	tion dispose of		
· a. c	stock, or receive a loar		•		•			•					
	computation. If you re		•								•		
	line 28 and attach For	n 6198. See inst	ructions.										
27	Are you reporting any lo	ss not allowed	l in a prior vea	ar due	to the at-ri	sk or	basi	is limitations, a pr	ior vea	r unallow	ed loss from a		
	passive activity (if that I												
	see instructions before										es 🗌 No		
28	(a) Name		(b) Ente		(c) Check foreign	if		(d) Employer identification		Check if omputation	(f) Check if any amount is		
	(4)		for S corporation partnership			р	number			quired	not at risk		
Α	Number of P	ARTNERSHIP	S 6,854,	530	35,4	75					10,789,893		
В													
C	Number o	f S-CORPS	5,669,	982							338,905		
D	Passive Incom	o and Loss		I			Non	passive Income	and L				
			-1 1	(2) N				•					
	(g) Passive loss allowed (attach Form 8582 if required)	, ,	sive income hedule K-1		onpassive loss see Schedule		ea	(j) Section 179 expededuction from Form			passive income Schedule K-1		
Α	PARTNERSHIPS	PARTNE	RSHIPS	PA	RTNERSH	IPS .		PARTNERSHIPS	3	PART	NERSHIPS		
В	1,171,601	1,726,33			1,837,598			210.772	-		04,320		
C	S-CORPS	S-CORF			S-CORPS			S-CORPS			ORPS		
D	155,758	520,65	5		1,595,009			530,813			22,604		
29a	Totals	2,140,6	52							5,62	28,499		
b	Totals 1.270.245			;	3,251,298			728,384					
30	Add columns (h) and (k) o	f line 29a. .							30	7,0	10,230		
31	Add columns (g), (i), and (••							31		24,612		
32	Total partnership and S				ombine line	s 30 a	and (31	32	9,33	31,698		
Part	Income or Loss I	rom Estates	and Trusts	;									
33			(a) Name							(b) Emidentification	nployer on number		
$\overline{}$													
В													
	Passiv	e Income and	Loss					Nonpassive Ir	ncome	and Los	S		
	(c) Passive deduction or los	allowed	(d) Pass	sive inco	ome		(e) D	eduction or loss		(f) Other in	come from		
	(attach Form 8582 if req		()					Schedule K-1		(f) Other income from Schedule K-1			
Α													
В													
34a	Totals		297,	880						404,13	39		
b	Totals 46,167						5	0,855					
35	Add columns (d) and (f) o								35		.769		
36	Add columns (c) and (e) c								36		489)		
37 Post	Total estate and trust in IV Income or Loss F					 t Co.			37		,979		
Part	V income or Loss i			_	Excess inclus			T .					
38	(a) Name		er identification ımber		Schedules Q, (see instruct	line 2c		(d) Taxable income (if from Schedules Q,	net loss) line 1b		ncome from ules Q, line 3b		
					1,351	10113)		9,957					
39	Combine columns (d) and	(e) only. Enter	the result he	re and		the to	otal c	· ·	39	11,	600		
Part		(2) 2 mj : 2or								,	- 		
40	Net farm rental income or	(loss) from Fo	rm 4835. Also	o, com	plete line 4	2 bel	ow .		40	423	,298		
41	Total income or (loss). Combin	, ,			•				41		0,783		
42	Reconciliation of farmin	g and fishing	income. En	ter vo	ur gross								
	farming and fishing income												
	(Form 1065), box 14, code												
	AD; and Schedule K-1 (For	n 1041), box 14	, code F. See i	nstruc	tions	42	(657,024					
43	Reconciliation for real estate												
	(see instructions), enter the ne			-									
	1040, Form 1040-SR, or Form			activitie	S III WIIICN	43		502 759					

Schedu	ule E (Form 10	040) 2021						Α	ttachment Sequence I	No. 13		Page 2
Name(s	s) shown on r	eturn. Do not enter name	and social security	y number if sho	own on	other side.				Your so	cial securi	ty number
		RS compares amour		-								
Part		ome or Loss Fro		•					•			•
		ck, or receive a loan re nputation. If you report		•								•
		28 and attach Form 6			Ly IOI W	mich any ai	HOUHL	15 110	t at risk, you must	CHECK II	ie box iii c	column (i) on
						4- 44	:-1: -:					
27		u reporting any loss e activity (if that loss										
		tructions before con				-					- —	es No
28			<u> </u>	(b) Enter		(c) Check			(d) Employer		heck if	(f) Check if
20		(a) Name		partners for S corp		foreign partnershi	ip		identification number		mputation quired	any amount is not at risk
Α												
В												
D		Danaius Incomo a						NI a sa				
		Passive Income a							passive Income			
		ssive loss allowed rm 8582 if required)	(h) Passive from Schee			onpassive los see Schedule		ed	(j) Section 179 exp deduction from Forn			passive income Schedule K-1
Α	PART	NERSHIPS	PARTNER	SHIPS	РΔ	RTNERSH	IPS		PARTNERSHIPS	3	PART	NERSHIPS
В		625,106	92,031,222			80,653,15			5,463,046			374,352
С		CORPS	S-CORPS			S-CORPS			S-CORPS			ORPS
D	6,4	114,019	50,765,772	2	1	05,820,01	3		25,728,516			188,912
29a	Totals		142,796,99	4							1,212	,563,264
b	Totals	62,039,126			2	86,473,170			31,191,562			
30		ımns (h) and (k) of lir								30		,360,258
31		ımns (g), (i), and (j) o								31	<u> </u>	
32 Port		rtnership and S cor come or Loss Fro	•			ombine line	s 30 a	and :	31	32	9/5,0	556,400
Part	III IIIC	Office of Loss Fro	III Estates a	iiu iiusis	•						(b) En	nployer
33				(a) Name								on number
Α												
В												
		Passive In	come and Lo	oss					Nonpassive I	ncome	and Los	s
		sive deduction or loss allo			sive income chedule K-1			(e) Deduction or loss from Schedule K-1		(f) Other income from Schedule K-1		
	(att	ach Form 8582 if required	۵)	from Sc	nedule	K-1		trom	Schedule K-1		Sched	ule K-1
<u>A</u>												
B 240	Totala			40.244	1.640						22 402 5	205
34a b	Totals Totals	2,226,839		19,214	1,040			6.6	92,483		33,193,	205
35		imns (d) and (f) of lin	 e 34a					0,0	32,403	35	52.40	7,844
36		ımns (c) and (e) of lir								36		9,322
37		tate and trust incor		Combine lin	nes 35	and 36 .				37		88,523
Part	IV Inc	ome or Loss Fro	m Real Esta	ite Mortga	age Ir	nvestmen	t Co	ndui	its (REMICs) —	Residu	ıal Hold	ler
38		(a) Name	(b) Employer i			Excess inclusions Schedules Q,			(d) Taxable income (ncome from
		(4)	numb	oer		(see instruct			from Schedules Q,	line 1b	Sched	ules Q, line 3b
					L	106			6,430	1		
39		columns (d) and (e)	only. Enter th	ne result her	re and	include in	the to	otal c	n line 41 below	39	7,6	39
Part 40		mmary rental income or (lo	ss) from Form	1925 Alec		nloto lino /	12 hal	low		40	E	E 0.5.5
41		ne or (loss). Combine line	•			•				41		5,955 647,173
		• •					001100		. J. 10 10/, 1110 0	71	1,007,0	77,170
42		iation of farming a and fishing income rep										
	•	65), box 14, code B; \$										
		Schedule K-1 (Form 1					42	14	9,124,014			
43	Reconcilia	ition for real estate prof	fessionals. If you	ı were a real e	state c	rofessional						
	(see instru	ctions), enter the net inc	come or (loss) yo	ou reported a	ınywher	e on Form						
		n 1040-SR, or Form 1040										
	you materi	ally participated under the	e passive activity	loss rules .			43	83	3,686,205			

SCHEDULE EIC (Form 1040)

Earned Income Credit

Qualifying Child Information



Department of the Treasury Internal Revenue Service (99) Complete and attach to Form 1040 or 1040-SR only if you have a qualifying child.

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

Sequence No. 43

Your social security number

Name(s) shown on return

Total schedules filed = 17,107,667

If you are separated from your spouse, filing a separate return and meet the requirements to claim the EIC (see instructions), check here

Before you begin:

- See the instructions for Form 1040, lines 27a, 27b, and 27c, to make sure that (a) you can take the EIC, and (b) you have a qualifying child.
- Be sure the child's name on line 1 and social security number (SSN) on line 2 agree with the child's social security card. Otherwise, at the time we process your return, we may reduce your EIC. If the name or SSN on the child's social security card is not correct, call the Social Security Administration at 800-772-1213.
- If you have a child who meets the conditions to be your qualifying child for purposes of claiming the EIC, but that child doesn't have an SSN as defined in the instructions for Form 1040, lines 27a, 27b, and 27c, see the instructions.



- You can't claim the EIC for a child who didn't live with you for more than half of the year.
- If your child doesn't have an SSN as defined in the instructions for Form 1040, lines 27a, 27b, and 27c, see the instructions.
- If you take the EIC even though you are not eligible, you may not be allowed to take the credit for up to 10 years. See the instructions for details.
- It will take us longer to process your return and issue your refund if you do not fill in all lines that apply for each qualifying child.

Q	ualifying Child Information	Child 1	Child 2	Child 3			
1	Child's name	First name Last name	First name Last name	First name Last name			
	If you have more than three qualifying children, you have to list only three to get the maximum credit.						
2	Child's SSN The child must have an SSN as defined in the instructions for Form 1040, lines 27a, 27b, and 27c, unless the child was born and died in 2021 or you are claiming the self-only EIC (see instructions). If your child was born and died in 2021 and did not have an SSN, enter "Died" on this line and attach a copy of the child's birth certificate, death certificate, or hospital medical records showing a live birth.	17,106,660	8,607,185	3,064,236			
3	Child's year of birth	Year 17.107.667 If born after 2002 and the child is younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.	Year 8.607.185 If born after 2002 and the child is younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.	Year 3.064.236 If born after 2002 and the child is younger than you (or your spouse, filing jointly), skip lines 4a and 4b; go to line 5.			
4 a	Was the child under age 24 at the end of 2021, a student, and younger than you (or your spouse, if filing jointly)?	958,408 Yes. No. Go to Go to line 4b. line 5.	260,342 Yes. No. Go to line 4b. line 5.	63,273 Yes. No. Go to Go to line 4b. line 5.			
k	Was the child permanently and totally disabled during any part of 2021?	Yes. No. Go to Ine child is not a qualifying child.	87.632 Yes. No. Go to The child is not a qualifying child.	Yes. No. Go to Ine child is not qualifying child.			
5	Child's relationship to you	17,107,667	8,607,185	3,064,236			
	(for example, son, daughter, grandchild, niece, nephew, eligible foster child, etc.)	, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
6	Number of months child lived with you in the United States during 2021						
	• If the child lived with you for more than half of 2021 but less than 7 months, enter "7."	17,107,667	8,607,185	3,064,236			
	• If the child was born or died in 2021 and your home was the child's home for more than half the time he or she was alive during 2021, enter "12."	Do not enter more than 12 months.	Do not enter more than 12 months.	Do not enter more than 12 months.			

SCHEDULE EIC (Form 1040)

Earned Income Credit

If you are separated from your spouse, filing a separate return and meet the requirements to claim the EIC (see instructions), check here

Qualifying Child Information



Department of the Treasury Internal Revenue Service (99) Complete and attach to Form 1040 or 1040-SR only if you have a qualifying child.

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

Name(s) shown on return

Total schedules filed = 17.107.667

Your social security number

Before you begin:

- See the instructions for Form 1040, lines 27a, 27b, and 27c, to make sure that (a) you can take the EIC, and (b) you have a qualifying child.
- Be sure the child's name on line 1 and social security number (SSN) on line 2 agree with the child's social security card. Otherwise, at the time we process your return, we may reduce your EIC. If the name or SSN on the child's social security card is not correct, call the Social Security Administration at 800-772-1213.
- If you have a child who meets the conditions to be your qualifying child for purposes of claiming the EIC, but that child doesn't have an SSN as defined in the instructions for Form 1040, lines 27a, 27b, and 27c, see the instructions.



- You can't claim the EIC for a child who didn't live with you for more than half of the year.
- If your child doesn't have an SSN as defined in the instructions for Form 1040, lines 27a, 27b, and 27c, see the instructions.
- If you take the EIC even though you are not eligible, you may not be allowed to take the credit for up to 10 years. See the instructions for details.
- It will take us longer to process your return and issue your refund if you do not fill in all lines that apply for each qualifying child.

Q	ualifying Child Information	С	hild 1	С	hild 2	Child 3			
1	Child's name	First name	Last name	First name	Last name	First name	Last name		
	If you have more than three qualifying children, you have to list only three to get the maximum credit.								
2	Child's SSN The child must have an SSN as defined in the instructions for Form 1040, lines 27a, 27b, and 27c, unless the child was born and died in 2021 or you are claiming the self-only EIC (see instructions). If your child was born and died in 2021 and did not have an SSN, enter "Died" on this line and attach a copy of the child's birth certificate, death certificate, or hospital medical records showing a live birth.								
3	Child's year of birth	younger than yo	02 and the child is ou (or your spouse, if kip lines 4a and 4b;	younger than yo	02 and the child is ou (or your spouse, if kip lines 4a and 4b;	younger than y	002 and the child is ou (or your spouse, if skip lines 4a and 4b;		
4 8	Was the child under age 24 at the end of 2021, a student, and younger than you (or your spouse, if filing jointly)?	Go to line 5.	No. Go to line 4b.	Go to line 5.	No. Go to line 4b.	Go to line 5.	No. Go to line 4b.		
ŀ	Was the child permanently and totally disabled during any part of 2021?	Yes. Go to line 5.	No. The child is not a qualifying child.	Yes. Go to line 5.	No. The child is not a qualifying child.	Go to line 5.	No. The child is not a qualifying child.		
5	Child's relationship to you		, , , , , , , , , , , , , , , , , , ,		1 5 5		1 7 5		
	(for example, son, daughter, grandchild, niece, nephew, eligible foster child, etc.)								
6	Number of months child lived with you in the United States during 2021								
	• If the child lived with you for more than half of 2021 but less than 7 months, enter "7."								
	• If the child was born or died in 2021 and your home was the child's home for more than half the time he or she was alive during 2021, enter "12."	Do not enter	months more than 12	Do not enter months.	months more than 12	Do not enter months.	months more than 12		

SCHEDULE F (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Farming

► Attach to Form 1040, Form 1040-SR, Form 1040-NR, Form 1041, or Form 1065.
 ► Go to www.irs.gov/ScheduleF for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment
Sequence No. 14

Name o	Name of proprietor Total schedules filed = 1,801,274								ll security number (SSN)			
A Prir	ncipal crop or activity	В	Enter code from P	art IV	C Accounti	ng method:	D Employ	yer ID n	umber (EIN) (see instr.)			
E Did	you "materially participate" in the operation	on of t	his business during	2021? If "I	No." see instruc		n passive	losses	☐ Yes ☐ No			
	you make any payments in 2021 that wou		-				•		☐ Yes ☐ No			
	Yes," did you or will you file required Form		•	. ,					Yes No			
Part												
1a	Sales of purchased livestock and other r		•	•),811	1, 0.110.				
b	Cost or other basis of purchased livesto		•	,	t t		,861	-				
C	<u> </u>							1c	383,702			
2	Sales of livestock, produce, grains, and							2	962.534			
2 3a	Cooperative distributions (Form(s) 1099-		1 1	5,384	1			3b	** 451,581			
	Agricultural program payments (see insti			3,844				4b	** 599,922			
4a			.6) .	-	4D Taxa	ble amount			<u> </u>			
5a	Commodity Credit Corporation (CCC) lo		1 1			ble emerint		5a	** 2,589 ** 257			
b	CCC loans forfeited			257		ble amount		5c	251			
6	Crop insurance proceeds and federal cro Amount received in 2021	•	1 1 1	instruction 36,003	l l	ble one court		CI-	** 127,629			
а						ble amount		6b	121,020			
C -	If election to defer to 2022 is attached, o			_		unt deferred fro		6d	6,715 ** 160 386			
7	,							7	100,000			
8	Other income, including federal and stat	-			•	•		8	** 535,067			
9	Gross income. Add amounts in the rigaccrual method, enter the amount from						use the	9	1,502,237			
Part	Farm Expenses—Cash and A	ccru	al Method. Do no	ot include	personal or I	iving expense	es. See in	struct	ions.			
10	Car and truck expenses (see	10	480,599		Pension and p	٥.		23	1,574			
44	instructions). Also attach Form 4562	10	-	†	Rent or lease (,	040				
11	Chemicals	11	476,504 27,595	†	Vehicles, mach			24a				
12	Conservation expenses (see instructions)	12	394,179	†	Other (land, an	• •		24b	1,167,790			
13	Custom hire (machine work)	13	334,173	†	Repairs and m			25				
14	Depreciation and section 179 expense (see instructions)	14	1,314,169		Seeds and plan Storage and w			26 27	549,417			
15	Employee benefit programs other than			28	Supplies			28	1,083,523			
	on line 23	15	19,639	29	Taxes			29	971,430			
16	Feed	16	945,659	30	Utilities			30				
17	Fertilizers and lime	17	639,882	31	Veterinary, bre	eding, and med	dicine .	31				
18	Freight and trucking	18		32	Other expense	s (specify):						
19	Gasoline, fuel, and oil	19	1,048,443	а				32a				
20	Insurance (other than health)	20	873,938	b				32b				
21	Interest (see instructions):			С				32c				
а	Mortgage (paid to banks, etc.)	21a	341,587	d				32d				
b	Other	21b	410,828	е				32e				
22	Labor hired (less employment credits)	22	248,798	f				32f				
33	Total expenses. Add lines 10 through 3						▶	33	1,715,716			
34	Net farm profit or (loss). Subtract line 3	3 fron	n line 9 Total of a	II unmar	ked expense	s 1,505,35		34	1,723,829			
	If a profit, stop here and see instructions					Nonded			Suspended Carryover			
35	Reserved for future use.		•	•			20,013	3				
36	Check the box that describes your inves	tment	in this activity and s	ee instruc	tions for where	to report your	loss:					
а		b [] Some investment is									
For Pa	perwork Reduction Act Notice, see the	sepa	rate instructions.		Cat. No. 113	46H		Schedu	ile F (Form 1040) 2021			

SCHEDULE F (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Farming

► Attach to Form 1040, Form 1040-SR, Form 1040-NR, Form 1041, or Form 1065.
 ► Go to www.irs.gov/ScheduleF for instructions and the latest information.

2021
Attachment
Sequence No. 14

OMB No. 1545-0074

Principal crop or activity	ВЕ	nter c	ode	from	Part IV		C A	ccoun	ting m	ethod:	D En	nployer ID	number	(EIN)	(see instr
		>						Casł	ո 🔲 .	Accrual					
oid you "materially participate" in the operati	on of th	is busin	iess	during	g 2021?	lf "l	No," se	e instru	uctions	for limit	on pass	sive losse	s 🗌 Y	es	☐ No
id you make any payments in 2021 that wo													□ Y	es	☐ No
"Yes," did you or will you file required Forn														es	☐ No
rt I Farm Income – Cash Method	. Com	plete F	Part	s I an	d II. (Ad	ccru	ıal met	hod. (Comp	lete Par	ts II an	d III, and	Part I,	line	9.)
Sales of purchased livestock and other in the sales of purchased livestock.	esale ite	ems (se	e in	structi	ons)				1a	39,8	90,713	3			
b Cost or other basis of purchased livesto	ck or ot	her iten	ns re	porte	d on line	e 1a			1b	22,3	46,345				
Subtract line 1b from line 1a												. 1c	17	,544	4,368
Sales of livestock, produce, grains, and	other pr	oducts	you	raise	d.							. 2	10	7,81	4,665
a Cooperative distributions (Form(s) 1099-	PATR)	. 3	3a	** 30	,349,6	10	3b	Tax	able a	mount		. 3b	** 24	I,62	7,739
a Agricultural program payments (see inst	ructions	6). 4	la l	** 9	273,71	3	4b	Tax	able a	mount		. 4b	** 9	,214	,965
a Commodity Credit Corporation (CCC) lo	ans rep	orted u	nde	· elect	ion .							. 5a	** (331,	097
CCC loans forfeited		. 5	5b	**	36,783		5c	Tax	able a	mount		. <u>5c</u>	**	36,7	783
Crop insurance proceeds and federal cr	op disas	ster pay	/mei	nts (se	e instru	ctio	ns):								
a Amount received in 2021		. 6	ia i	5	,518,74	5	6b	Tax	able a	mount		. 6b	** 4,	,882	,350
If election to defer to 2022 is attached, of	heck he	ere .				▶ [6d	Am	ount d	eferred fr	om 202	20 6d	_		833
Custom hire (machine work) income .												. 7	** 5	,540	,675
Other income, including federal and stat	e gasoli	ne or fu	uel t	ax cre	dit or re	func	d (see in	structi	ons) .			. 8	**12	2,74	3,909
Gross income. Add amounts in the rig												he			
accrual method, enter the amount from												▶ 9		0,02	3,534
rt II Farm Expenses—Cash and A	ccrua	l Meth	od.	Do r	not incl	ude	perso	nal or	living	expens	es. Se	e instruc	tions.		
Car and truck expenses (see					23		Pension	n and p	orofit-s	sharing pl	ans.	. 23		17,9	970
instructions). Also attach Form 4562	10	1,97	78,1	64	24		Rent or	lease	(see in	struction	ıs):				
Chemicals	11	9,80				а	Vehicle	s, mac	hinery	, equipm	ent .	. 24a	ı		
Conservation expenses (see instructions)	12		5,01			b	Other (and, a	nimals	, etc.) .		. 24b	_		
Custom hire (machine work)	13	5,8	18,8	58	25		Repairs	and n	nainter	nance .		. 25			3,764
Depreciation and section 179 expense					26		Seeds	and pla	ants .			. 26	11	,460	6,593
(see instructions)	14	44,2	20,	225	27		Storage	e and v	wareho	using		. 27			
Employee benefit programs other than					28		Supplie	s				. 28			,895
on line 23	15		6,7		29		Taxes					. 29	4,	145	,929
Feed	16	21,0	70,	322	30		Utilities					. 30			
Fertilizers and lime	17	17,8	29,	208_	31		Veterin	ary, br	eeding	, and me	dicine	. 31			
Freight and trucking	18				32		Other e	xpens	es (spe	ecify):					
Gasoline, fuel, and oil	19	6,78	36,5	62		а							_		
Insurance (other than health)	20	7,16	<u> </u>	23		b						32b	1		
Interest (see instructions):						С						32c	;		
a Mortgage (paid to banks, etc.)	21a	4,70)3,7	32		d						32d			
b Other	21b	3,74				е						32e	1		
Labor hired (less employment credits)	22	7,44				f						32f			
Total expenses. Add lines 10 through 3												▶ 33			1,443
Net farm profit or (loss). Subtract line 3									es 4			. 34	-26,1		
If a profit, stop here and see instructions	for whe	ere to re	oqe	t. If a	loss, co	mpl	ete line	36.		Nonded		Loss (+)	/ Susp	ende	ed Carry
Reserved for future use.											223	3,644			
Check the box that describes your inves	_			-				r where	e to re	port your	loss:				
All investment is at risk.	b □:	Some ii	nves	tment	is not a	ıt ris	k.								

Schedule F (Form 1040) 2021 Page **2**

Part	Farm Income – Accrual Method (see instructions)		
37	Sales of livestock, produce, grains, and other products (see instructions)	37	962,534
38a	Cooperative distributions (Form(s) 1099-PATR) . 28a ** 455,384 38b Taxable amount	38b	** 451,581
39a	Agricultural program payments	39b	** 599,922
40 a	Commodity Credit Corporation (CCC) loans: CCC loans reported under election	40a	** 2,589
b	CCC loans forfeited	40c	** 257
41	Crop insurance proceeds	41	** 127,629
42	Custom hire (machine work) income	42	** 160,386
43	Other income (see instructions)	43	** 535,067
44	Add amounts in the right column for lines 37 through 43 (lines 37, 38b, 39b, 40a, 40c, 41, 42, and 43)	44	10,568
45	Inventory of livestock, produce, grains, and other products at beginning of the year. Do not include sales reported on Form 4797		
46	Cost of livestock, produce, grains, and other products purchased during the year 46		
47	Add lines 45 and 46		
48	Inventory of livestock, produce, grains, and other products at end of year		
49	Cost of livestock, produce, grains, and other products sold. Subtract line 48 from line 47*	49	
50	Gross income. Subtract line 49 from line 44. Enter the result here and on Part I, line 9	50	10,894

^{*} If you use the unit-livestock-price method or the farm-price method of valuing inventory and the amount on line 48 is larger than the amount on line 47, subtract line 47 from line 48. Enter the result on line 49. Add lines 44 and 49. Enter the total on line 50 and on Part I, line 9.

Part IV Principal Agricultural Activity Codes



Do not file Schedule F (Form 1040) to report the following.

• Income from providing agricultural services such as soil preparation, veterinary, farm labor, horticultural

services if your principal source of income is from providing such services. Instead, file Schedule C (Form 1040).

- Income from breeding, raising, or caring for dogs, cats, or other pet animals. Instead, file Schedule C (Form 1040).
- Income from managing a farm for a fee or on a contract basis. Instead, file Schedule C (Form 1040).
- Sales of livestock held for draft, breeding, sport, or dairy purposes. Instead, file Form 4797.

These codes for the Principal Agricultural Activity classify farms by their primary activity to facilitate the administration of the Internal Revenue Code. These six-digit codes are based on the North American Industry Classification System (NAICS).

Select the code that best identifies your primary farming activity and enter the six-digit number on line B.

Crop Production

111100 Oilseed and grain farming111210 Vegetable and melon farming

111300	Fruit and	tree nut	farming
--------	-----------	----------	---------

111400	Greenhouse,	nursery, and	floriculture	product	ion
--------	-------------	--------------	--------------	---------	-----

111900 Other crop farming

Animal Production

ng

112112 Cattle feedlots

112120 Dairy cattle and milk production

112210 Hog and pig farming

112300 Poultry and egg production

112400 Sheep and goat farming

112510 Aquaculture

112900 Other animal production

Forestry and Logging

113000 Forestry and logging (including forest nurseries and timber tracts)

113110 Timber tract operations

113210 Forest nurseries and gathering of forest products

113310 Logging

Schedule F (Form 1040) 2021 Page 2

	ile F (Form 1040) 2021		Page 2
Part	Farm Income – Accrual Method (see instructions)		
37	Sales of livestock, produce, grains, and other products (see instructions)	37	107,814,665
38a	Cooperative distributions (Form(s) 1099-PATR) . 38a ** 30,349,610 38b Taxable amount	38b	** 24,627,739
39a	Agricultural program payments	39b	** 9,214,965
40 a	Commodity Credit Corporation (CCC) loans: CCC loans reported under election	40a	** 331,097
b	CCC loans forfeited	40c	** 36,783
41	Crop insurance proceeds	41	** 4,882,350
42	Custom hire (machine work) income	42	** 5,540,675
43	Other income (see instructions)	43	** 12,743,909
44	Add amounts in the right column for lines 37 through 43 (lines 37, 38b, 39b, 40a, 40c, 41, 42, and 43)	44	3,471,678
45	Inventory of livestock, produce, grains, and other products at beginning of the year. Do not include sales reported on Form 4797		
46	Cost of livestock, produce, grains, and other products purchased during the year 46	-	
47	Add lines 45 and 46		
48	Inventory of livestock, produce, grains, and other products at end of year 48		
49	Cost of livestock, produce, grains, and other products sold. Subtract line 48 from line 47*	49	
50	Gross income. Subtract line 49 from line 44. Enter the result here and on Part I, line 9 ▶	50	2,170,519

^{*} If you use the unit-livestock-price method or the farm-price method of valuing inventory and the amount on line 48 is larger than the amount on line 47, subtract line 47 from line 48. Enter the result on line 49. Add lines 44 and 49. Enter the total on line 50 and on Part I, line 9.

Part IV Principal Agricultural Activity Codes



Do not file Schedule F (Form 1040) to report the following.

• Income from providing agricultural services such as soil preparation, veterinary, farm labor, horticultural

services if your principal source of income is from providing such services. Instead, file Schedule C (Form 1040).

- Income from breeding, raising, or caring for dogs, cats, or other pet animals. Instead, file Schedule C (Form 1040).
- Income from managing a farm for a fee or on a contract basis. Instead, file Schedule C (Form 1040).
- Sales of livestock held for draft, breeding, sport, or dairy purposes. Instead, file Form 4797.

These codes for the Principal Agricultural Activity classify farms by their primary activity to facilitate the administration of the Internal Revenue Code. These six-digit codes are based on the North American Industry Classification System (NAICS).

Select the code that best identifies your primary farming activity and enter the six-digit number on line B.

Crop Production

111100 Oilseed and grain farming

111210 Vegetable and melon farming

111300 Fruit and tree nut farming

111400 Greenhouse, nursery, and floriculture production

111900 Other crop farming

Animal Production

112111 Beef cattle ranching and farming

112112 Cattle feedlots

112120 Dairy cattle and milk production

112210 Hog and pig farming

112300 Poultry and egg production

112400 Sheep and goat farming

112510 Aquaculture

112900 Other animal production

Forestry and Logging

113000 Forestry and logging (including forest nurseries and timber tracts)

113110 Timber tract operations

113210 Forest nurseries and gathering of forest products

113310 Logging

Schedule R (Form 1040)

Credit for the Elderly or the Disabled

1040-SR 20**21**

• You were under age 65, you retired on permanent and total disability, and

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040 or 1040-SR.

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

Attachment Sequence No. 16

OMB No. 1545-0074

Name(s) shown on return

• You were age 65 or older

Total schedules filed = 43,350

You may be able to take this credit and reduce your tax if by the end of 2021:

or

Your social security number

	you received taxable disability income.	•	
	other tests. See instructions.		
In most cases, the	IRS can figure the credit for you. See instructions.		
	ox for Your Filing Status and Age		
If your filing status is:	And by the end of 2021: Check of	nly o	ne box
Single, Head of household, or	1 You were 65 or older	1	
Qualifying widow(er)	2 You were under 65 and you retired on permanent and total disability	2	
	3 Both spouses were 65 or older	3	
	4 Both spouses were under 65, but only one spouse retired on permanent and total disability	4	
Married filing jointly	5 Both spouses were under 65, and both retired on permanent and tota disability	l 5	
	6 One spouse was 65 or older, and the other spouse was under 65 and retired on permanent and total disability	6	
	7 One spouse was 65 or older, and the other spouse was under 65 and not retired on permanent and total disability		
Married filing	8 You were 65 or older and you lived apart from your spouse for all of 2021	8	
separately	9 You were under 65, you retired on permanent and total disability, and you lived apart from your spouse for all of 2021		
Did you check	Yes ── Skip Part II and complete Part III on the back.		
box 1, 3, 7, or 8?	—— No —— Complete Parts II and III.		
Part II Statement of	Permanent and Total Disability (Complete only if you checked box 2, 4, 5, 6, or 9 abo	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
If: 1 You filed a physi	cian's statement for this disability for 1983 or an earlier year, or you filed or years after 1983 and your physician signed line B on the statement, and		
	nued disabled condition, you were unable to engage in any substantial gainful ac		
 If you checked t 	his box, you don't have to get another statement for 2021.		
	eck this box, have your physician complete the statement in the instructions. You ent for your records.	must	

Schedule R (Form 1040)

Credit for the Elderly or the Disabled

1040-SR ► Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

Attachment

Department of the Treasury Internal Revenue Service (99)

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

Sequence No. 16 Your social security number

Name(s) shown on return

Total schedules filed = 43,350

You may be able to take	this credit and reduce your tax if by the end of 2021:	-		
You were age 65 or old	you received taxable disability income.	t otal disab	ility,	and
But you must also meet of	other tests. See instructions.			
In most cases, the	RS can figure the credit for you. See instructions.			
	ox for Your Filing Status and Age			
If your filing status is:	And by the end of 2021:	Check or	ıly o	ne box:
Single, Head of household, or	1 You were 65 or older		1	
Qualifying widow(er)	2 You were under 65 and you retired on permanent and total disability	<i>!</i>	2	
	3 Both spouses were 65 or older		3	
	4 Both spouses were under 65, but only one spouse retired on perm total disability	anent and	4	
Married filing jointly	5 Both spouses were under 65, and both retired on permanent disability	and total	5	
	6 One spouse was 65 or older, and the other spouse was under 65 a on permanent and total disability	nd retired	6	
	7 One spouse was 65 or older, and the other spouse was under 65 retired on permanent and total disability		7	
Married filing	8 You were 65 or older and you lived apart from your spouse for all of 20	121	8	
separately	9 You were under 65, you retired on permanent and total disability lived apart from your spouse for all of 2021		9	
Did you check	Yes Skip Part II and complete Part III on the back.			
box 1, 3, 7, or 8?	—— No —— Complete Parts II and III.			
Part II Statement of	Permanent and Total Disability (Complete only if you checked box 2, 4, 5,	or 9 above	e.)	
	cian's statement for this disability for 1983 or an earlier year, or you ears after 1983 and your physician signed line B on the statement, and	filed or go	ot a	

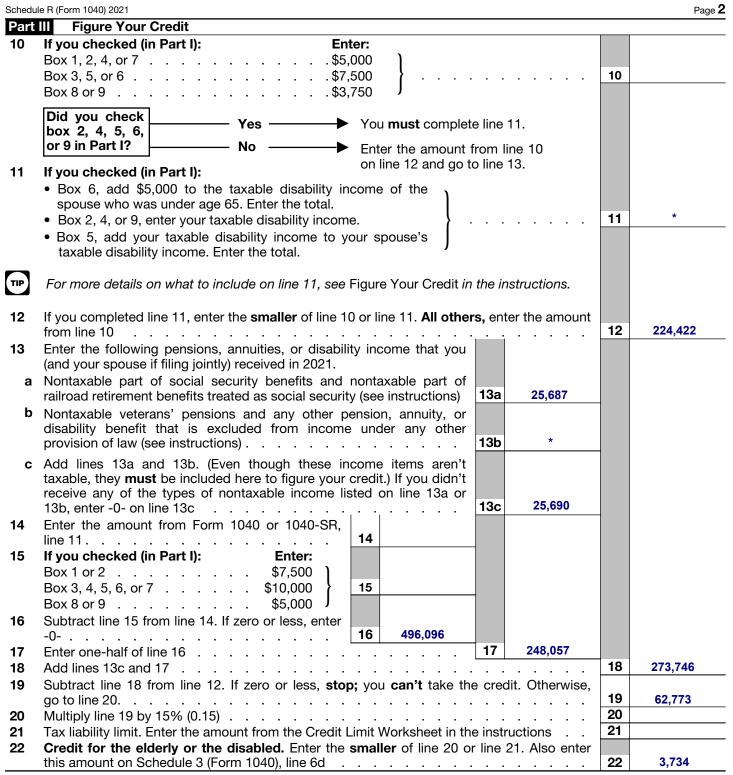
- 2 Due to your continued disabled condition, you were unable to engage in any substantial gainful activity
 - If you checked this box, you don't have to get another statement for 2021.
 - If you didn't check this box, have your physician complete the statement in the instructions. You must keep the statement for your records.

Schedule R (Form 1040) 2021 Page 2

Schedu	ıle R (Form 1040) 2021		Page 2
Part	III Figure Your Credit		
10	If you checked (in Part I): Enter:		
	Box 1, 2, 4, or 7		
	Box 3, 5, or 6	10	
	Box 8 or 9		
	Did you check Yes You must complete line 11.		
	DOX 2, 4, 5, 0,		
11	If you checked (in Part I): on line 12 and go to line 13.		
	Box 6, add \$5,000 to the taxable disability income of the		
	spouse who was under age 65. Enter the total.		
	Box 2, 4, or 9, enter your taxable disability income.	11	*
	Box 5, add your taxable disability income to your spouse's		
	taxable disability income. Enter the total.		
	, ,		
TIP	For more details on what to include on line 11, see Figure Your Credit in the instructions.		
	3		
12	If you completed line 11, enter the smaller of line 10 or line 11. All others, enter the amount		
	from line 10	12	43,350
13	Enter the following pensions, annuities, or disability income that you		
	(and your spouse if filing jointly) received in 2021.		
а	Nontaxable part of social security benefits and nontaxable part of		
_	railroad retirement benefits treated as social security (see instructions) 13a 3,236		
b	, (***		
	disability benefit that is excluded from income under any other		
	provision of law (see instructions)		
С			
C	taxable, they must be included here to figure your credit.) If you didn't		
	receive any of the types of nontaxable income listed on line 13a or		
	13b, enter -0- on line 13c		
14	Enter the amount from Form 1040 or 1040-SR,		
	line 11		
15	If you checked (in Part I): Enter:		
	Box 1 or 2		
	Box 3, 4, 5, 6, or 7 \$10,000 } 15		
	Box 8 or 9 \$5,000		
16	Subtract line 15 from line 14. If zero or less, enter		
.0	-0		
17	Enter one-half of line 16		
18	Add lines 13c and 17	18	38,803
19	Subtract line 18 from line 12. If zero or less, stop; you can't take the credit. Otherwise,		,
	go to line 20	19	41,276
20	Multiply line 19 by 15% (0.15)	20	, •
21	Tax liability limit. Enter the amount from the Credit Limit Worksheet in the instructions	21	
22	Credit for the elderly or the disabled. Enter the smaller of line 20 or line 21. Also enter		
	this amount on Schedule 3 (Form 1040), line 6d	22	40,263

Schedule R (Form 1040) 2021

^{*} Data not shown because of the small number of sample returns on which it is based.



Schedule R (Form 1040) 2021

^{*} Data not shown because of the small number of sample returns on which it is based.

SCHEDULE SE (Form 1040)

Department of the Treasury Internal Revenue Service (99)

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

2021

Attachment
Sequence No. 17

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

Total schedules filed = 22,972,718

Social security number of person with **self-employment** income ▶

Par	Seit-Employment Tax		
	If your only income subject to self-employment tax is church employee income , see instructions for how the definition of church employee income.	v to re	port your income
Α	If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4 \$400 or more of other net earnings from self-employment, check here and continue with Part I	,	•
Skip I	nes 1a and 1b if you use the farm optional method in Part II. See instructions.		
1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1a	539,256
b	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 AH	1b (12,260
Skip I	ne 2 if you use the nonfarm optional method in Part II. See instructions.		,
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	2	21,306,781
3	Combine lines 1a, 1b, and 2	3	
4a	If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3 . Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	4a	21,626,090
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
С	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	21,608,587
5a	Enter your church employee income from Form W-2. See instructions for definition of church employee income		
b	Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0	5b	
6	Add lines 4c and 5b	6	21,622,374
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2021	7	142,800
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$142,800 or more, skip lines 8b through 10, and go to line 11		
b	Unreported tips subject to social security tax from Form 4137, line 10 8b 1,739		
С	Wages subject to social security tax from Form 8919, line 10 8c 5,610		
d	Add lines 8a, 8b, and 8c	8d	9,177,013
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	Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	20,887,508
11	Multiply line 6 by 2.9% (0.029)	11	21,622,374 21,622,374
12 13	Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4 Deduction for one-half of self-employment tax.	12	21,022,374
13	Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040),		
	line 15		
Part	Optional Methods To Figure Net Earnings (see instructions)		
	Optional Method. You may use this method only if (a) your gross farm income¹ wasn't more than		
	0, or (b) your net farm profits² were less than \$6,367.		
14	Maximum income for optional methods	14	5,880
15	Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$5,880. Also, include		
	this amount on line 4b above	15	18,360
and al	rm Optional Method. You may use this method only if (a) your net nonfarm profits³ were less than \$6,367 so less than 72.189% of your gross nonfarm income,⁴ and (b) you had net earnings from self-employment east \$400 in 2 of the prior 3 years. Caution: You may use this method no more than five times.		
16	Subtract line 15 from line 14	16	
17	Enter the smaller of: two-thirds (² / ₃) of gross nonfarm income ⁴ (not less than zero) or the amount on line 16. Also, include this amount on line 4b above	17	18,474
	Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.		
∠ From	Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A—minus the amount 4 From Sch. C, line 7; and Sch. K-1 (Form 1065), box 1	14, code C.

SCHEDULE SE (Form 1040)

Department of the Treasury Internal Revenue Service (99)

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 Attachment Sequence No. 17

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

Total schedules filed = 22,972,718

Social security number of person with **self-employment** income

	with seir-employment income		
Part	Self-Employment Tax		
	If your only income subject to self-employment tax is church employee income , see instructions for how the definition of church employee income.	w to re	eport your income
Α	If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form \$400 or more of other net earnings from self-employment, check here and continue with Part I		
Skip li	nes 1a and 1b if you use the farm optional method in Part II. See instructions.		
1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1a	12,201,706
b	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 AH	1b	(121,307)
Skip li	ne 2 if you use the nonfarm optional method in Part II. See instructions.		_
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	2	811,682,537
3	Combine lines 1a, 1b, and 2	3	
4a	If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3 .	4a	760,498,898
	Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.		
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
С	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	763,890,704
5a	Enter your church employee income from Form W-2. See instructions for definition of church employee income		
b	Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0	5b	
6	Add lines 4c and 5b	6	764,540,165
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2021	7	142,800
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$142,800 or more, skip lines 8b through 10, and go to line 11		
b	Unreported tips subject to social security tax from Form 4137, line 10 8b 22,007		
C	Wages subject to social security tax from Form 8919, line 10 8c 54,297		
d	Add lines 8a, 8b, and 8c	8d	436,165,383
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	Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	55,008,521
11	Multiply line 6 by 2.9% (0.029)	11	22,171,724
12	Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4	12	77,180,298
13	Deduction for one-half of self-employment tax.		, ,
	Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040),		
	line 15		
Part			
Farm	Optional Method. You may use this method only if (a) your gross farm income¹ wasn't more than 0, or (b) your net farm profits² were less than \$6,367.		
14	Maximum income for optional methods	14	5,880
15	Enter the smaller of: two-thirds (2/3) of gross farm income¹ (not less than zero) or \$5,880. Also, include		
	this amount on line 4b above	15	107,303
Nonfa	rm Optional Method. You may use this method only if (a) your net nonfarm profits³ were less than \$6,367	. •	,,,,,,,
and al	so less than 72.189% of your gross nonfarm income, and (b) you had net earnings from self-employment east \$400 in 2 of the prior 3 years. Caution: You may use this method no more than five times.		
16	Subtract line 15 from line 14	16	
17	Enter the smaller of: two-thirds (2/3) of gross nonfarm income ⁴ (not less than zero) or the amount on line 16. Also, include this amount on line 4b above	17	77,248
¹ From	Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.		
² From	Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A—minus the amount ould have entered on line 1b had you not used the optional method.		

Sched	ule SE (Form 1040) 2020 Attachment Sequence No	. 17	Page 2
Part	Maximum Deferral of Self-Employment Tax Payments		
If line	4c is zero, skip lines 18 through 20, and enter -0- on line 21.		
18	Enter the portion of line 3 that can be attributed to March 27, 2020, through December 31, 2020 .	. 18	102,963
19	If line 18 is more than zero, multiply line 18 by 92.35% (0.9235); otherwise, enter the amount from line	18 19	102,963
20	Enter the portion of lines 15 and 17 that can be attributed to March 27, 2020, through December 3	31,	_
	2020	. 20	1,457
21	Combine lines 19 and 20	. 21	104,420
If line	5b is zero, skip line 22 and enter -0- on line 23.		
22	Enter the portion of line 5a that can be attributed to March 27, 2020, through December 31, 2020.	. 22	0
23	Multiply line 22 by 92.35% (0.9235)	. 23	0
24	Add lines 21 and 23	. 24	104,420
25	Enter the smaller of line 9 or line 24	. 25	101,602
26	Multiply line 25 by 6.2% (0.062). Enter here and see the instructions for line 12e of Schedule 3 (Fo	rm	
	1040)	. 26	101,602

Schedule SE (Form 1040) 2020

Schedu	le SE (Form 1040) 2020 Attachment Sequence N	lo. 17	Page 2
Part	Maximum Deferral of Self-Employment Tax Payments		
If line	4c is zero, skip lines 18 through 20, and enter -0- on line 21.		
18	Enter the portion of line 3 that can be attributed to March 27, 2020, through December 31, 2020 .	. 18	5,041,397
19	If line 18 is more than zero, multiply line 18 by 92.35% (0.9235); otherwise, enter the amount from lin	e 18 19	4,655,731
20	Enter the portion of lines 15 and 17 that can be attributed to March 27, 2020, through December	31,	
	2020	. 20	6,331
21	Combine lines 19 and 20	. 21	4,662,061
If line	5b is zero, skip line 22 and enter -0- on line 23.		
22	Enter the portion of line 5a that can be attributed to March 27, 2020, through December 31, 2020.	. 22	0
23	Multiply line 22 by 92.35% (0.9235)	. 23	0
24	Add lines 21 and 23		4,662,061
25	Enter the smaller of line 9 or line 24	. 25	2,925,827
26	Multiply line 25 by 6.2% (0.062). Enter here and see the instructions for line 12e of Schedule 3 (F	orm	
	1040)	. 26	181,400
		Schedule	SE (Form 1040) 2020

SCHEDULE 8812 (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Credits for Qualifying Children and Other Dependents

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

040-SF 1040-NR 8812 OMB No. 1545-0074

Sequence No. 47

▶ Go to www.irs.gov/Schedule8812 for instructions and the latest information. Name(s) shown on return

Your social security number Total schedules filed = 47.575.711 Part I-A **Child Tax Credit and Credit for Other Dependents** 46,601,912 Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR . . . 4.090 Enter the amounts from lines 45 and 50 of your Form 2555 2b 75.785 Enter the amount from line 15 of your Form 4563 d 2d 79,874 3 3 46,607,565 39,005,501 4a Number of qualifying children under age 18 with the required social security number Number of children included on line 4a who were under age 6 at the end of 2021 . . . 16,379,889 b c 29.602.339 5 If line 4a is more than zero, enter the amount from the Line 5 Worksheet; otherwise, enter -0-5 39.005.501 6 Number of other dependents, including any qualifying children who are not under age 12,324,175 Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4a. 7 12.324.175 8 46,321,166 Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000 47,155,609 10 Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 10 1.443.551 1.443.551 11 11 12 12 45,752,089 13 Check all the boxes that apply to you (or your spouse if married filing jointly). A Check here if you (or your spouse if married filing jointly) had a principal place of abode in the United States 46,046,909 **B** Check here if you (or your spouse if married filing jointly) were a bona fide resident of Puerto Rico for 2021 229,632 Filers Who Check a Box on Line 13 Part I-B Caution: If you did not check a box on line 13, do not complete Part I-B; instead, skip to Part I-C. 14a 11,487,422 37,652,855 Subtract line 14a from line 12 . . . 14b If line 14a is zero, enter -0-; otherwise, enter the amount from the Credit Limit Worksheet A 10,302,712 14c d 14d 10.300.696 14e 43.885.798 Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments 14f 34.677.884 for 2021, enter -0-Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed. Subtract line 14f from line 14e. If zero or less, enter -0- on lines 14g through 14i and go to Part III 43,402,171 Enter the smaller of line 14d or line 14g. This is your credit for other dependents. Enter this amount on line 10.154.942 Subtract line 14h from line 14g. This is your refundable child tax credit. Enter this amount on line 28 of 14i 37.249.985

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

040-SE 1040-NR 8812 OMB No. 1545-0074

Sequence No. 47

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, or 1040-NR.

▶ Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Name(s) shown on return Your social security number Total schedules filed = 47,575,711 **Child Tax Credit and Credit for Other Dependents** Part I-A 5,139,529,731 Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR 125,028 6,854,491 Enter the amounts from lines 45 and 50 of your Form 2555 Enter the amount from line 15 of your Form 4563 6,979,993 d 3 5,146,509,724 3 4a Number of qualifying children under age 18 with the required social security number 67,685 Number of children included on line 4a who were under age 6 at the end of 2021 . . . 21.248 46,437 c 5 204.663.948 If line 4a is more than zero, enter the amount from the Line 5 Worksheet; otherwise, enter -0-. 5 Number of other dependents, including any qualifying children who are not under age 6 14,814 Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4a. 7 7,406,931 8 212,070,879 Enter the amount shown below for your filing status. • Married filing jointly—\$400.000 14,194,490,696 • All other filing statuses—\$200,000 10 Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc. 1.059.084.306 11 11 52,954,215 12 12 209.880.774 13 Check all the boxes that apply to you (or your spouse if married filing jointly). A Check here if you (or your spouse if married filing jointly) had a principal place of abode in the United States 46,047 **B** Check here if you (or your spouse if married filing jointly) were a bona fide resident of Puerto Rico for 2021 230 Filers Who Check a Box on Line 13 Part I-B Caution: If you did not check a box on line 13, do not complete Part I-B; instead, skip to Part I-C. 6,859,019 14a 198,323,173 14b 118,471,713 If line 14a is zero, enter -0-; otherwise, enter the amount from the **Credit Limit Worksheet A** 14c Enter the smaller of line 14a or line 14c 14d 5.937.439 14e 204,260,612 Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments 14f for 2021, enter -0-85,376,491 Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed. 120,874,632 Subtract line 14f from line 14e. If zero or less, enter -0- on lines 14g through 14i and go to Part III 14g Enter the smaller of line 14d or line 14g. This is your credit for other dependents. Enter this amount on line 14h 5,810,099 Subtract line 14h from line 14g. This is your refundable child tax credit. Enter this amount on line 28 of 14i 114,994,658

Schedule 8812 (Form 1040) 2021

Part	I-C Filers Who Do Not Check a Box on Line 13		
Cautio	on: If you checked a box on line 13, do not complete Part I-C.		
15a	Enter the amount from the Credit Limit Worksheet A	15a	796,853
b	Enter the smaller of line 12 or line 15a	15b	946,891
	Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items.		
	1. You are not filing Form 2555.		
	2. Line 4a is more than zero.		
	3. Line 12 is more than line 15a.	1.5	
c	If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0	15c	281,046 818,443
d	Add lines 15b and 15c	15d	010,443
e	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0-	15e	451,145
	Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.		-
f	Subtract line 15e from line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III	15f	741,839
g	Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax credit and credit for other		741,000
8	dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR	15g	705,254
h	Subtract line 15g from line 15f. This is your additional child tax credit. Enter this amount on line 28 of your		,
	Form 1040, 1040-SR, or 1040-NR	15h	118,457
Part	II-A Additional Child Tax Credit (use only if completing Part I-C)		
	on: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.		
	on: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child to		
16a	Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27	16a	884,193
b	Number of qualifying children under 18 with the required social security number: x \$1,400.	10	040.400
	Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27	16b	913,163
17	The desired of the second of t	17	719,025
18a	Earned income (see instructions)	17	7 13,023
b	Nontaxable combat pay (see instructions)	1	
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19 793,416		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result $\dots \dots \dots \dots \dots \dots \dots$	20	792,408
	Next. On line 16b, is the amount \$4,200 or more?		
	No. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27. Otherwise, go to line 21.		
Part	II-B Certain Filers Who Have Three or More Qualifying Children		
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see		
	instructions		
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form	-	
22	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22 34,458 Add lines 21 and 22	-	
23		-	
24	1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27a, and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11. 24 38,615		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	22,157
26	Enter the larger of line 20 or line 25	26	61,081
	Next, enter the smaller of line 17 or line 26 on line 27.		
Part		T T	600.040
27	Enter this amount on line 15c	27	689,913

Schedul	e 8812 (Form 1040) 2021		Page 2
Part	I-C Filers Who Do Not Check a Box on Line 13		,
Cautio	on: If you checked a box on line 13, do not complete Part I-C.		
15a	Enter the amount from the Credit Limit Worksheet A	15a	16,763,987
b	Enter the smaller of line 12 or line 15a	15b	1,919,552
	Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items.		
	1. You are not filing Form 2555.		
	2. Line 4a is more than zero.		
	3. Line 12 is more than line 15a.		
c	If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0	15c	587,902
d	Add lines 15b and 15c	15d	2,210,876
e	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0-	15e	973,099
	Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.		
f	Subtract line 15e from line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III	15f	1,416,802
g	Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax credit and credit for other		1,410,002
8	dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR	15g	1,195,510
h	Subtract line 15g from line 15f. This is your additional child tax credit. Enter this amount on line 28 of your		,,-
	Form 1040, 1040-SR, or 1040-NR	15h	221,292
Part	II-A Additional Child Tax Credit (use only if completing Part I-C)		,
Cautio	n: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.		
Cautio	on: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child ta	x credi	t.
16a	Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27	16a	2,670,545
b	Number of qualifying children under 18 with the required social security number: x \$1,400.		
	Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27	16b	2,224,703
	TIP: The number of children you use for this line is the same as the number of children you used for line 4a.		
17	Enter the smaller of line 16a or line 16b	17	1,621,879
18a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
19	Is the amount on line 18a more than \$2,500?		
	No. Leave line 19 blank and enter -0- on line 20.		
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result		
20	Multiply the amount on line 19 by 15% (0.15) and enter the result	20	3,664,460
	Next. On line 16b, is the amount \$4,200 or more?		
	No. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27. Otherwise, go to line 21.		
Part	II-B Certain Filers Who Have Three or More Qualifying Children		
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see instructions		
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form		
	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . 22 42,990		
23	Add lines 21 and 22		
24	1040 and		
	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27a, and Schedule 3 (Form 1040), line 11.		
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.		
25	Subtract line 24 from line 23. If zero or less, enter -0	25	36,461
26	Enter the larger of line 20 or line 25	26	166,925
B	Next, enter the smaller of line 17 or line 26 on line 27.		
Part	Fig. 41		4 274 400
	Enter this amount on line 15c	27	1,271,198

Schedule 8812 (Form 1040) 2021 Page **3**

Par	Part III Additional Tax (use only if line 14g or line 15f, whichever applies, is zero)		
28a	Enter the amount from line 14f or line 15e, whichever applies	28a	1,784,167
b	Enter the amount from line 14e or line 15d, whichever applies	28b	554,185
29	Excess advance child tax credit payments. Subtract line 28b from line 28a. If zero, stop; you do not owe the additional tax	29	1,613,632
30	Enter the number of qualifying children taken into account in determining the annual advance amount you received for 2021. See your Letter 6419 for this number. If you are missing your Letter 6419, you are filing a joint return, or you received more than one Letter 6419, see the instructions before entering a number on this line	30	1,239,376
	Caution: If the amount on this line doesn't match the number of qualifying children reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.		
31	Enter the smaller of line 4a or line 30	31	529,082
32	Subtract line 31 from line 30. If zero, skip to line 40 and enter the amount from line 29; otherwise, continue to line 33	32	827,152
33	Enter the amount shown below for your filing status.		•
	• Married filing jointly or Qualifying widow(er)—\$60,000		
	• Head of household—\$50,000		
	• All other filing statuses—\$40,000	33	823,121
34	Subtract line 33 from line 3. If zero or less, enter -0	34	436,241
35	Enter the amount from line 33	35	823,121
36	Divide line 34 by line 35. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or		
	more, enter 1.000	36	434,226
37	Multiply line 32 by \$2,000	37	827,152
38	Multiply line 37 by line 36	38	433,215
39	Subtract line 38 from line 37	39	624,836
40	Subtract line 39 from line 29. If zero or less, enter -0 This is your additional tax. If more than zero, enter this amount on Schedule 2 (Form 1040), line 19	40	1,106,411

Schedule 8812 (Form 1040) 2021

Schedule 8812 (Form 1040) 2021

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Schedule 8812 (Form 1040) 2021 Page 3 Part III Additional Tax (use only if line 14g or line 15f, whichever applies, is zero) 28a 28a 3,303,861 1,134,327 29 Excess advance child tax credit payments. Subtract line 28b from line 28a. If zero, stop; you do not owe the 2,169,534 30 Enter the number of qualifying children taken into account in determining the annual advance amount you received for 2021. See your Letter 6419 for this number. If you are missing your Letter 6419, you are filing a joint **30** 2,008 return, or you received more than one Letter 6419, see the instructions before entering a number on this line . . . Caution: If the amount on this line doesn't match the number of qualifying children reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed. 31 31 893 32 Subtract line 31 from line 30. If zero, skip to line 40 and enter the amount from line 29; otherwise, continue to 32 1,115 33 Enter the amount shown below for your filing status. • Married filing jointly or Qualifying widow(er)—\$60,000 • Head of household—\$50,000 • All other filing statuses—\$40,000 33 38,556,136 34 58,644,940 Enter the amount from line 33 $\dots \dots \dots \dots \dots \dots \dots \dots$ 35 35 38,556,136 36 Divide line 34 by line 35. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or 36 296,329 37 **37** 2,229,260 38 775,085 39 1,454,174 Subtract line 39 from line 29. If zero or less, enter -0-. This is your additional tax. If more than zero, enter 40 1,249,767

Form **461**

Limitation on Business Losses

OMB No. 1545-2283

2021

Department of the Treasury Internal Revenue Service ► Attach to your tax return.

▶ Go to www.irs.gov/Form461 for instructions and the latest information.

Attachment Sequence No. **64**

Form **461** (2021)

Cat. No. 16654I

Name(s) shown on return Identifying number Total Forms Filed = 43.824 **Total Income/Loss Items** Part I See instructions if you are filing a tax return other than Form 1040 or 1040-SR. 1 Enter amount from Schedule 1 (Form 1040), line 3 2 Enter amount from Form 1040 or 1040-SR, line 7 . 3 3 Enter amount from Schedule 1 (Form 1040), line 4 4 Enter amount from Schedule 1 (Form 1040), line 5 5 Enter amount from Schedule 1 (Form 1040), line 6 7 7 Enter other income, gain, or losses from a trade or business not reported on lines 1 through 7 . . . 8 8 1,828 9 Combine lines 1 through 8 9 43,818 Adjustment for Amounts Not Attributable to Trade or Business Part II See instructions if you are filing a tax return other than Form 1040 or 1040-SR. Enter any income or gain reported on lines 1 through 8 that is not attributable to a trade or business . 10 26,368 Enter any losses or deductions reported on lines 1 through 8 that are not attributable to a trade or business. See instructions 13,144 11 12 12 33,410 **Limitation on Losses** Part III If line 12 is a negative number, enter it here as a positive number. If line 12 is a positive number, enter 13 33,410 14 14 43,816 15 43,824 Add lines 14 and 15. If less than zero, enter the amount from line 16 as a positive number on Schedule 1 (Form 1040), line 8o. See instructions if you are filing a tax return other than a Form 1040 or 1040-SR. If zero or greater, do not attach this form to your tax return 16 43.016

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **461**

Limitation on Business Losses

OMB No. 1545-2283

Department of the Treasury

► Attach to your tax return.

Attachment

Sequence No. **64** Internal Revenue Service ▶ Go to www.irs.gov/Form461 for instructions and the latest information. Name(s) shown on return Identifying number Total Forms Filed = 43.824 Total Income/Loss Items Part I See instructions if you are filing a tax return other than Form 1040 or 1040-SR. 1 2 2 Enter amount from Schedule 1 (Form 1040), line 3 Enter amount from Form 1040 or 1040-SR, line 7 . 3 3 Enter amount from Schedule 1 (Form 1040), line 4 4 Enter amount from Schedule 1 (Form 1040), line 5 5 Enter amount from Schedule 1 (Form 1040), line 6 6 7 7 8 Enter other income, gain, or losses from a trade or business not reported on lines 1 through 7 . . . 8 1,210,792 9 Combine lines 1 through 8 9 10,520,424 Adjustment for Amounts Not Attributable to Trade or Business Part II See instructions if you are filing a tax return other than Form 1040 or 1040-SR. Enter any income or gain reported on lines 1 through 8 that is not attributable to a trade or business . 76,048,243 Enter any losses or deductions reported on lines 1 through 8 that are not attributable to a trade or business. See instructions 1,192,624 11 12 12 74,855,619 **Limitation on Losses** Part III If line 12 is a negative number, enter it here as a positive number. If line 12 is a positive number, enter 13 -74,855,619 14 14 -64,335,195 18,054,962 Add lines 14 and 15. If less than zero, enter the amount from line 16 as a positive number on Schedule 1 (Form 1040), line 8o. See instructions if you are filing a tax return other than a Form 1040 or 1040-SR. If zero or greater, do not attach this form to your tax return 16 -50.208.294 For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form **461** (2021) Cat. No. 166541

orm	965-A			Indiv	idual Report	of Net 965	Tax Liab	ility			OMB No. 1545-00	74
Depart	anuary 2021) ment of the Treasury I Revenue Service			► Go to ww	w.irs.gov/Form965	A for instructions ar	nd the latest info	ormation.			Attachment Sequence No. 76	A
	eck this box if this is an ar	mended repo	rt									
Name (of taxpayer with a net 965 tax lia	bility	Total	Forms Filed	25,429				Identifying nun	nber	Taxable year of reporting	
Par	Report of Net 9	65 Tax Lial	oility an	d Election 1	o Pay in Installı	ments						
	(a) Year of Section 965(a) Inclusion, Liability Assumed, or Liability Triggering Event (see instructions)	Year of Section 965(a) usion, Liability Assumed, Liability Triggering Event (see instructions) Taxpayer's Net Tax Liability with all 965 amounts (see instructions)		nts	wit 965 a	c) et Tax Liability hout mounts tructions)	Net 9 (subtract colu	(d) 65 Tax Liab mn (c) from		(e) S Corporation Shareholder TC Deferred Net 965 Tax Liabilii (line total from Part III, column see instructions)		
1	2017											1
2	2018											2
3	2019											3
4	2020											4
5												5
6												6
7												7
8												8
	Net 965 Tax Liability eligible for installment payment (subtract column (e) from colu see instructions)	election El	tallment ection Made	to be paid (if column (g) i	(h) 5 Tax Liability I in full for Year 1 s "No," enter amount column (f))	(i) Net 965 Tax to be paid in ir (if column (g) is "Yes from column (f) and	nstallments s," enter amount	Transfe	(j) Net 965 Tax Liab Perred (Out), Trans Requent Adjustment (see instruction	sferred In, ents, if any	(k) Tax Identification Number of buyer/transferee or seller/transferor	
1												1
2												2
3												3
4												4
5												5
6												6
7			+									7
8	T D		005 T	Listalia De	tal lassada a Tassas a							8
Par		unt of Net	965 I ax	Liability Pa	id by the Taxpa	yer (see instruct	ions)					_
	(a) Year of Section 965(a) Inclusion, Liability Assumed, or Triggering Event	Paid	(b) for Year 1		(c) Paid for Year 2		d) r Year 3		(e) Paid for Year 4		(f) Paid for Year 5	
1	2017											1
2	2018											2
3	2019								-			3
4	2020											4
5												5
6												6
7												7
8												8
or P	rivacy Act and Paperwork I	Reduction Ac	Notice,	see the separa	te instructions.		Cat. N	lo. 71277H			Form 965-A (Rev	. 1-2021

(Rev. Ja	965-A anuary 2021)					idual Report			_			OMB No. 1545-000		
	ment of the Treasury Revenue Service				► Go to w	vw.irs.gov/Form965A	A for instructions ar	nd the latest info	ormation.			Sequence No. 76	A	
Che	ck this box if this is an a	amended re	eport											
Name o	of taxpayer with a net 965 tax li	ability		Total	Forms Filed	= 25,429				Identifying nur	mber	Taxable year of reporting		
Par	Report of Net	965 Tax L	_iabi	lity an	d Election	To Pay in Installr	ments					'		
	(a) Year of Section 965(a) Inclusion, Liability Assumed, or Liability Triggering Event (see instructions)	Tax	96	(b) 's Net Ta with all 5 amoun instruction		Taxpayer's N wit 965 a	c) let Tax Liability hout mounts tructions)	Net 9 (subtract colu	(d) 165 Tax Liab ımn (c) from		Defen	(e) S Corporation Shareholder Total Deferred Net 965 Tax Liability (line total from Part III, column (g), see instructions)		
1	2017												1	
2	2018												2	
3	2019												3	
4	2020												4	
5													5	
6													6	
7													7	
8													8	
	Net 965 Tax Liability eligible for installment paymer (subtract column (e) from col see instructions)	nt election lumn (d),	Install Elec Ma Yes	ment tion	to be pa (if column (g)	(h) 95 Tax Liability d in full for Year 1 is "No," enter amount n column (f))	Net 965 Tax to be paid in ir (if column (g) is "Yer from column (f) and	stallments Transferred (Out), Transferred I or Subsequent Adjustments, if a		sferred In, ents, if any	(k) Tax Identification Number of buyer/transferee or seller/transferor			
1													1	
2													2	
3													3	
4													4	
5													5	
6													6	
7													7	
8													8	
Part		ount of N	et 96	55 Tax	Liability P	aid by the Taxpa	yer (see instruct	ions)						
	(a) Year of Section 965(a) Inclusion, Liability Assumed, or Triggering Event	Р	(b Paid for	year 1		(c) Paid for Year 2		d) or Year 3		(e) Paid for Year 4		(f) Paid for Year 5		
1	2017												1	
2	2018												2	
3	2019												3	
4	2020												4	
5													5	
6													6	
7													7	
8												Eorm 965- ∆ /Pou	8	

Form 965-A (Rev. 1-2021)	Page 2
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Par	t II Re	cord of Amount of	Net 965 Tax Liab	ility Paid by th	e Taxpayer (continue	ed)			
		(g) Paid for Year 6	(h) Paid for Yea	r 7	(i) Paid for Year 8	(j) Net 965 Tax Liability F (see instru		(I Net 965 T Paid for the P	k) ax Liability Reporting Year
1									1
2									2
3									3
4									4
5									5
6									6
7									7
8									8
Tot	als					▶ 7	,640		5,025
Par		Corporation Share ection To Defer Su	holder: Report o ch Net 965 Tax Li	f Calculation of ability	of Net 965 Tax Liab	ility Related to 965	Amounts Allocated	l From an	S Corporation and
	Year of 965(a) Inclusion	(a S Corporat		(b) S Corporation Tax Identification Number	(c) Taxpayer's Net Tax Liability with only 965 amounts from this S Corporation (see instructions)	(d) Taxpayer's Net Tax Liability without 965 amounts (see instructions)	(e) Net 965 Tax Liability related to 965 amounts from this S Corporation (subtract column (d) from column (c))	Made	(g) Deferred Net 965 Tax Liabilit (if column (f) is "Yes," enter amount from column (e))

	Year of 965(a) Inclusion	(a) S Corporation Name	(b) S Corporation Tax Identification Number	(c) Taxpayer's Net Tax Liability with only 965 amounts from this S Corporation (see instructions)	(d) Taxpayer's Net Tax Liability without 965 amounts (see instructions)	(e) Net 965 Tax Liability related to 965 amounts from this S Corporation (subtract column (d) from column (c))	Elec	arral	(g) Deferred Net 965 Tax Liability (if column (f) is "Yes," enter amount from column (e))
_				((-)	163	INO	
	2017								
1	2017								
Tota	l							•	3,040
2	2018								
Tota	l								63
3	2019								
Tota	Ι			<u> </u>	<u> </u>	<u> </u>		•	*
4	2020								
		I.		I.	1	1			
Tota	L . <u>.</u> .		<u></u>		<u></u>		<u>.</u> .	•	*

Form **965-A** (Rev. 1-2021)

^{*} Data not shown because of the small number of sample returns on which they are based.

					`		•				
	65-A (Rev. 1-2	,									Page 2
Part	Ⅱ Re	cord of Amount of	Net 965 Tax Liab	ility Paid by th	ne Taxpayer (continue						
	F	(g) Paid for Year 6	(h) Paid for Yea	r 7	(i) Paid for Year 8	(j) Net 965 Tax Liability F (see instru	Remaining Unpaid ctions)	Pa	(I) Net 965 T id for the F	k) ax Liability eporting Year	
1											1
2											2
3											3
4											4
5											5
6											6
_7											7
_ 8											8
Tota	ıls					1,29	96,721			248,826	
Part	Year of	Corporation Share ction To Defer Suc	ch Net 965 Tax Li	f Calculation ability (b) S Corporation	of Net 965 Tax Liab	(d) Taxpayer's Net Tax Liability	(e) Net 965 Tax Liab	ility	(f) Deferral	S Corporation (g) Deferred Net 965 Tax	
	965(a) Inclusion			Tax Identification Number	with only 965 amounts from this S Corporation (see instructions)	without 965 amounts (see instructions)	related to 965 amour this S Corporation (s column (d) from colu	subtract Made		(if column (f) is "Yes, amount from colum	" enter
1	2017										
Tota	l								. •	2,338,699	
2	2018										
Tota	l								. •	59,826	

Form **965-A** (Rev. 1-2021)

3

Total

Total

2019

2020

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 965-A (Rev. 1-2021)

Part			ed Net 965 Tax Liability Related the liability is fully paid)	a to 965 Amounts Allocated Fr	om S Corporations		
	(a) Election or Transfer Year		(b) S Corporation Nam	e	(c) S Corporation Tax Identification Number	(d) Beginning Deferred Net 965 Tax Liability (see instructions)	
1							1
2							2
3							3
4							4
5							5
6							6
7							7
8							8
9							9
10							10
	(e) Reserved for Fut	ture Use	(f) Net 965 Tax Liability Triggered (see instructions)	(g) Deferred 965 Net Tax Liability Transferred (Out) or Transferred In by Agreement, if any (see instructions)	(h) Tax Identification Number of Transferee or Transferor	(i) Deferred Net Tax Liability at the end of this Reporting Year (add columns (d), (f), and (g)) (see instructions)	
1			()				1
2			()				2
3			()				3
4			()				4
5			()				5
6			()				6
7			()				7
8			(8
9			(9
10			(10
			· · · · · · · · · · · · · · · · · · ·				

If more lines are needed for any Part on this form, attach additional sheets.

Form **965-A** (Rev. 1-2021)

3,047

Form 965	5-A (Rev. 1-2021)						Page 3
Part I		ort of Deferre	ed Net 965 Tax Liability Related ne liability is fully paid)	d to 965 Amounts Allocated Fr	om S Corporations		
	(a) Election or Transfer Year		(b) S Corporation Nam	e	(c) S Corporation Tax Identification Number	(d) Beginning Deferred Net 965 Tax Liability (see instructions)	
1							1
2							2
3							3
4							4
5							5
6							6
7							7
8							8
9							9
10							10
	(e) Reserved for Future Use		(f) Net 965 Tax Liability Triggered (see instructions)	(g) Deferred 965 Net Tax Liability Transferred (Out) or Transferred In by Agreement, if any (see instructions)	(h) Tax Identification Number of Transferee or Transferor	(i) Deferred Net Tax Liability at the end of this Reporting Year (add columns (d), (f), and (g)) (see instructions)	
1			(1
2			(2
3			(3
4			()				4
5			()				5
6			()				6
7			()				7
8			(8
9			()				9
10							10
Total						2,573,586	
			is form, attach additional sheets.		•		
						Form 965-A (Re	v. 1-2021)

(Rev. March 2018) Department of the Treasury Internal Revenue Service

Total Farma Filed -

Name shown on return

Reduction of Tax Attributes Due to Discharge of Indebtedness (and Section 1082 Basis Adjustment)

▶ Attach this form to your income tax return.

▶ Go to www.irs.gov/Form982 for instructions and the latest information.

OMB No. 1545-0046

Attachment Sequence No. **94**

Identifying number

	Total Forms Filed – 99,543		
Par	General Information (see instructions)		
1 a b c d e	Amount excluded is due to (check applicable box(es)): Discharge of indebtedness in a title 11 case Discharge of indebtedness to the extent insolvent (not in a title 11 case) Discharge of qualified farm indebtedness Discharge of qualified real property business indebtedness Discharge of qualified principal residence indebtedness (Caution: See instructions before check was discharged after 2017.)	 king this	
2 3	Total amount of discharged indebtedness excluded from gross income	for sale t	
Part	Reduction of Tax Attributes. You must attach a description of any transactions reduction section 1017. See Regulations section 1.1017-1 for basis reduction order required partnership consent statements. (For additional information, see the instruction)	ing rules	s, and, if applicable
Enter	amount excluded from gross income:		
4	For a discharge of qualified real property business indebtedness applied to reduce the basis of		
_	depreciable real property		2,055
5	That you elect under section 108(b)(5) to apply first to reduce the basis (under section 1017) of depreciable property		*
6	Applied to reduce any net operating loss that occurred in the tax year of the discharge or carrie over to the tax year of the discharge	d	1,118
7 8	Applied to reduce any general business credit carryover to or from the tax year of the discharge Applied to reduce any minimum tax credit as of the beginning of the tax year immediately after th tax year of the discharge	е	*
9	Applied to reduce any net capital loss for the tax year of the discharge, including any capital los carryovers to the tax year of the discharge	s	*
10a	Applied to reduce the basis of nondepreciable and depreciable property if not reduced on line 5 DO NOT use in the case of discharge of qualified farm indebtedness	. 10a	17,403
b	Applied to reduce the basis of your principal residence. Enter amount here ONLY if line 1e checked	is · 10b	2,319
11 a	For a discharge of qualified farm indebtedness applied to reduce the basis of: Depreciable property used or held for use in a trade or business or for the production of income not reduced on line 5	if · 11a	*
b	Land used or held for use in a trade or business of farming	. 11b	*
С	Other property used or held for use in a trade or business or for the production of income	. 11c	*
12	Applied to reduce any passive activity loss and credit carryovers from the tax year of the discharge	12	*
13	Applied to reduce any foreign tax credit carryover to or from the tax year of the discharge	. 13	*
Part	Consent of Corporation to Adjustment of Basis of Its Property Under Section	1082(a)(2)
for the Under under	r section 1081(b), the corporation named above has excluded \$ e tax year beginning and ending r that section, the corporation consents to have the basis of its property adjusted in accordance w section 1082(a)(2) in effect at the time of filing its income tax return for that year. The corporation is	vith the re	
Ji	(State of incorporation)		
Note	You must attach a description of the transactions resulting in the nonrecognition of gain	under s	ection 1081

1000 rea mass attach a accomption of the transactions recalling in the normal engineer of gain areas accounts

(Rev. March 2018) Department of the Treasury Internal Revenue Service

Reduction of Tax Attributes Due to Discharge of **Indebtedness (and Section 1082 Basis Adjustment)**

▶ Attach this form to your income tax return.

OMB No. 1545-0046

Attachment

Form **982** (Rev. 3-2018)

Sequence No. 94 ▶ Go to www.irs.gov/Form982 for instructions and the latest information. Name shown on return Identifying number 99.543 Total Forms Filed = Part I **General Information** (see instructions) Amount excluded is due to (check applicable box(es)): Discharge of indebtedness to the extent insolvent (not in a title 11 case) Discharge of qualified principal residence indebtedness (Caution: See instructions before checking this box if debt 2 Do you elect to treat all real property described in section 1221(a)(1), relating to property held for sale to Part II Reduction of Tax Attributes. You must attach a description of any transactions resulting in the reduction in basis under section 1017. See Regulations section 1.1017-1 for basis reduction ordering rules, and, if applicable, required partnership consent statements. (For additional information, see the instructions for Part II.) Enter amount excluded from gross income: For a discharge of qualified real property business indebtedness applied to reduce the basis of 4 161,309 5 That you elect under section 108(b)(5) to apply first to reduce the basis (under section 1017) of Applied to reduce any net operating loss that occurred in the tax year of the discharge or carried 6 439.312 7 Applied to reduce any general business credit carryover to or from the tax year of the discharge . Applied to reduce any minimum tax credit as of the beginning of the tax year immediately after the 8 Applied to reduce any net capital loss for the tax year of the discharge, including any capital loss 9 Applied to reduce the basis of nondepreciable and depreciable property if not reduced on line 5. DO NOT use in the case of discharge of qualified farm indebtedness 10a 301,479 b Applied to reduce the basis of your principal residence. Enter amount here ONLY if line 1e is 10b 151,187 For a discharge of qualified farm indebtedness applied to reduce the basis of: Depreciable property used or held for use in a trade or business or for the production of income if 11a 11b Other property used or held for use in a trade or business or for the production of income 11c 12 Applied to reduce any passive activity loss and credit carryovers from the tax year of the discharge 13 Applied to reduce any foreign tax credit carryover to or from the tax year of the discharge Part III Consent of Corporation to Adjustment of Basis of Its Property Under Section 1082(a)(2) Under section 1081(b), the corporation named above has excluded \$ _____ from its gross income for the tax year beginning and ending Under that section, the corporation consents to have the basis of its property adjusted in accordance with the regulations prescribed under section 1082(a)(2) in effect at the time of filing its income tax return for that year. The corporation is organized under the laws • (State of incorporation)

For Paperwork Reduction Act Notice, see separate instructions.

Note: You must attach a description of the transactions resulting in the nonrecognition of gain under section 1081.

^{*} Data not shown because of the small number of sample returns on which they are based.

Department of the Treasury

Internal Revenue Service (99)

Foreign Tax Credit

(Individual, Estate, or Trust)
▶ Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

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

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

Sequen

OMB No. 1545-0121

2021

Attachment
Sequence No. 19

Name	Total Forms Filed = 5,464,312 Identifying number as shown on page 1 of your tax retu						e 1 of your tax return				
	a separate Form 1116 f . Report all amounts in						me in the ins	structions. C	heck on	ly one	box on each Form
	Section 951A category Foreign branch category		c ☐ Passiv d ☐ Gener			e ☐ Section f ☐ Certain			_	Lum	p-sum distributions
Note	esident of (name of ce: If you paid taxes to e than one foreign o	only one									ou paid taxes to
Pa	rt I Taxable Inco	ome or Lo	ss From S	ources	Outside th	e United St	ates (for	category o	checke	d abo	ove)
						oreign Country					Total
i	Enter the name of possession				A		В	С		(Add	I cols. A, B, and C.)
1a	Gross income from above and of the instructions):	m sources whe type c	within country	v shown ve (see							
										1a	5,016,313
t		s compensa n employe n all source sed an alte	ee, your es is \$250,00 ernative basi	total 0 or s to							
Dedu	uctions and losses (Ca	aution: See i	nstructions.):								
2	Expenses definite 1a (attach stateme										
3	Pro rata share of related:	other dedu	ctions not d	efinitely							
а	Certain itemized de (see instructions) .										
b c			,								
c											
6			•	•						1	
f										1	
ç		•	,								
4	Pro rata share of in										
а	Home mortgage i Home Mortgage In										
b	Other interest expe	ense									
5	Losses from foreig	n sources									
6	Add lines 2, 3g, 4a									6	4,888,062
7	Subtract line 6 from					age 2			<u>. ▶</u>	7	5,035,635
Pai		es Paid o	r Accrued	(see inst	tructions)						
5	Credit is claimed for taxes (you must check one)				Fo	oreign taxes paid	d or accrued				
ੂੂ∃	(j) Paid		In foreign	currency	,			In U.S. d	ollars		
Country	(i) Date paid (m) Dividends (n) Rents (o) Interest				(p) Other foreign taxes paid or		(r) Rents	(s) Interest	(t) Of foreign paid	taxes	(u) Total foreign taxes paid or accrued (add cols.
or accrued and royalties					accrued	1,0 =3030	and royalties	(.,	accr	ued	(q) through (t))
Α											
В											
<u>c</u>									<u> </u>	1	4 000 0 10
8	Add lines A through	gh C, colun	nn (u). Enter	tne total	here and on	line 9, page	2		. ▶	8	4,800,316

Foreign Tax Credit

(Individual, Estate, or Trust)
► Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

OMB No. 1545-0121

2021

Attachment
Sequence No. 19

	ment of the Treasury I Revenue Service (99)	► Go to www.irs.gov/Form1116 for instructions and the latest information. Attachment Sequence No. 19									
Name		Total F	orms Filed =	5,46	64,312		Identify	ring number a	s shown		e 1 of your tax return
	a separate Form 1116 f . Report all amounts in						me in the ins	tructions. Cl	neck only	y one	box on each Form
	Section 951A category Foreign branch category		c ☐ Passiv d ☐ Genera			e ☐ Section f ☐ Certain	•		•] Lum	p-sum distributions
	esident of (name of c		foreign count	ry or IIS	nossession	use column	ο Δ in Part I	and line Δ	in Part	II If v	rou paid taxes to
	e than one foreign o										ou paid taxes to
Pa	rt I Taxable Inco	ome or Lo	ss From S	ources O	utside the	United St	ates (for o	category c	hecke	d abo	ove)
					Fo	reign Country	y or U.S. Po	ssession			Total
i	Enter the name of possession		Α		В	С		(Add	cols. A, B, and C.)		
1a	Gross income from	m sources v he type cl	vithin country	shown /e (see							
										1a	365,515,649
b		s compensa n employe n all source sed an alte	ee, your t es is \$250,00 ernative basis	onal total 0 or s to						14	300,010,010
Dedu	ctions and losses (Ca	aution: See i	nstructions.):								
2	Expenses definite 1a (attach stateme										
3	Pro rata share of related:	other dedu	ctions not de	efinitely							
а	Certain itemized d (see instructions) .			I .							
b	,										
C				 -							
C	0			-							
£			•	· ·							
f	Divide line 3d by line 3d by line 3d by			_							
9 4	Pro rata share of in										
a		interest (use	e the Worksh	neet for							
b											
5	Losses from foreig	n sources		[
6	Add lines 2, 3g, 4a									6	176,137,966
7	Subtract line 6 fror					age 2			. ▶	7	189,377,694
Pai	Till Foreign Tax Credit is claimed	es Paid oi	r Accruea	(see instri	uctions)						
	for taxes				For	reign taxes paid	d or accrued				
Ę	(you must check one) (j) Paid		In foreign	currency				In U.S. de	ollars		
Country	(k) Accrued	Taxes	withheld at sour		(p) Other	Taxes w	rithheld at sour		(t) Ot	her	(u) Total foreign
ర∖	(I) Date paid or accrued	(m) Dividends	(n) Rents	(o) Interest	foreign taxes paid or accrued	(q) Dividends	(r) Rents and royalties	(s) Interest	foreign paid accru	taxes or	taxes paid or accrued (add cols. (q) through (t))
Α											
В											
С											
8	Add lines A throu	gh C, colun	nn (u). Enter	the total he	ere and on	line 9, page 2	2		. ▶	8	37,574,580

Form 1116 (2021) Page **2**

Part	III Figuring the Credit				
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	4,800,316		
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year	10			
	(If your income was section 951A category income (box a above Part I), leave line 10 blank.)				
11	Add lines 9 and 10	11			
12	Reduction in foreign taxes (see instructions)	12	(96,851		
13	Taxes reclassified under high tax kickout (see instructions)	13			
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes	availa	able for credit	14	
15 16	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions	15 16	5,035,635 205,700		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	4,973,889		
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption	18			
	Caution: If you figured your tax using the lower rates on qualified d	livider	nds or capital gains, see		
19	instructions. Divide line 17 by line 18. If line 17 is more than line 18, enter "1"			19	
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 1040), line 2. Estates and trusts: Enter the amount from Form 104 total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and t from Form 1040-NR, line 16	1, Scl	hedule G, line 1a; or the should enter the amount	20	
	$ \textbf{Caution:} \ \text{If you are completing line 20 for separate category } \textbf{g} \text{(lump-s Form 8978, Partner's Additional Reporting Year Tax, see instructions.} $	um di	stributions), or, if you file		
21	Multiply line 20 by line 19 (maximum amount of credit)			21	4,505,574
22	Increase in limitation (section 960(c))			22	232
23	Add lines 21 and 22			23	4,483,338
24	Enter the smaller of line 14 or line 23. If this is the only Form 111 through 32 and enter this amount on line 33. Otherwise, complete the instructions	appro	priate line in Part IV. See	24	4,334,275
Part	V Summary of Credits From Separate Parts III (see instru				<u>'</u>
25	Credit for taxes on section 951A category income	25	-1		
26	Credit for taxes on foreign branch category income	26			
27	Credit for taxes on passive category income	27			
28	Credit for taxes on general category income	28			
29	Credit for taxes on section 901(j) income	29			
	-	30			
30	Credit for taxes on certain income re-sourced by treaty				
31	Credit for taxes on lump-sum distributions	31		-	4 224 426
32	Add lines 25 through 31			32	4,334,126
33	Enter the smaller of line 20 or line 32			33	4,334,126
34	Reduction of credit for international boycott operations. See instruction			34	2,818
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter h 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, I			35	4,334,613

Form 1116 (2021) Page **2**

Part	III Figuring the Credit				
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	37,574,580		
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year	10			
	(If your income was section 951A category income (box a above Part I), leave line 10 blank.)				
11	Add lines 9 and 10	11		-	
12	Reduction in foreign taxes (see instructions)	12	(2,188,355)	-	
13	Taxes reclassified under high tax kickout (see instructions)	13			
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes	availa	able for credit	14	
15 16	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions	15 16	189,377,684 1,291,236	-	
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	190,665,213		
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption	18			
	Caution: If you figured your tax using the lower rates on qualified constructions.		nds or capital gains, see		
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1".			19	
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, li 1040), line 2. Estates and trusts: Enter the amount from Form 104 total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and from Form 1040-NR, line 16	1, Scl	nedule G, line 1a; or the should enter the amount	20	
	Caution: If you are completing line 20 for separate category g (lump-s Form 8978, Partner's Additional Reporting Year Tax, see instructions.		stributions), or, if you file		
21	Multiply line 20 by line 19 (maximum amount of credit)			21	55,702,804
22	Increase in limitation (section 960(c))			22	4,431
23	Add lines 21 and 22			23	54,753,500
24	Enter the smaller of line 14 or line 23. If this is the only Form 111 through 32 and enter this amount on line 33. Otherwise, complete the instructions	appro	priate line in Part IV. See	24	29,070,510
Part		uctio	ns)		
25	Credit for taxes on section 951A category income	25			
26	Credit for taxes on foreign branch category income	26			
27	Credit for taxes on passive category income	27			
28	Credit for taxes on general category income	28			
29	Credit for taxes on section 901(j) income	29			
30	Credit for taxes on certain income re-sourced by treaty	30			
31	Credit for taxes on lump-sum distributions	31			
32	3			32	29,019,120
33	Enter the smaller of line 20 or line 32			33	29,019,120
34	Reduction of credit for international boycott operations. See instruction	ns for	line 12	34	887
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter I				20,020,404
	1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III,	line 1a	<u> </u>	35	29,029,481 Form 1116 (2021)
					FOIIII I I I U (2021)

Form **2106**

Employee Business Expenses

(for use only by Armed Forces reservists, qualified performing artists, fee-basis state or local government officials, and employees with impairment-related work expenses)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form2106 for instructions and the latest information. Attachment Sequence No. **129**

Occupation in which you incurred expenses Social security number 351,740 Total Forms Filed =

Pa	t I Employee Business Expenses and Reimbursements				
Ste	o 1 Enter Your Expenses		Column Other The Meals	1	Column B Meals
1	Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.)	1	175,428	,	
2	Parking fees, tolls, and transportation, including train, bus, etc., that didn't involve overnight travel or commuting to and from work	2	100,751		
3	Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Don't include meals	3	96,753		
4	Business expenses not included on lines 1 through 3. Don't include meals	4	223,725	5	
5	Meals expenses (see instructions)	5			127,255
6	Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	339,924		
	Note: If you weren't reimbursed for any expenses in Step 1, skip line 7 and enter the amount	ount	from line 6 o	n line	8.
7	Enter reimbursements received from your employer that weren't reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 of your Form W-2 (see instructions)	7	12,552		6,329
Ste	o 3 Figure Expenses To Deduct				·
8	Subtract line 7 from line 6. If zero or less, enter -0 However, if line 7 is greater than line 6 in Column A, report the excess as income on Form 1040 or 1040-SR, line 1 (or on Form 1040-NR, line 1a)	8	339,116	6	126,237
	Note: If both columns of line 8 are zero, you can't deduct employee business expenses. Stop here and attach Form 2106 to your return.				
9	In Column A, enter the amount from line 8. In Column B, see the instructions for the amount to enter	9			126,237
10	Add the amounts on line 9 of both columns and enter the total here. Also, enter the total (Form 1040), line 12. Employees with impairment-related work expenses, see the instruon where to enter the total on your return	ction	ns for rules	10	341,448
For F	Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 1				Form 2106 (202

Employee Business Expenses

(for use only by Armed Forces reservists, qualified performing artists, fee-basis state or local government officials, and employees with impairment-related work expenses)

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form2106 for instructions and the latest information. Attachment Sequence No. 129

Form **2106** (2021)

Cat. No. 11700N

Social security number Occupation in which you incurred expenses Total Forms Filed = 351.740 Part I **Employee Business Expenses and Reimbursements** Column A Column B **Step 1 Enter Your Expenses** Other Than Meals Meals 1,227,853 1 Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.) . . . 1 2 Parking fees, tolls, and transportation, including train, bus, etc., that didn't involve 2 187,812 3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. **Don't** include meals 3 190,601 4 Business expenses not included on lines 1 through 3. Don't include meals 1,175,125 283,512 5 6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column 2.781.391 Note: If you weren't reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8. Step 2 Enter Reimbursements Received From Your Employer for Expenses Listed in Step 1 7 Enter reimbursements received from your employer that weren't reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 25,802 15,533 **Step 3 Figure Expenses To Deduct** 8 Subtract line 7 from line 6. If zero or less, enter -0-. However, if line 7 is greater than line 6 in Column A, report the excess as income on Form 1040 or 1040-SR, line 1 (or 8 2,756,398 270,301 Note: If both columns of line 8 are zero, you can't deduct employee business expenses. Stop here and attach Form 2106 to your return. 157,932 9 In Column A, enter the amount from line 8. In Column B, see the instructions for the 10 Add the amounts on line 9 of both columns and enter the total here. Also, enter the total on Schedule 1 2,914,330 (Form 1040), line 12. Employees with impairment-related work expenses, see the instructions for rules 10

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

Form 2106 (2021) Page **2**

Part	Vehicle Expenses								
	on A-General Information (You must complete th	is sec	ction if you are		(a)	Vehicle 1	(b)	Vehic	ele 2
claimi	ng vehicle expenses.)				(α)	Vernole 1	(5)	VOITIC	
11	Enter the date the vehicle was placed in service			11	/	/		/	/
12	Total miles the vehicle was driven during 2021			12		miles			miles
13	Business miles included on line 12			13		miles			miles
14	Percent of business use. Divide line 13 by line 12			14		%			%
15	Average daily roundtrip commuting distance			15		miles			miles
16	Commuting miles included on line 12			16		miles			miles
17	Other miles. Add lines 13 and 16 and subtract the	total	from line 12	17		miles			miles
18	Was your vehicle available for personal use during	off-d	luty hours?				. 🗆	Yes	☐ No
19	Do you (or your spouse) have another vehicle avai	lable 1	for personal use?				. 🗆	Yes	☐ No
20	Do you have evidence to support your deduction?	٠.					. 🗆	Yes	☐ No
21								Yes	☐ No
Secti	on B-Standard Mileage Rate (See the instruct	ions	for Part II to find out	whet	her to c	omplete this	section	or Se	ction C.)
22	Multiply line 13 by 56¢ (0.56). Enter the result here	and o	on line 1				22	159,	880
Secti	on C-Actual Expenses								
			(a) Vehicl	le 1		(k) Vehic	cle 2	
23	Gasoline, oil, repairs, vehicle insurance, etc	23							
24a	Vehicle rentals	24a							
b	Inclusion amount (see instructions)	24b							
С	Subtract line 24b from line 24a	24c							
25	Value of employer-provided vehicle (applies only								
	if 100% of annual lease value was included on								
	Form W-2—see instructions)	25							
26	Add lines 23, 24c, and 25	26							
27	Multiply line 26 by the percentage on line 14 .	27							
28	Depreciation (see instructions)	28							
29	Add lines 27 and 28. Enter total here and on line 1	29		13,4	178				
Section	on D-Depreciation of Vehicles (Use this section	only	if you owned the veh	icle ar	nd are co	ompleting Sec	ction C	for the	vehicle.)
			(a) Vehic	le 1		(k) Vehic	cle 2	<u> </u>
30	Enter cost or other basis (see instructions)	30							
31	Enter section 179 deduction and special allowance								
	(see instructions)	31							
32	Multiply line 30 by line 14 (see instructions if you								
	claimed the section 179 deduction or special								
	allowance)	32							
33	Enter depreciation method and percentage (see								
	instructions)	33							
34	Multiply line 32 by the percentage on line 33 (see								
•	instructions)	34							
35	Add lines 31 and 34	35							
36	Enter the applicable limit explained in the line 36								
	instructions	36							
37	Multiply line 36 by the percentage on line 14 .	37							
38	Enter the smaller of line 35 or line 37. If you	<u> </u>							
55	skipped lines 36 and 37, enter the amount from								
	line 35. Also enter this amount on line 28 above	38							

Form 2106 (2021) Page **2**

Part	Vehicle Expenses							
	n A-General Information (You must complete th	is sec	tion if you are		(a) \	Vehicle 1	(b) Vehi	cle 2
claimin	ng vehicle expenses.)				(4)	7 0111010 1	(3) (3)	0.0 2
11	Enter the date the vehicle was placed in service				/	/	/	/
12	Total miles the vehicle was driven during 2021					miles		miles
13						miles		miles
14	Percent of business use. Divide line 13 by line 12					%		%
15	Average daily roundtrip commuting distance					miles		miles
16						miles		miles
17	Other miles. Add lines 13 and 16 and subtract the					miles		miles
18	Was your vehicle available for personal use during		-					☐ No
19	Do you (or your spouse) have another vehicle avail		•					☐ No
20	Do you have evidence to support your deduction?							☐ No
21	If "Yes," is the evidence written?					<u> </u>	. U Yes	☐ No
Section	on B-Standard Mileage Rate (See the instruct							
22	Multiply line 13 by 56¢ (0.56). Enter the result here	and	on line 1				22 1,08	0,249
Section	on C-Actual Expenses		(a) \/ol	niolo 1		1	o) Vehicle 2	
			(a) Veh	licie i		1)	yenicie z	
23	Gasoline, oil, repairs, vehicle insurance, etc	23						
24a	Vehicle rentals	24a						
b	Inclusion amount (see instructions)	24b						
С	Subtract line 24b from line 24a	24c						
25	Value of employer-provided vehicle (applies only if 100% of annual lease value was included on							
	Form W-2—see instructions)	25						
26	Add lines 23, 24c, and 25	26						
27	Multiply line 26 by the percentage on line 14	27						
28	Depreciation (see instructions)	28						
29	Add lines 27 and 28. Enter total here and on line 1	29		119,	571			
	n D—Depreciation of Vehicles (Use this section		if you owned the y			mpleting Sec	ction C for the	vehicle)
Ocotio	Depresidant of vernoles (ose and section	City	(a) Ve		ia are oc	, 	b) Vehicle 2	o vernoie. _j
			(4) 10	111010 1		, ·	o, vernere z	
30	Enter cost or other basis (see instructions)	30						
31	Enter section 179 deduction and special allowance (see instructions)	31						
00		-						
32	Multiply line 30 by line 14 (see instructions if you claimed the section 179 deduction or special							
	allowance)	32						
33	Enter depreciation method and percentage (see	02						
33	instructions)	33						
34	Multiply line 32 by the percentage on line 33 (see	-						
J -1	instructions)	34						
35	Add lines 31 and 34	35						
36	Enter the applicable limit explained in the line 36	30						
50	instructions	36						
37	Multiply line 36 by the percentage on line 14	37						
38		J.						
30	Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from							
	line 35. Also enter this amount on line 28 above	38						
							Form 2	2106 (2021)

VOID	RRECTED							
Name, address, and ZIP code of RIC or REIT	OMB No. 1545-0123	Notice to Shareholder of						
Total Forms Filed = 4,575	Form 2439 (Rev. November 2021)	Long-Term Capital Gains For calendar year 20, or other tax y of the regulated investment company (RIC) o real estate investment trust (REIT) beginning, 20, and ending, 20						
Identification number of RIC or REIT	1a Total undistributed long-ted 4,519	rm capital gains	Сору А					
Shareholder's identifying number	1b Unrecaptured section 1250 *	0 gain	Attach to Form 1120-RIC or Form 1120-REIT.					
Shareholder's name, address, and ZIP code	1c Section 1202 gain	1d Collectibles (28%) gain						
	0	0	For Instructions					
	2 Tax paid by the RIC or REI 3,372	and Paperwork Reduction Act Notice, see back of Copies A and D.						

Form **2439** (Rev. 11-2021)

Cat. No. 11858E

www.irs.gov/Form2439

Department of the Treasury - Internal Revenue Service

^{*} Data not shown because of the small number of sample returns on which they are based.

□ VOID □ C	ORRECTED						
Name, address, and ZIP code of RIC or REIT	OMB No. 1545-0123	Notice to Shareholder of					
Total Forms Filed = 4,575	Form 2439 (Rev. November 2021)	Long-Term Capita For calendar year 20, of the regulated investment com real estate investment tru beginning, 20 ending, 20	or other tax year npany (RIC) or the ust (REIT) 0, and				
Identification number of RIC or REIT	1a Total undistributed long-te	erm capital gains					
	11,585		Copy A				
Shareholder's identifying number	1b Unrecaptured section 125	0 gain	Attach to Form 1120-RIC				
	*		or Form 1120-RIC				
Shareholder's name, address, and ZIP code	1c Section 1202 gain	1d Collectibles (28%) gain					
	0	0	For Instructions				
	2 Tax paid by the RIC or RE	IT on the box 1a gains	and Paperwork Reduction Act Notice, see back of				
	2,383 Copies A and						

Form **2439** (Rev. 11-2021)

Cat. No. 11858E

www.irs.gov/Form2439

Department of the Treasury - Internal Revenue Service

^{*} Data not shown because of the small number of sample returns on which they are based.

Form **2441**

Child and Dependent Care Expenses

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

▶ Go to www.irs.gov/Form2441 for instructions and the latest information.



OMB No. 1545-0074

Attachment Sequence No. **21**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Total Forms Filed = 6 813 340 Your social security number

		101	ai Forins Fileu -	- 0,013,340					
				are expenses if your filir d Persons Filing Separat					
				are expenses is refunda ore than half of 2021. If					
Part				rovided the Care—Y oviders, see the instr			х		🗆
1	(a) Care provider's name		(number, street, a	(b) Address apt. no., city, state, and ZIP co	de)	(c) Identifying number (SSN or EIN)	care prov	there if the ider is your lemployee. tructions)	(e) Amount paid (see instructions)
									6,668,325
			u receive care benefits?			mplete only Part mplete Part III on			
(Form in 202	1040). If you inc 2, don't include t	urred care ex these expens	penses in 2021 es in column (c)	ou may owe employme but didn't pay them un of line 2 for 2021. See	ntil 2022, or	if you prepaid in			
Part	ll Credit	for Child ar	nd Dependent	Care Expenses					
2				If you have more than t		• .			
	6,813,340 First	(a) Qualifyin	g person's name	Last		g person's social ity number	incurre	ed and paid	xpenses you d in 2021 for the in column (a)
								0,	
								2,124	.835
	Λ al al +la a - a - a - a - a - a - a - a - a - a	ha i.a. a a la.a.	(a) af line 0. D ay	-14t +	200 :6 b-	al ana avvalit dan			
3		000 if you had	two or more p	n't enter more than \$8,0 persons. If you completed in the completed in the completed in the completed in the completed in the completed in the completed in the completed in the completed in the completed in the complete in the completed in the complete i			3	6,	371,702
4	Enter your earn	ed income. S	See instructions				4	6,	772,744
5	If married filing	jointly, enter	your spouse's e	earned income (if you or ears, enter the amount f	r your spous		5		687,510
6	Enter the smalle	est of line 3, 4	1, or 5				6	6,	341,770
7	Enter the amour	nt from Form	1040, 1040-SR,	or 1040-NR, line 11 .	7				
8	• If line 7 is \$125			elow that applies to the ale	amount on li	ne 7.			
	 If line 7 is over amount to ent 		d no more than	\$438,000, see the instr	uctions for li	ne 8 for the			
	 If line 7 is over claim a credit 		on't complete lir	ne 8. Enter zero on line 9	9a. You may	be able to	8	6,66	2,597X .
	Multiply line 6 by	•					9a	6,23	37,871
b	from line 13 of the	he worksheet	here. Otherwise	e Worksheet A in the in e, go to line 10			9b	9,	632
10	refundable cred	dit for child	and dependent	you checked the box care expenses; enter complete line 11. If you	the amount	from this line on			
	`	,,	O ,	· · · · · · · · ·			10	6,1	59,686
11	Nonrefundable	credit for ch	nild and depend	dent care expenses. If and limited by the a	you didn't c	heck the box on			
				at you can claim and er					
							11		601,920
For Pa				ax return instructions.		Cat. No. 11862M		F	form 2441 (2021)

Child and Dependent Care Expenses

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

► Go to www.irs.gov/Form2441 for instructions and the latest information.



OMB No. 1545-0074

Attachment Sequence No. **21**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Total Forms Filed = 6,813,340

P. For 2021, your gradit for shild and dependent care expenses is refundable if you, or your angular if married filling is	aintly had a	•
requirements listed in the instructions under "Married Persons Filing Separately." If you meet these requirements, check	this box .	
A You can't claim a credit for child and dependent care expenses if your filing status is married filing separately unless y	you meet the	

B For 2021, your credit for child and dependent care expenses is refundable if you, or your spouse if married filing jointly, had a principal place of abode in the United States for more than half of 2021. If you meet these requirements, check this box . . .

Part I	Persons or O	ganizations Who Provided the Care — You must cor	mplete this pa	rt.			
	If you have mo	re than three care providers, see the instructions and	check this bo	х		 	
				(al) Chaale	have if the		

1	(a) Care provider's name	(b) Address (number, street, apt. no., city, state,	and ZIP code)	(c) Identifying number (SSN or EIN)	(d) Check here if the care provider is your household employee. (see instructions)	(e) Amount paid (see instructions)
						43,568,301
	den	Did you receive No		mplete only Part		

Complete Part III on page 2 next. Caution: If the care was provided in your home, you may owe employment taxes. For details, see the instructions for Schedule H (Form 1040). If you incurred care expenses in 2021 but didn't pay them until 2022, or if you prepaid in 2021 for care to be provided

Part II **Credit for Child and Dependent Care Expenses**

2	Informatio	on .	abo	out	yοι	ur (qua	lify	ring	pe	ers	on((s).	lf y	ou/	ha	ve	mc	re '	tha	n tl	ree	qu	ıali	fyin	gr	ers	son	s, s	see	th	e ir	nstr	uct	ior	is a	ınd	ch	eck
	this box																																						

6,813,340 First	(a) Qualifying per	son's name Last	(b) Qualifying person's social security number	(c) Qualified expenses you incurred and paid in 2021 for the person listed in column (a)
				30,078,446
				9,251,840

- Add the amounts in column (c) of line 2. Don't enter more than \$8,000 if you had one qualifying person or \$16,000 if you had two or more persons. If you completed Part III, enter the amount 4
- If married filing jointly, enter your spouse's earned income (if you or your spouse was a student or was disabled, see the instructions); all others, enter the amount from line 4
- 6 Enter the **smallest** of line 3, 4, or 5 7 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11 . 7
- Enter on line 8 the decimal amount shown below that applies to the amount on line 7.

in 2022, don't include these expenses in column (c) of line 2 for 2021. See the instructions.

- If line 7 is \$125,000 or less, enter .50 on line 8.
- If line 7 is over \$125,000 and no more than \$438,000, see the instructions for line 8 for the amount to enter.
- If line 7 is over \$438,000, don't complete line 8. Enter zero on line 9a. You may be able to claim a credit on line 9b.
- If you paid 2020 expenses in 2021, complete Worksheet A in the instructions. Enter the amount
- 10 Add lines 9a and 9b and enter the result. If you checked the box on line B above, this is your refundable credit for child and dependent care expenses; enter the amount from this line on Schedule 3 (Form 1040), line 13g, and don't complete line 11. If you didn't check the box on line
- Nonrefundable credit for child and dependent care expenses. If you didn't check the box on line B above, your credit is nonrefundable and limited by the amount of your tax; see the instructions to figure the portion of line 10 that you can claim and enter that amount here and on

262,879,895 5 32,249,195

3

4

33,102,972

522,963,691

- 8 13,128,670 9a 11,876 9b
- 13,087,823 10
- 1,077,709

Form 2441 (2021) Page **2**

Part	Dependent Care Benefits		
12	Enter the total amount of dependent care benefits you received in 2021. Amounts you received as an employee should be shown in box 10 of your Form(s) W-2. Don't include amounts reported as wages in box 1 of Form(s) W-2. If you were self-employed or a partner, include amounts you received under a dependent care assistance program from your sole proprietorship or partnership	12	1,329,743
13	Enter the amount, if any, you carried over from 2020 and used in 2021. See instructions	13	28.882
14	If you forfeited or carried over to 2022 any of the amounts reported on line 12 or 13, enter the		20,002
17	amount. See instructions	14	(402.254
15	Combine lines 12 through 14. See instructions	15	(102,354
16	Enter the total amount of qualified expenses incurred in 2021 for	10	
	the care of the qualifying person(s)		
17	Enter the smaller of line 15 or 16		
18	Enter your earned income . See instructions	-	
19	Enter the amount shown below that applies to you.		
	If married filing jointly, enter your spouse's earned income (if you or your spouse was a student or was disabled, see the instructions for line 5). 19 3,687,510		
20	 If married filing separately, see instructions. All others, enter the amount from line 18. Enter the smallest of line 17, 18, or 19		
21	Enter \$10,500 (\$5,250 if married filing separately and you were required to enter your spouse's earned income on line 19). If you entered an amount on line 13, add it to the \$10,500 or \$5,250 amount you enter on line 21. However, don't enter more than the maximum amount allowed under your dependent care plan. See instructions	-	
22	Is any amount on line 12 or 13 from your sole proprietorship or partnership? No. Enter -0 Yes. Enter the amount here	22	1,958
23	Subtract line 22 from line 15		·
24	Deductible benefits. Enter the smallest of line 20, 21, or 22. Also, include this amount on the appropriate line(s) of your return. See instructions	24	1,809
25	Excluded benefits. If you checked "No" on line 22, enter the smaller of line 20 or 21. Otherwise, subtract line 24 from the smaller of line 20 or line 21. If zero or less, enter -0	25	1,034,447
26	Taxable benefits. Subtract line 25 from line 23. If zero or less, enter -0 Also, include this amount on Form 1040 or 1040-SR, line 1; or Form 1040-NR, line 1a. On the dotted line next to Form 1040 or 1040-SR, line 1; or Form 1040-NR, line 1a, enter "DCB"	26	335,512
	To claim the child and dependent care credit, complete lines 27 through 31 below.		
27	Enter \$8,000 (\$16,000 if two or more qualifying persons)	27	
 28	Add lines 24 and 25	28	1,036,115
29	Subtract line 28 from line 27. If zero or less, stop. You can't take the credit. Exception. If you paid 2020 expenses in 2021, see the instructions for line 9b	29	
30	Complete line 2 on page 1 of this form. Don't include in column (c) any benefits shown on line 28 above. Then, add the amounts in column (c) and enter the total here	30	
31	Enter the smaller of line 29 or 30. Also, enter this amount on line 3 on page 1 of this form and complete lines 4 through 11	31	6,371,702
			F 2441 (0001)

Form 2441 (2021) Page **2**

Part	Dependent Care Benefits		
12	Enter the total amount of dependent care benefits you received in 2021. Amounts you received as an employee should be shown in box 10 of your Form(s) W-2. Don't include amounts reported as wages in box 1 of Form(s) W-2. If you were self-employed or a partner, include amounts you received under a dependent care assistance program from your sole proprietorship or partnership	12	4,935,448
13	Enter the amount, if any, you carried over from 2020 and used in 2021. See instructions	13	40.863
14	If you forfeited or carried over to 2022 any of the amounts reported on line 12 or 13, enter the		
	amount. See instructions	14	(137,892)
15	Combine lines 12 through 14. See instructions	15	
16	Enter the total amount of qualified expenses incurred in 2021 for		
4-	the care of the qualifying person(s)		
17	Enter the smaller of line 15 or 16		
18 19	Enter your earned income. See instructions		
19	If married filing jointly, enter your spouse's earned income (if you or your spouse was a student or was disabled, see the instructions for line 5). 19 262,879,895		
20	 If married filing separately, see instructions. All others, enter the amount from line 18. Enter the smallest of line 17, 18, or 19		
21	Enter \$10,500 (\$5,250 if married filing separately and you were required to enter your spouse's earned income on line 19). If you entered an amount on line 13, add it to the \$10,500 or \$5,250 amount you enter on line 21. However, don't enter more than the maximum amount allowed under your dependent care plan. See instructions		
22	Is any amount on line 12 or 13 from your sole proprietorship or partnership? No. Enter -0 Yes. Enter the amount here	22	13,857
23	Subtract line 22 from line 15		· · · · · · · · · · · · · · · · · · ·
24	Deductible benefits. Enter the smallest of line 20, 21, or 22. Also, include this amount on the appropriate line(s) of your return. See instructions	24	13,726
25	Excluded benefits. If you checked "No" on line 22, enter the smaller of line 20 or 21. Otherwise, subtract line 24 from the smaller of line 20 or line 21. If zero or less, enter -0	25	4,165,968
26	Taxable benefits. Subtract line 25 from line 23. If zero or less, enter -0 Also, include this amount on Form 1040 or 1040-SR, line 1; or Form 1040-NR, line 1a. On the dotted line next to Form 1040 or 1040-SR, line 1; or Form 1040-NR, line 1a, enter "DCB"	26	658,593
	To claim the child and dependent care credit, complete lines 27 through 31 below.		
27	Enter \$8,000 (\$16,000 if two or more qualifying persons)	27	
28	Add lines 24 and 25	28	4,179,694
29	Subtract line 28 from line 27. If zero or less, stop. You can't take the credit. Exception. If you paid 2020 expenses in 2021, see the instructions for line 9b	29	
30	Complete line 2 on page 1 of this form. Don't include in column (c) any benefits shown on line	-	
	28 above. Then, add the amounts in column (c) and enter the total here	30	
31	Enter the smaller of line 29 or 30. Also, enter this amount on line 3 on page 1 of this form and complete lines 4 through 11	31	33,102,972
	· · · · · · · · · · · · · · · · · · ·		Form 2441 (2021)

Form **2555**

Foreign Earned Income

OMB No. 1545-0074

2021

Department of the Treasury Internal Revenue Service

► Attach to Form 1040 or 1040-SR. ► Go to www.irs.gov/Form2555 for instructions and the latest information. Attachment Sequence No. **34**

		•	For Use	by U.S. Citizens a	and Resident	Aliens Only		
Name s	hown on For	m 1040 or 1040-SR	Total Forms F	Filed = 476,323			Your social	security number
Part	Ge	neral Informa	tion				•	
1 Y	our foreign	address (including	g country)				2 Your occ	cupation
3		r's name ▶						
4a	Employe	r's U.S. address	· -					
b	Employe	r's foreign addre	ess 🟲					
5	any that		d \square A foreig	gn affiliate of a U.S. co	ompany	b ☐ A U.S. com e ☐ Other (spec	cify) ►	
6a	If you pre	eviously filed For	rm 2555 or Fori	m 2555-EZ, enter the	last year you file	ed the form. $ hild ho_{}$		
b				r Form 2555-EZ to cla				
C				clusions?				
d				f exclusion and the ta	x year for which	the revocation w	as effective.	
7		country are you						
8a	tax home	e? See Second :	foreign housel	sidence for your famil hold in the instruction	ns			☐ Yes ☐ No
b				eparate foreign reside	ence. Also, ente	r the number of c	days during yo	ur tax year that you
0		ed a second hou						
9	List your	tax nome(s) dur	ing your tax ye	ar and date(s) establis	sned			
Part	No		itizens and re	Bona Fide Residen sident aliens who a	are citizens or r		. treaty coun	tries can use this
10	Date bon	a fide residence	began ►		, and e	ended ►		
11				d ☐ Purchased r d ☐ Quarters furi	nouse b ∐ H nished by emplo	lented house or a byer	partment	c ☐ Rented room
12a				ad during any part of	the tax year?			☐ Yes ☐ No
b		who and for wha						
13a	residenc	e that you aren't	a resident of t	the authorities of the hat country? See inst	ructions			☐ Yes ☐ No
b	-			ne country where you				
	If you a	nswered "Yes"	to 13a and "I	No" to 13b, you dor	n't qualify as a	bona fide resid	ent. Don't co	mplete the rest of
	this part							
14	-			s or its possessions d		-	umns (a)-(d) b	elow. Don't include
			(c) Number of	out report it on Form 1 (d) Income earned in			(c) Number of	(d) Income earned in
arriv	a) Date ed in U.S.	(b) Date left U.S.	days in U.S. on business	U.S. on business (attach computation)	(a) Date arrived in U.S.	(b) Date left U.S.	days in U.S. on business	U.S. on business (attach computation)
15a	List any	contractual term	s or other cond	ditions relating to the	■ length of your er	mployment abroa	ıd. ▶	
	•			· ·				
b	Enter the	type of visa und	der which you	entered the foreign co	ountry. ▶			
С	Did your	visa limit the ler	ngth of your sta	y or employment in a	foreign country	? If "Yes," attach	explanation .	☐ Yes ☐ No
d	Did you r	maintain a home	in the United S	States while living abr	oad?			☐ Yes ☐ No
е	If "Yes,"	enter address o	f your home, w	hether it was rented,	the names of the	e occupants, and	their relations	hip
	to you.	•						

Foreign Earned Income

OMB No. 1545-0074

2021

Department of the Treasury Internal Revenue Service

► Attach to Form 1040 or 1040-SR. ► Go to www.irs.gov/Form2555 for instructions and the latest information.

Attachment Sequence No. **34**

Name s	shown on For	m 1040 or 1040-SR	Total Forms F	iled = 47	6,323			Your social	security number
Par	Ge	neral Informa	tion						
1 Y	our foreign	address (includin	g country)					2 Your oc	cupation
3		er's name ▶							
4a	Employe	er's U.S. address	>						
b	Employe	er's foreign addre	ess ►						
5	Employe any that	er is (check	a ∟ A foreig	in entity			b ∐ A U.S. cor	npany	c Self
6a	If you pr	eviously filed For	rm 2555 or Forr	m 2555-EZ, en	ter the last ye	ar you file	ed the form. >		and go to line 7.
b	If you did	dn't previously fi	le Form 2555 o	r Form 2555-E	Z to claim eith	ner of the	exclusions, che	ck here 🕨 🗌	and go to line 7.
С	Have yo	u ever revoked e	ither of the exc	lusions?					☐ Yes ☐ No
d	If you an	swered "Yes," e	nter the type of	exclusion and	I the tax year	for which	the revocation v	was effective. 🕨	-
7	Of what	country are you	a citizen/nation	al? ►					
8a		maintain a sepa e? See Second :							□ Yes □ No
b		•	•		ı residence. <i>P</i>	lso, ente	the number of	days during yo	our tax year that yo
		ed a second hou							
9	List your	tax home(s) dur	ing your tax yea	ar and date(s)	established.				
	-	complete eithe information				_		-	-
Part		xpayers Quali							
							nationals of LLS	S treaty coun	tries can use this
		t. See instructi		olderit dilerio	will are on	20110 01 1	iationals of o.c	o. troaty ocar	trico carr acc tric
10		na fide residence				. and e	ended ▶		
11	Kind of I	iving quarters in	foreign country	► a 🗌 Purch	nased house ers furnished	b 🗌 R	ented house or	apartment	c ☐ Rented room
12a b	-	of your family live who and for wha	-	ad during any	part of the ta	x year?			☐ Yes ☐ No
13a		ou submitted a							
	residenc	e that you aren't	a resident of the	nat country? S	ee instruction	s			☐ Yes ☐ No
b	Are you	required to pay i	ncome tax to th	ne country whe	ere you claim	bona fide	residence? See	instructions .	☐ Yes ☐ No
	If you a	nswered "Yes"	to 13a and "N	lo" to 13b, y	ou don't qua	lify as a	bona fide resid	dent. Don't co	mplete the rest
	this part				-	-			•
14	If you we	ere present in the	e United States	or its posses	sions during t	he tax ye	ar, complete col	umns (a)-(d) b	elow. Don't includ
	the inco	me from column	(d) in Part IV, b	ut report it on	Form 1040 or	· 1040-SF	ł.		
arriv	a) Date red in U.S.	(b) Date left U.S.	(c) Number of days in U.S. on business	(d) Income earr U.S. on busin (attach comput	ness (a) Date ed in U.S.	(b) Date left U.S.	(c) Number of days in U.S. on business	(d) Income earned in U.S. on business (attach computation)
15a	List any	contractual term	s or other cond	litions relating	to the length	of vour er	nnlovment abro	ad >	
100	List arry	contractual term	3 of other conc	illions relating	to the length				
b	Enter the	e type of visa und	der which vou e	entered the for	eian country.	>			
c	Did vour	visa limit the ler	ngth of your star	y or employme	ent in a foreign	n country	? If "Yes." attach	explanation .	☐ Yes ☐ No
d	-				_	-		-	☐ Yes ☐ No
е	-	enter address of	f your home, wl	nether it was r	ented, the nar	nes of the	e occupants, and		
	to you.								
			tice, see the Inst		10101	1010 OD		o. 11900P	Form 2555 (202

Form 2555 (2021) Pag						Page 2	
Part	rt III Taxpayers Qualifying Under Physical	Presence T	est				
	Note: U.S. citizens and all resident alie	ns can use th	is test. See inst	ructions.			
16	The physical presence test is based on the 12-m	onth period fro	om 🕨		through ►		
17	Enter your principal country of employment durir	ng your tax yea	r. >				
18	foreign countries that didn't involve travel on or If you have no travel to report during the period	you traveled abroad during the 12-month period entered on line 16, complete columns (a)–(f) below. Exclude travel betworeign countries that didn't involve travel on or over international waters, or in or over the United States, for 24 hours or me you have no travel to report during the period, enter "Physically present in a foreign country or countries for the entire nonth period." Don't include the income from column (f) below in Part IV, but report it on Form 1040 or 1040-SR.					
(a) Name of country		b) Date arrived	(c) Date left	(d) Full days present in	(e) Number of days in U.S.	(f) Income earned in U.S. on business (attach	

(a) Name of country (including U.S.)	(b) Date arrived	(c) Date left	present in country	days in U.S. on business	on business (attach computation)
Down IV	-	•		-	

Part IV All Taxpayers

Note: Enter on lines 19 through 23 all income, including noncash income, you earned and actually or constructively received during your 2021 tax year for services you performed in a foreign country. If any of the foreign earned income received this tax year was earned in a prior tax year, or will be earned in a later tax year (such as a bonus), see the instructions. **Don't** include income from line 14, column **(d)**, or line 18, column **(f)**. Report amounts in U.S. dollars, using the exchange rates in effect when you actually or constructively received the income.

If you are a cash basis taxpayer, report on Form 1040 or 1040-SR all income you received in 2021, no matter when you performed the service.

	2021 Foreign Earned Income		Amount (in U.S. dollars)
19	Total wages, salaries, bonuses, commissions, etc	19	402,706
20	Allowable share of income for personal services performed (see instructions):		
а	In a business (including farming) or profession	20a	42,448
b	In a partnership. List partnership's name and address and type of income. ▶		
		20b	1,860
21	Noncash income (market value of property or facilities furnished by employer—attach statement showing how it was determined):		
а	Home (lodging)	21a	7,366
b	Meals	21b	1,356
С	Car	21c	1,752
d	Other property or facilities. List type and amount. ▶		
		21d	1,196
22	Allowances, reimbursements, or expenses paid on your behalf for services you performed:		
а	Cost of living and overseas differential	4	
b	Family		
С	Education	_	
d	Home leave		
e	Quarters	-	
f	For any other purpose. List type and amount. ▶ 22f 23,250		
g	Add lines 22a through 22f	22g	28,615
23	Other foreign earned income. List type and amount.		20,013
		23	13,035
24	Add lines 19 through 21d, line 22g, and line 23	24	435,008
25	Total amount of meals and lodging included on line 24 that is excludable (see instructions)	25	4,061
26	Subtract line 25 from line 24. Enter the result here and on line 27 on page 3. This is your 2021 foreign earned income	26	435.008
			Form 2555 (202

2021 Line Item Estimates—All figures are estimates based on samples.

	Amounts of sel	ected lines filed	(in thousands	of dol	lars)			
	55 (2021)							Page 2
Part								
	Note: U.S. citizens and all resident							
16	The physical presence test is based on the	•				through l		
17 18	Enter your principal country of employment	= -				(6) la al a		
10	If you traveled abroad during the 12-month foreign countries that didn't involve travel o If you have no travel to report during the pmonth period." Don't include the income from	n or over internation period, enter "Physi	nal waters, or in cally present in	or over a foreig	the U	nited States	s, for a	24 hours or more. for the entire 12-
	(a) Name of country (including U.S.)	(b) Date arrived	(c) Date left	pres	III days ent in intry	(e) Number of days in U.S on business	. `` c	ncome earned in U.S. on business (attach computation)
Part	V All Taxpayers							
	Enter on lines 19 through 23 all income, inc							
	olumn (d), or line 18, column (f). Report ar uctively received the income. If you are a cash basis taxpayer, report of performed the service.		, 0		-			,
	•	reign Earned Inc	ome					Amount (in U.S. dollars)
19	Total wages, salaries, bonuses, commission	ns, etc					19	40,089,780
20	Allowable share of income for personal serv	rices performed (see	e instructions):					.,,
а	In a business (including farming) or profession						20a	2,783,973
b	In a partnership. List partnership's name an	d address and type	of income. ►					
							20b	822,461
21	Noncash income (market value of proper	ty or facilities furn	ished by emplo	yer—at	tach s	tatement		
а	showing how it was determined): Home (lodging)						21a	98,774
a	Tiome (loaging)						21a	90,774
b	Meals						21b	4,145
С	Car						21c	11,027
d	Other property or facilities. List type and am	nount. ▶						
							21d	12,177
22	Allowances, reimbursements, or expenses p	-	-	1 1				
a	Cost of living and overseas differential .			22a		7,808		
b	Family Education			22b 22c		119		
c d	Home leave			22d		,962 ,265		
e				22e		3,709		
f	For any other purpose. List type and amoun	+ -				- ,		
	· · · · · · · · · · · · · · · · · · ·			22f	3,36	69,449		
g							22g	3,760,313
23	Other foreign earned income. List type and	amount. ►						

24

25

26

earned income

Total amount of meals and lodging included on line 24 that is excludable (see instructions) 25 47,464 Subtract line 25 from line 24. Enter the result here and on line 27 on page 3. This is your 2021 foreign

23

24

26

48,131,471 Form **2555** (2021)

596,285

48,178,935

Form 2555 (2021) Page 3 Part V All Taxpayers 27 Are you claiming the housing exclusion or housing deduction? Yes. Complete Part VI. No. Go to Part VII. Taxpayers Claiming the Housing Exclusion and/or Deduction 28 28 88.385 Qualified housing expenses for the tax year (see instructions) 29a Enter location where housing expenses incurred. See instructions. ▶ 95,079 Enter limit on housing expenses. See instructions. 29h Enter the **smaller** of line 28 or line 29b 87,032 30 30 31 Number of days in your qualifying period that fall within your 2021 tax year 110,420 32 32 Multiply \$47.65 by the number of days on line 31. If 365 is entered on line 31, enter \$17,392 here . . . Subtract line 32 from line 30. If the result is zero or less, don't complete the rest of this part or any of 33 110,658 33 34 Divide line 34 by line 27. Enter the result as a decimal (rounded to at least three places), but don't 35 35 Housing exclusion. Multiply line 33 by line 35. Enter the result but don't enter more than the amount 36 36 51,160 Note: The housing deduction is figured in Part IX. If you choose to claim the foreign earned income exclusion, complete Parts VII and VIII before Part IX. Part VII Taxpayers Claiming the Foreign Earned Income Exclusion 37 Maximum foreign earned income exclusion. Enter \$108,700 38 • If you completed Part VI, enter the number from line 31. • All others, enter the number of days in your qualifying period that fall within your 2021 tax year. See the instructions for line 31. 39 • If line 38 and the number of days in your 2021 tax year (usually 365) are the same, enter "1.000." 39 • Otherwise, divide line 38 by the number of days in your 2021 tax year and enter the result as a decimal (rounded to at least three places). 40 40 433,066 434,789 41 41 Foreign earned income exclusion. Enter the smaller of line 40 or line 41. Also, complete Part VIII . 42 42 430,661 Part VIII Taxpayers Claiming the Housing Exclusion, Foreign Earned Income Exclusion, or Both 43 430,958 44 Deductions allowed in figuring your adjusted gross income (Form 1040 or 1040-SR, line 11) that are 36,684 44 allocable to the excluded income. See instructions and attach computation 45 Subtract line 44 from line 43. Enter the result here and in parentheses on Schedule 1 (Form 1040), line 8d. Complete the Foreign Earned Income Tax Worksheet in the Instructions for Forms 1040 and 430.502 Taxpayers Claiming the Housing Deduction—Complete this part only if (a) line 33 is more than line 36, and Part IX **(b)** line 27 is more than line 43. 46 Subtract line 36 from line 33 46 2,578 47 Subtract line 43 from line 27 47 2.578 48 Enter the **smaller** of line 46 or line 47 48 2.578 Note: If line 47 is more than line 48 and you couldn't deduct all of your 2020 housing deduction because of the 2020 limit, use the Housing Deduction Carryover Worksheet in the instructions to figure the amount to enter on line 49. Otherwise, go to line 50. 49 Housing deduction carryover from 2020 (from the Housing Deduction Carryover Worksheet in the 49 Housing deduction. Add lines 48 and 49. Enter the total here and on Schedule 1 (Form 1040), line 50

Form **2555** (2021)

2,578

50

24j. Complete the Foreign Earned Income Tax Worksheet in the Instructions for Forms 1040 and

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 2	555 (2021)		Page 3
Part	V All Taxpayers		•
27	Enter the amount from line 26	27	
	Are you claiming the housing exclusion or housing deduction?		
	Yes. Complete Part VI.		
Dout	No. Go to Part VII.		
Part	VI Taxpayers Claiming the Housing Exclusion and/or Deduction		
28	Qualified bouning expanses for the tax year (acc instructions)	28	2,528,602
20 29a	Qualified housing expenses for the tax year (see instructions)	20	2,020,002
29a b	Enter limit on housing expenses. See instructions	29b	4,715,712
30	Enter the smaller of line 28 or line 29b	30	2,203,899
31	Number of days in your qualifying period that fall within your 2021 tax year		_,
٠.	(see instructions)		
32	Multiply \$47.65 by the number of days on line 31. If 365 is entered on line 31, enter \$17,392 here	32	1,886,831
33	Subtract line 32 from line 30. If the result is zero or less, don't complete the rest of this part or any of		
	Part IX	33	317,068
34	Enter employer-provided amounts. See instructions		
35	Divide line 34 by line 27. Enter the result as a decimal (rounded to at least three places), but don't		
	enter more than "1.000"	35	•
36	Housing exclusion. Multiply line 33 by line 35. Enter the result but don't enter more than the amount		070 444
	on line 34. Also, complete Part VIII	36	979,444
	exclusion, complete Parts VII and VIII before Part IX.		
Part			
37	Maximum foreign earned income exclusion. Enter \$108,700	37	
38	• If you completed Part VI, enter the number from line 31.		
-	All others, enter the number of days in your qualifying period that fall		
	within your 2021 tax year. See the instructions for line 31.		
39	• If line 38 and the number of days in your 2021 tax year (usually 365) are the same, enter "1.000."		
	• Otherwise, divide line 38 by the number of days in your 2021 tax year and enter the result as a	39	•
	decimal (rounded to at least three places).		
40	Multiply line 37 by line 39	40	48,861,085
41	Subtract line 36 from line 27	41	47.152.027
42	Foreign earned income exclusion. Enter the smaller of line 40 or line 41. Also, complete Part VIII •	42	28.501.346
Part	VIII Taxpayers Claiming the Housing Exclusion, Foreign Earned Income Exclusion, or B		
43	Add lines 36 and 42	43	29,480,790
44	Deductions allowed in figuring your adjusted gross income (Form 1040 or 1040-SR, line 11) that are		400.044
	allocable to the excluded income. See instructions and attach computation	44	403,014
45	Subtract line 44 from line 43. Enter the result here and in parentheses on Schedule 1 (Form 1040), line		
	8d. Complete the Foreign Earned Income Tax Worksheet in the Instructions for Forms 1040 and 1040-SR if you enter an amount on this line	45	29,098,815
	Towns Claiming the Hausing Deduction Complete this part only if (a) line 22 is m		
Part	(b) line 27 is more than line 43	1016 1	nan inie 50, and
46	Subtract line 36 from line 33	46	50,976
47	Subtract line 43 from line 27	47	745.714
48	Enter the smaller of line 46 or line 47	48	47.618
	Note: If line 47 is more than line 48 and you couldn't deduct all of your 2020 housing deduction		-
	because of the 2020 limit, use the Housing Deduction Carryover Worksheet in the instructions to		
	figure the amount to enter on line 49. Otherwise, go to line 50.		
49	Housing deduction carryover from 2020 (from the Housing Deduction Carryover Worksheet in the		
	instructions)	49	*
50	Housing deduction. Add lines 48 and 49. Enter the total here and on Schedule 1 (Form 1040), line		
	24j. Complete the Foreign Earned Income Tax Worksheet in the Instructions for Forms 1040 and		47.000
	1040-SR if you enter an amount on this line	50	47,698
			Form 2555 (2021)

* Data not shown because of the small number of sample returns on which they are based.

Investment Credit

► Attach to your tax return.

OMB No. 1545-0155

2021

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

Attachment Sequence No. **174**

Total Forms Filed = 27,664

Identifying number

Part	Information Regarding the Election To Treat the Lessee as the Purchaser of Investment	ent Cr	redit Property
-	are claiming the investment credit as a lessee based on a section 48(d) (as in effect on November 4, 19	,	· •
follow	ing information. If you acquired more than one property as a lessee, attach a statement showing the info	rmatior	n below.
1	Name of lessor		
2	Address of lessor		
3	Description of property		
4	Amount for which you were treated as having acquired the property	▶ \$	
Part		d Qua	lifying
	Advanced Energy Project Credit		
5	Qualifying advanced coal project credit (see instructions):		
а	Qualified investment in integrated gasification combined cycle property		
	placed in service during the tax year for projects described in section $48A(d)(3)(B)(i)$		
	·	-	
b	Qualified investment in advanced coal-based generation technology property placed in service during the tax year for projects described in section		
_	48A(d)(3)(B)(ii)	-	
С	placed in service during the tax year for projects described in section		
	48A(d)(3)(B)(iii)		
d	Total. Add lines 5a, 5b, and 5c	5d	222
6	Qualifying gasification project credit (see instructions):	Ju	
	Qualified investment in qualified gasification property placed in service during		
а	the tax year for which credits were allocated or reallocated after October 3,		
	2008, and that includes equipment that separates and sequesters at least 75%		
	of the project's carbon dioxide emissions \$ × 30% (0.30) 6a		
b	Qualified investment in property other than in a above placed in service during		
-	the tax year		
С	Total. Add lines 6a and 6b	6c	163
7	Qualifying advanced energy project credit (see instructions):		100
	Qualified investment in advanced energy project property placed in service		
	during the tax year	7	369
8	Reserved for future use	8	
9	Enter the applicable unused investment credit from cooperatives (see instructions)	9	2,477
10	Add lines 5d, 6c, 7, and 9. Report this amount on Form 3800, Part III, line 1a	10	3,195
For Pa	perwork Reduction Act Notice, see separate instructions. Cat. No. 12276E		Form 3468 (2021)

Investment Credit

OMB No. 1545-0155

2021

► Attach to your tax return.

► Go to www.irs.gov/Form3468 for instructions and the latest information.

Attachment Sequence No. **174**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Total Forms Filed = 27,664

Identifying number

Part	Information Regarding the Election To Treat the Lessee as the Purchaser of Investment	nt Cr	edit Property
	are claiming the investment credit as a lessee based on a section 48(d) (as in effect on November 4, 1990		
follow	ing information. If you acquired more than one property as a lessee, attach a statement showing the inforn	natior	below.
1	Name of lessor		
2	Address of lessor		
3	Description of property		
4		▶ \$	
Part	Qualifying Advanced Coal Project Credit, Qualifying Gasification Project Credit, and Advanced Energy Project Credit	Qual	lifying
5	Qualifying advanced coal project credit (see instructions):		
а	Qualified investment in integrated gasification combined cycle property placed in service during the tax year for projects described in section $48A(d)(3)(B)(i)$		
b	Qualified investment in advanced coal-based generation technology property placed in service during the tax year for projects described in section 48A(d)(3)(B)(ii)		
С	Qualified investment in advanced coal-based generation technology property placed in service during the tax year for projects described in section 48A(d)(3)(B)(iii)		
d	Total. Add lines 5a, 5b, and 5c	5d	14,115
6	Qualifying gasification project credit (see instructions):		
а	Qualified investment in qualified gasification property placed in service during the tax year for which credits were allocated or reallocated after October 3, 2008, and that includes equipment that separates and sequesters at least 75% of the project's carbon dioxide emissions \$ × 30% (0.30) 6a		
b	Qualified investment in property other than in a above placed in service during the tax year		
С	Total. Add lines 6a and 6b	6c	1.892
7	Qualifying advanced energy project credit (see instructions): Qualified investment in advanced energy project property placed in service		7
	during the tax year	7	2,458
8	Reserved for future use	8	
9	Enter the applicable unused investment credit from cooperatives (see instructions)	9	1,325
10	Add lines 5d, 6c, 7, and 9. Report this amount on Form 3800, Part III, line 1a	10	19,790
For Pa	perwork Reduction Act Notice, see separate instructions. Cat. No. 12276E		Form 3468 (2021)

Form 3468 (2021) Page **2**

Part	Rehabilitation Credit and Energy Credit		
11	Rehabilitation credit (see instructions for requirements that must be met):		
	Check this box if you are electing under section $47(d)(5)$ to take your qualified rehabilitation expenditures into account for the tax year in which paid (or, for self-rehabilitated property, when capitalized). See instructions. Note: This election applies to the current tax year and to all later tax years. You may not revoke this election without IRS consent		
b	Enter the dates on which the 24- or 60-month measuring period begins and ends		
С	Enter the adjusted basis of the building as of the beginning date above (or the first day of your holding period, if later)		
d	Enter the amount of the qualified rehabilitation expenditures incurred, or treated as incurred, during the period on line 11b above		
	Enter the amount of qualified rehabilitation expenditures and multiply by the percentage shown:		070
e •	Pre-1936 buildings under the transition rule (see instructions) \$ × 10% (0.10)	11e	676
f g	Certified historic structures under the transition rule (see instructions) \$ × 20% (0.20) Certified historic structures with expenditures paid or incurred after	111	4,921
9	2017 and not under the transition rule (see instructions) \$ × 4% (0.04)	11g	1,134
	Note: This credit is allowed for a 5-year period beginning in the tax year that the qualified rehabilitated building is placed in service.	119	.,
h	For properties identified on line 11f or 11g, complete lines 11h and 11i. Enter the assigned NPS project number or the pass-through entity's employer identification number (see instructions)		
i	Enter the date that the NPS approved the Request for Certification of Completed Work (see instructions)		
12 a	Energy credit: Basis of property using geothermal energy placed in service during the tax year (see instructions)	12a	414
b	Basis of property using solar illumination or solar energy placed in service during the tax year that is attributable to periods after December 31, 2005, and the construction of which began before 2020 (see instructions) $\times \times	12b	4,913
С	Basis of property using solar illumination or solar energy placed in service during the tax year and the construction of which began after 2019 and before 2023 (see instructions) $$\times 26\%$ (0.26)	12c	12,141
d	Reserved for future use	12d	
	Qualified fuel cell property (see instructions):		
е	Basis of property placed in service during the tax year that was acquired after December 31, 2005, and before October 4, 2008, and the basis attributable to construction, reconstruction, or erection by the taxpayer after December 31, 2005, and before October 4, 2008 $$\times$ 30\% (0.30)$	12e	
f	Applicable kilowatt capacity of property on line 12e (see instructions) . ► ×\$1,000	12f	
g	Enter the smaller of line 12e or line 12f	12g	0
h	Basis of property placed in service during the tax year that is attributable to periods after October 3, 2008, and the construction of which began before 2020 $\$$ \times 30% (0.30)	12h	
i	Applicable kilowatt capacity of property on line 12h (see instructions) . ► ×\$3,000	12i	*
J k	Enter the smaller of line 12h or line 12i	12j	*
	after 2019 and before 2023	12k	
l m	Applicable kilowatt capacity of property on line 12k (see instructions) × \$3,000 Enter the smaller of line 12k or line 12l	12l 12m	173
m n	Reserved for future use	12m	173
0	Reserved for future use	120	
р	Reserved for future use	12p	
	Qualified microturbine property (see instructions):		
q	Basis of property placed in service during the tax year that was acquired after December 31, 2005, and the basis attributable to construction, reconstruction, or erection by the taxpayer after		
	December 31, 2005	12q	
r	Kilowatt capacity of property on line 12q	12r	*
S	Enter the smaller of line 12q or line 12r	12s	* Form 3468 (2021)
			rorm 3406 (2021)

Form 3468 (2021) Page **2**

Part	Rehabilitation Credit and Energy Credit		
11	Rehabilitation credit (see instructions for requirements that must be met):		
а	Check this box if you are electing under section 47(d)(5) to take your qualified rehabilitation		
	expenditures into account for the tax year in which paid (or, for self-rehabilitated property, when		
	capitalized). See instructions. Note: This election applies to the current tax year and to all later tax		
	years. You may not revoke this election without IRS consent		
b	Enter the dates on which the 24- or 60-month measuring period begins		
	and ends		
С	Enter the adjusted basis of the building as of the beginning date above (or the		
الم	first day of your holding period, if later)		
d	Enter the amount of the qualified rehabilitation expenditures incurred, or treated as incurred, during the period on line 11b above		
	Enter the amount of qualified rehabilitation expenditures and multiply by the percentage shown:		
е	Pre-1936 buildings under the transition rule (see instructions) \$ × 10% (0.10)	11e	5,187
f	Certified historic structures under the transition rule (see instructions) \$ × 20% (0.20)	11f	354,960
g	Certified historic structures with expenditures paid or incurred after		334,900
3	2017 and not under the transition rule (see instructions) \$ × 4% (0.04)	11g	38,360
	Note: This credit is allowed for a 5-year period beginning in the tax year that the qualified rehabilitated	113	· · · · · · · · · · · · · · · · · · ·
	building is placed in service.		
	For properties identified on line 11f or 11g, complete lines 11h and 11i.		
h	Enter the assigned NPS project number or the pass-through entity's employer identification number		
	(see instructions)		
i	Enter the date that the NPS approved the Request for Certification of Completed Work (see instructions)		
10			
12 a	Energy credit: Basis of property using geothermal energy placed in service during the tax year		
a	(see instructions)	12a	1,384
b	Basis of property using solar illumination or solar energy placed in service during the tax year that	124	
	is attributable to periods after December 31, 2005, and the construction of which began before		
	2020 (see instructions)	12b	304,984
С	Basis of property using solar illumination or solar energy placed in service during the tax year and the		
	construction of which began after 2019 and before 2023 (see instructions) \$ × 26% (0.26)	12c	588,404
d	Reserved for future use	12d	
	Qualified fuel cell property (see instructions):		
е	Basis of property placed in service during the tax year that was acquired after December 31, 2005, and before October 4, 2009, and the basis attributeble to construction, reconstruction, or creation by		
	and before October 4, 2008, and the basis attributable to construction, reconstruction, or erection by the taxpayer after December 31, 2005, and before October 4, 2008 $\$$ \times 30% (0.30)	100	
f	Applicable kilowatt capacity of property on line 12e (see instructions) . × \$1,000	12e 12f	
g	Enter the smaller of line 12e or line 12f	12g	0
h	Basis of property placed in service during the tax year that is attributable to periods after	9	<u> </u>
	October 3, 2008, and the construction of which began before 2020 $\$$ \times 30% (0.30)	12h	
i	Applicable kilowatt capacity of property on line 12h (see instructions) . ► ×\$3,000	12i	
j	Enter the smaller of line 12h or line 12i	12j	*
k	Basis of property placed in service during the tax year and the construction of which began		
_	after 2019 and before 2023	12k	
I	Applicable kilowatt capacity of property on line 12k (see instructions) ⋅ ► × \$3,000	121	5 010
m	Enter the smaller of line 12k or line 12l	12m	5,919
n	Reserved for future use	12n 12o	
o p	Reserved for future use	120 12p	
P	Qualified microturbine property (see instructions):	120	
q	Basis of property placed in service during the tax year that was acquired after December 31, 2005,		
٦	and the basis attributable to construction, reconstruction, or erection by the taxpayer after		
	December 31, 2005	12q	
r	Kilowatt capacity of property on line 12q	12r	
s	Enter the smaller of line 12q or line 12r	12s	*
			Form 3468 (2021)

* Data not shown because of the small number of sample returns on which they are based.

Form 3468 (2021) Page **3**

Part	Rehabilitation Credit and Energy Credit (continued)		
	Combined heat and power system property (see instructions):		
	Caution: You can't claim this credit if the electrical capacity of the property is more than 50		
	megawatts or has a mechanical energy capacity of more than 67,000 horsepower or an equivalent		
	combination of electrical and mechanical energy capabilities.		
t	Basis of property placed in service during the tax year that was acquired after October 3, 2008,		
	and the basis attributable to construction, reconstruction, or erection by the taxpayer after		
	October 3, 2008	12t	
u	If the electrical capacity of the property is measured in:		
	• Megawatts, divide 15 by the megawatt capacity. Enter 1.0 if the capacity is 15 megawatts or less.		
	• Horsepower, divide 20,000 by the horsepower. Enter 1.0 if the capacity is 20,000 horsepower or loss	40	
	less	12u	.
V	Multiply line 12t by line 12u	12v	750
	Qualified small wind energy property (see instructions):		
W	Basis of property placed in service during the tax year that was acquired after October 3, 2008, and before January 1, 2009, and the basis attributable to the construction, reconstruction, or erection by		
	the taxpayer after October 3, 2008, and before January 1, 2009 . \$ × 30% (0.30)	12w	
х	Enter the smaller of line 12w or \$4,000	12w	0
y	Basis of property placed in service during the tax year that is attributable to periods	124	
,	after December 31, 2008, and the construction of which began before		
	2020 · · · · · · · · · · · · · · · · · ·	12y	*
z	Basis of property placed in service during the tax year and the construction of which began		
	after 2019 and before 2023	12z	*
aa	Reserved for future use	12aa	
	Waste energy recovery property (see instructions):		
bb	Basis of property placed in service during the tax year and the construction of which began after 2020		
	and before 2023	12bb	*
	Geothermal heat pump systems (see instructions):		
cc	Basis of property placed in service during the tax year that was acquired after October 3, 2008, and		
	the basis attributable to construction, reconstruction, or erection by the taxpayer after		
	October 3, 2008	12cc	*
	Qualified investment credit facility property (see instructions):		
dd	Basis of property the construction of which began before 2022 (other than wind		
	facility property the construction of which began after 2016) placed in service during the tax year $\dots \dots	12dd	401
66	Basis of wind facility property placed in service during the tax year and the construction of which	1200	401
	began during 2017	12ee	*
ff	Basis of wind facility property placed in service during the tax year and the construction of which	1200	
	began during 2018	12ff	*
gg	Basis of wind facility property placed in service during the tax year and the construction of which		
	began during 2019	12gg	0
hh	Basis of wind facility property placed in service during the tax year and the construction of which		
	began during 2020 or 2021	12hh	*
13	Enter the applicable unused investment credit from cooperatives (see instructions)	13	1,041
14	Add lines 11e, 11f, 11g, 12a, 12b, 12c, 12g, 12j, 12m, 12s, 12v, 12x, 12y, 12z, 12aa, 12bb, 12cc,		
	12dd, 12ee, 12ff, 12gg, 12hh, and 13. Report this amount on Form 3800, Part III, line 4a	14	25,556
			Form 3468 (2021)

Form 3468 (2021) Page 3 Part III Rehabilitation Credit and Energy Credit (continued) Combined heat and power system property (see instructions): Caution: You can't claim this credit if the electrical capacity of the property is more than 50 megawatts or has a mechanical energy capacity of more than 67,000 horsepower or an equivalent combination of electrical and mechanical energy capabilities. Basis of property placed in service during the tax year that was acquired after October 3, 2008, and the basis attributable to construction, reconstruction, or erection by the taxpayer after 12t **u** If the electrical capacity of the property is measured in: Megawatts, divide 15 by the megawatt capacity. Enter 1.0 if the capacity is 15 megawatts or less. Horsepower, divide 20,000 by the horsepower. Enter 1.0 if the capacity is 20,000 horsepower or 12u 12v 2.435 Qualified small wind energy property (see instructions): Basis of property placed in service during the tax year that was acquired after October 3, 2008, and before January 1, 2009, and the basis attributable to the construction, reconstruction, or erection by the taxpayer after October 3, 2008, and before January 1, 2009 . \$ × 30% (0.30) 12w 12x Basis of property placed in service during the tax year that is attributable to periods December 31, 2008, and the construction of which began 12y Basis of property placed in service during the tax year and the construction of which began 12z 12aa Waste energy recovery property (see instructions): bb Basis of property placed in service during the tax year and the construction of which began after 2020 12bb Geothermal heat pump systems (see instructions): cc Basis of property placed in service during the tax year that was acquired after October 3, 2008, and the basis attributable to construction, reconstruction, or erection by the taxpayer after 12cc Qualified investment credit facility property (see instructions): dd Basis of property the construction of which began before 2022 (other than wind facility property the construction of which began after 2016) placed in service during the 13,652 12dd ee Basis of wind facility property placed in service during the tax year and the construction of which 12ee ff Basis of wind facility property placed in service during the tax year and the construction of which 12ff gg Basis of wind facility property placed in service during the tax year and the construction of which 12gg Basis of wind facility property placed in service during the tax year and the construction of which 12hh Enter the applicable unused investment credit from cooperatives (see instructions) 511 13 13 Add lines 11e, 11f, 11g, 12a, 12b, 12c, 12g, 12j, 12m, 12s, 12v, 12x, 12y, 12z, 12aa, 12bb, 12cc, 12dd, 12ee, 12ff, 12gg, 12hh, and 13. Report this amount on Form 3800, Part III, line 4a 1,340,268 14 Form **3468** (2021)

* Data not shown because of the small number of sample returns on which they are based.

Department of the Treasury Internal Revenue Service (99)

General Business Credit

▶ Go to www.irs.gov/Form3800 for instructions and the latest information.

OMB No. 1545-0895 Attachment Sequence No. 22

▶ You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return. Identifying number Name(s) shown on return **Total Forms Filed =** 736,515 Part I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT) (See instructions and complete Part(s) III before Parts I and II.) 1 General business credit from line 2 of all Parts III with box A checked 108,618 2 Passive activity credits from line 2 of all Parts III with box B checked 2 Enter the applicable passive activity credits allowed for 2021. See instructions 3 59,848 4 Carryforward of general business credit to 2021. Enter the amount from line 2 of Part III with box C 58,050 Check this box if the carryforward was changed or revised from the original reported amount Carryback of general business credit from 2022. Enter the amount from line 2 of Part III with box D 5 5 6 Add lines 1, 3, 4, and 5 6 211,355 Allowable Credit Regular tax before credits: • Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, line • Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the 7 680,946 • Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, plus any Form 8978 amount included on line 1d; or the amount from Alternative minimum tax: • Individuals. Enter the amount from Form 6251, line 11 8 35.458 • Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54 . 9 Add lines 7 and 8 . . 9 681,872 10a 10a Certain allowable credits (see instructions) . 10b 109,838 Add lines 10a and 10b 10c 385,091 11 Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16 11 669,380 12 Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-. . . 668.413 13 Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See 13 420,923 14 Tentative minimum tax: • Individuals. Enter the amount from Form 6251, line 9 14 504,176 • Estates and trusts. Enter the amount from Schedule I (Form 1041), 15 Enter the greater of line 13 or line 14 15 505,505 16 16 Subtract line 15 from line 11. If zero or less, enter -0- 630.265

C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or

17

reorganization.

17

178.612

Form **3800** (2021)

3800

Department of the Treasury Internal Revenue Service (99)

General Business Credit

► Go to www.irs.gov/Form3800 for instructions and the latest information.

► You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

OMB No. 1545-0895

2021
Attachment
Sequence No. 22

Name(s) shown on return

Total Forms Filed = 736.515

Identifying number

	766,516		
Part	(See instructions and complete Part(s) III before Parts I and II.)		
1	General business credit from line 2 of all Parts III with box A checked	. 1	1,308,641
2	Passive activity credits from line 2 of all Parts III with box B checked 2 240.820		
3	Enter the applicable passive activity credits allowed for 2021. See instructions	. 3	249,443
4	Carryforward of general business credit to 2021. Enter the amount from line 2 of Part III with box checked. See instructions for statement to attach		2,727,581
	Check this box if the carryforward was changed or revised from the original reported amount		🕨 🗌
5	Carryback of general business credit from 2022. Enter the amount from line 2 of Part III with box checked. See instructions		
6	Add lines 1, 3, 4, and 5	. 6	4,285,665
Part	II Allowable Credit		,,
7	Regular tax before credits:		
	 Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2	-	040 050 404
	applicable line of your return	. 7	318,653,161
8	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, plus any Form 8978 amount included on line 1d; or the amount from the applicable line of your return		
	• Individuals. Enter the amount from Form 6251, line 11		
	• Corporations. Enter -0	. 8	1,037,671
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54		.,,
	, , , ,		
9	Add lines 7 and 8	. 9	319,690,832
100	Foreign toy exadit		
10a	Foreign tax credit		
b	Certain allowable credits (see instructions)	100	0.000.450
С	Add lines foa and fob	. 10c	8,068,156
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line	16 11	311,619,052
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0 12 310,586,448	5	
13	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See instructions		
14	Tentative minimum tax:	-	
	• Individuals. Enter the amount from Form 6251, line 9		
	• Corporations. Enter -0	1	
	• Estates and trusts. Enter the amount from Schedule I (Form 1041),		
45	line 52	45	
15	Enter the greater of line 13 or line 14		269.146.599
16	Subtract line 15 from line 11. If zero or less, enter -0-		42.583.946
17	Enter the smaller of line 6 or line 16		1,496,741
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, reorganization.	or	
For Pa	perwork Reduction Act Notice, see separate instructions. Cat. No. 12392F		Form 3800 (2021)

Form 3800 (2021) Page **2**

Part	Allowable Credit (continued)		
Note:	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -	0- on I	ine 26.
18	Multiply line 14 by 75% (0.75). See instructions	18	27,473
19	Enter the greater of line 13 or line 18	19	28,423
20	Subtract line 19 from line 11. If zero or less, enter -0	20	68,176
21	Subtract line 17 from line 20. If zero or less, enter -0	21	68,131
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	10,613
23	Passive activity credit from line 3 of all Parts III with box B checked 23 5,923		
24	Enter the applicable passive activity credit allowed for 2021. See instructions	24	5.386
25	Add lines 22 and 24	25	15,868
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	15,478
27	Subtract line 13 from line 11. If zero or less, enter -0	27	669,380
28	Add lines 17 and 26	28	187,585
29	Subtract line 28 from line 27. If zero or less, enter -0	29	654,956
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	276.402
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 22 176,066		
33	Enter the applicable passive activity credits allowed for 2021. See instructions	33	112,814
34	Carryforward of business credit to 2021. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34	93,525
35	Carryback of business credit from 2022. Enter the amount from line 5 of Part III with box D checked. See instructions	35	
36	Add lines 30, 33, 34, and 35	36	418.039
37	Enter the smaller of line 29 or line 36	37	377,780
38	Credit allowed for the current year. Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return. • Individuals. Schedule 3 (Form 1040), line 6	38	522,507
			Form 3800 (2021)

Form 3800 (2021) Page **2**

Part	II Allowable Credit (continued)		•
Note:	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -	0- on	line 26.
18	Multiply line 14 by 75% (0.75). See instructions	18	17,902,932
19	Enter the greater of line 13 or line 18	19	17,927,550
20	Subtract line 19 from line 11. If zero or less, enter -0	20	9,648,478
21	Subtract line 17 from line 20. If zero or less, enter -0	21	9,585,568
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	95,200
23	Passive activity credit from line 3 of all Parts III with box B checked 23 5,161		
24	Enter the applicable passive activity credit allowed for 2021. See instructions	24	15.193
25	Add lines 22 and 24	25	110,394
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	59,444
27	Subtract line 13 from line 11. If zero or less, enter -0	27	237,106,610
28	Add lines 17 and 26	28	1,556,184
29	Subtract line 28 from line 27. If zero or less, enter -0	29	235,550,426
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	4.940.072
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 32 696,640		
33	Enter the applicable passive activity credits allowed for 2021. See instructions	33	649,262
34	Carryforward of business credit to 2021. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34	4,453,199 ▶ □
35	Carryback of business credit from 2022. Enter the amount from line 5 of Part III with box D checked. See instructions	35	
36	Add lines 30, 33, 34, and 35	36	10.042.534
37	Enter the smaller of line 29 or line 36	37	5,510,981
38	Credit allowed for the current year. Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return. Individuals. Schedule 3 (Form 1040), line 6	38	7,067,166
			Form 3800 (2021)

Form 3800 (2021) Page **3**

Nam	e(s) shown on return		Identifying nur	nber
Pa	rt III General Business Credits or Eligible Small Business Credits (see ins	tructio	ons)	
Cor	nplete a separate Part III for each box checked below. See instructions.			
Α	General Business Credit From a Non-Passive Activity E Reserved			
В	☐ General Business Credit From a Passive Activity F☐ Reserved			
С	☐ General Business Credit Carryforwards G ☐ Eligible Small Busi	ness C	redit Carryforward	s
D	☐ General Business Credit Carrybacks H☐ Reserved			
	If you are filing more than one Part III with box A or B checked, complete and attach first an			
	all Parts III with box A or B checked. Check here if this is the consolidated Part III			▶ 🗌
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	e: On any line where the credit is from more than one source, a separate Part III is needed for each		claiming the credit from a pass-through	appropriate amount.
	s-through entity.	1.	entity.	
1	, , , , , , , , , , , , , , , , , , , ,	1a		3,287
	b Reserved	1b		
	c Increasing research activities (Form 6765)	1c		92,092
	d Low-income housing (carryforward only) (see instructions)	1d		314
	e Disabled access (Form 8826)*	1e		5,850
	f Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		2,018
	g Indian employment (Form 8845)	1g		6,546
	h Orphan drug (Form 8820)	1h		1,067
	New markets (Form 8874)	1i		1,508
	Small employer pension plan startup costs and auto-enrollment (Form 8881)	1j		7,815
	k Employer-provided child care facilities and services (Form 8882)*	1k		19,944
	Biodiesel and renewable diesel fuels (attach Form 8864)	11		5,134
	m Low sulfur diesel fuel production (Form 8896)	1m		80
	n Distilled spirits (Form 8906)	1n		225
	Nonconventional source fuel (carryforward only)	10		
	p Energy efficient home (Form 8908)	1p		14,770
	q Energy efficient appliance (carryforward only)	1q		
	r Alternative motor vehicle (Form 8910)	1r		6,731
	s Alternative fuel vehicle refueling property (Form 8911)	1s		8,244
	t Enhanced oil recovery credit	1t		2,691
	u Mine rescue team training (Form 8923)	1u		177
	Agricultural chemicals security (carryforward only)	1v		0
	w Employer differential wage payments (Form 8932)	1w		4,745
	x Carbon oxide sequestration (Form 8933)	1x		
	y Qualified plug-in electric drive motor vehicle (Form 8936)	1y		7,853
	Z Qualified plug-in electric vehicle (carryforward only)	1z		0
	aa Employee retention (Form 5884-A)	1aa		2,441
	bb General credits from an electing large partnership (carryforward only)	1bb		*
	Other. Oil and gas production from marginal wells (Form 8904) and certain other	١.		
_	credits (see instructions)	1zz		3,107
2		2		181,730
3	, ,	3		14,817
4		4a		25,601
	b Work opportunity (Form 5884)	4b		95,959
	Biofuel producer (Form 6478)	4c		3,501
	d Low-income housing (Form 8586)	4d		10,138
	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e 4f		1,562
	f Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	H		209,081
	g Qualified railroad track maintenance (Form 8900)	4g 4h		640 977
	h Small employer health insurance premiums (Form 8941)			
	i Increasing research activities (Form 6765)	4i		133,294 22,374
		4j		•
5	 Other	4z 5		1,499
5 6		6		
J	naa moo z, o, ana o ana onter here ana on the applicable line of rait ii	0		

^{*} See instructions for limitation on this credit.

Form 38	00 (2021)			Page 3
Name(s)	shown on return		Identifying nun	nber
Part I	General Business Credits or Eligible Small Business Credits (see inst	ructio	ns)	
Compl	ete a separate Part III for each box checked below. See instructions.			
A \Box	General Business Credit From a Non-Passive Activity E Reserved			
В	General Business Credit From a Passive Activity F Reserved			
C \square	General Business Credit Carryforwards G 🔲 Eligible Small Busin	ess Cr	edit Carryforward	S
D	General Business Credit Carrybacks H 🔲 Reserved			
	ou are filing more than one Part III with box A or B checked, complete and attach first an			
all I	Parts III with box A or B checked. Check here if this is the consolidated Part III			▶ 🗌
	(a) Description of credit		(b) Enter EIN if	(c) Enter the
	In any line where the credit is from more than one source, a separate Part III is needed for each rough entity.		claiming the credit from a pass-through entity.	appropriate amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		32,273
b	Reserved	1b		
С	Increasing research activities (Form 6765)	1c		764,036
d	Low-income housing (carryforward only) (see instructions)	1d		1,043
е	Disabled access (Form 8826)*	1e		19,111
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		50,812
g	Indian employment (Form 8845)	1g		37,956
h	Orphan drug (Form 8820)	1h		923
i	New markets (Form 8874)	1i		974
j	Small employer pension plan startup costs and auto-enrollment (Form 8881)	1j		5,422
k	Employer-provided child care facilities and services (Form 8882)*	1k		7,323
ı	Biodiesel and renewable diesel fuels (attach Form 8864)	11		7,851
m	Low sulfur diesel fuel production (Form 8896)	1m		4
n	Distilled spirits (Form 8906)	1n		8,379
0	Nonconventional source fuel (carryforward only)	10		*
р	Energy efficient home (Form 8908)	1p		400,905
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		25,422
S	Alternative fuel vehicle refueling property (Form 8911)	1s		22,537
t	Enhanced oil recovery credit	1t		18,551
u	Mine rescue team training (Form 8923)	1u		28 0
V	Agricultural chemicals security (carryforward only)	1v		621
W	Employer differential wage payments (Form 8932)	1w		• *
X	Carbon oxide sequestration (Form 8933)	1x		32,749
У _	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		0
Z	Qualified plug-in electric vehicle (carryforward only)	1z		30.059
aa bb	General credits from an electing large partnership (carryforward only)	1aa 1bb		*
		ממו		
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz		75,975
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		1,549,557
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		55,905
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		1,352,724
b	Work opportunity (Form 5884)	4b		688,800
C	Biofuel producer (Form 6478)	4c		6,736
d	Low-income housing (Form 8586)	4d		119,086
e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		79,029
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		1,613,211
g	Qualified railroad track maintenance (Form 8900)	4g		28,026
h	Small employer health insurance premiums (Form 8941)	4h		2,739
i	Increasing research activities (Form 6765)	4i		1,643,816
j	Employer credit for paid family and medical leave (Form 8994)	4j		102,241
Z	Other	4z		9,924
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		

^{*} See instructions for limitation on this credit.

Form **3903**

Department of the Treasury Internal Revenue Service (99)

Moving Expenses

► Go to www.irs.gov/Form3903 for instructions and the latest information.

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

OMB No. 1545-0074

2021

Attachment
Sequence No. 170

Name(s) shown on return

Total Forms Filed = 98,047

Your social security number

		military order, you, your spouse, or your dependents move because of a permanent cha Check here to certify that you meet these requirements. See the instructions	•	_
1	Transport	ation and storage of household goods and personal effects (see instructions)	1	63,455
2	Travel (inc	cluding lodging) from your old home to your new home (see instructions). Do not include the	2	81,975
•				,
3	Add lines	1 and 2	3	92,893
4	included	total amount the government paid you for the expenses listed on lines 1 and 2 that is not in box 1 of your Form W-2 (wages). This amount should be shown in box 12 of your Form		25 224
	W-2 With	code P	4	35,334
5	Is line 3 n	nore than line 4?		
	☐ No.	You cannot deduct your moving expenses. If line 3 is less than line 4, subtract line 3 from line 4 and include the result on Form 1040 or 1040-SR, line 1; or Form 1040-NR, line 1a.		
	☐ Yes.	Subtract line 4 from line 3. Enter the result here and on Schedule 1 (Form 1040), line 14.		
		This is your moving expense deduction	5	90,899

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

Cat. No. 12490K

Form **3903** (2021)

Moving Expenses

▶ Go to www.irs.gov/Form3903 for instructions and the latest information.

OMB No. 1545-0074 Attachment

263,785

Form **3903** (2021)

5

Cat. No. 12490K

Department of the Treasury ► Attach to Form 1040, 1040-SR, or 1040-NR. Internal Revenue Service (99) Sequence No. 170 Your social security number Name(s) shown on return Total Forms Filed = 98.047 military order, you, your spouse, or your dependents move because of a permanent change of station. Check here to certify that you meet these requirements. See the instructions 1 Transportation and storage of household goods and personal effects (see instructions) 1 203,010 2 Travel (including lodging) from your old home to your new home (see instructions). Do not include the 129,844 2 3 332,854 Enter the total amount the government paid you for the expenses listed on lines 1 and 2 that is not included in box 1 of your Form W-2 (wages). This amount should be shown in box 12 of your Form 73,520 4 Is line 3 more than line 4? 5 ☐ No. You cannot deduct your moving expenses. If line 3 is less than line 4, subtract line 3 from line 4 and include the result on Form 1040 or 1040-SR, line 1; or Form 1040-NR, line 1a.

☐ Yes. Subtract line 4 from line 3. Enter the result here and on Schedule 1 (Form 1040), line 14.

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

Form **4136**

Credit for Federal Tax Paid on Fuels

OMB No. 1545-0162

20**21**Attachment

Department of the Treasury Internal Revenue Service (99) ▶ Go to www.irs.gov/Form4136 for instructions and the latest information.

Attachment Sequence No. **23**

Name (as shown on your income tax return)

Total Forms Filed = 241.533

Taxpayer identification number

Note: CRN is credit reference number.

Caution: Claimant has the name and address of the person who sold the fuel to the claimant and the dates of purchase. For claims on lines 1c and 2b (type of use 13 or 14), 3d, 4c, and 5, claimant has not waived the right to make the claim. For claims on lines 1c and 2b (type of use 13 or 14), claimant certifies that a certificate has not been provided to the credit card issuer.

1 Nontaxable Use of Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cred	lit (e) CRN
а	Off-highway business use		\$.183)		
b	Use on a farm for farming purposes		.183	}		362
С	Other nontaxable use (see Caution above line 1)		.183	J	\$ 214,644	
d	Exported		184		*	411

2 Nontaxable Use of Aviation Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cre	edit	(e) CRN
а	Use in commercial aviation (other than foreign trade)		\$.15		\$ 557		354
b	Other nontaxable use (see Caution above line 1)		.193		1,567		324
С	Exported		.194		*		412
d	LUST tax on aviation fuels used in foreign trade		.001		0		433

3 Nontaxable Use of Undyed Diesel Fuel

Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim **did** contain visible evidence of dye, attach an explanation and check here . . . **>**

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cre	edit	(e) CRN
а	Nontaxable use		\$.243	1			
b	Use on a farm for farming purposes		.243	<u> </u>	\$ 39,347		360
С	Use in trains		.243		0		353
d	Use in certain intercity and local buses (see Caution above line 1)		.17		*		350
е	Exported		.244		*		413

4 Nontaxable Use of Undyed Kerosene (Other Than Kerosene Used in Aviation)

Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception. If any of the kerosene included in this claim did contain visible evidence of dye, attach an explanation and check here

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cre	edit	(e) CRN
а	Nontaxable use taxed at \$.244		\$.243	<u> </u>			
b	Use on a farm for farming purposes		.243	<u> </u>	\$ 6,264		346
С	Use in certain intercity and local buses (see Caution above line 1)		.17		0		347
d	Exported		.244		0		414
е	Nontaxable use taxed at \$.044		.043		0		377
f	Nontaxable use taxed at \$.219		.218		0		369

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 12625R

^{*} Data not shown because of the small number of sample returns on which they are based.

Form **4136**

Credit for Federal Tax Paid on Fuels

OMB No. 1545-0162

2021

Department of the Treasury Internal Revenue Service (99) ▶ Go to www.irs.gov/Form4136 for instructions and the latest information.

Attachment Sequence No. **23**

Name (as shown on your income tax return)

Total Forms Filed = 241.533

Taxpayer identification number

Caution: Claimant has the name and address of the person who sold the fuel to the claimant and the dates of purchase. For claims on lines 1c and 2b (type of use 13 or 14), 3d, 4c, and 5, claimant has not waived the right to make the claim. For claims on lines 1c and 2b (type of use 13 or 14), claimant certifies that a certificate has not been provided to the credit card issuer.

1 Nontaxable Use of Gasoline

Note: CRN is credit reference number.

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cre	dit	(e) CRN
а	Off-highway business use		\$.183)			
b	Use on a farm for farming purposes		.183	}			362
С	Other nontaxable use (see Caution above line 1)		.183	J	\$ 181,328		
d	Exported		.184		*		411

2 Nontaxable Use of Aviation Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cred	dit (e) CRN
а	Use in commercial aviation (other than foreign trade)		\$.15		\$ 7,211	354
b	Other nontaxable use (see Caution above line 1)		.193		9,307	324
С	Exported		.194		*	412
d	LUST tax on aviation fuels used in foreign trade		.001		0	433

3 Nontaxable Use of Undyed Diesel Fuel

Claimant certifies that the diesel fuel did not contain visible evidence of dye.

\$.243 Nontaxable use Use on a farm for farming purposes .243 22,809 360 Use in trains .243 0 353 Use in certain intercity and local buses (see Caution above line 1) .17 350 Exported .244 413

4 Nontaxable Use of Undyed Kerosene (Other Than Kerosene Used in Aviation)

Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception. If any of the kerosene included in this claim did contain visible evidence of dye, attach an explanation and check here . . . >

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cr	edit	(e) CRN
а	Nontaxable use taxed at \$.244		\$.243	1			
b	Use on a farm for farming purposes		.243	<u> </u>	\$ 9,777		346
С	Use in certain intercity and local buses (see Caution above line 1)		.17		0		347
d	Exported		.244		0		414
е	Nontaxable use taxed at \$.044		.043		0		377
f	Nontaxable use taxed at \$.219		.218		0		369

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 12625R

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 4136 (2021) Page **2**

5 Kerosene Used in Aviation

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244		\$.200		\$ 30		417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219		.175		21		355
С	Nontaxable use (other than use by state or local government) taxed at \$.244		.243		6,264		346
d	Nontaxable use (other than use by state or local government) taxed at \$.219		.218		0		369
е	LUST tax on aviation fuels used in foreign trade		.001		0		433

6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

Registration No. ▶

Claimant certifies that it sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim did contain visible evidence of dye, attach an explanation and check here

		(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Use by a state or local government	\$.243		\$ 39,347		360
b	Use in certain intercity and local buses	.17		*		350

7 Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use in Aviation)

Registration No. ▶

Claimant certifies that it sold the kerosene at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception. If any of the kerosene included in this claim **did** contain visible evidence of dye, attach an explanation and check here . . . **>**

		(b) Rate	(c) Gallons	(d) Amount of cro	edit	(e) CRN
а	Use by a state or local government	\$.243	1			
b	Sales from a blocked pump	.243	<u> </u>	\$ 6,264		346
С	Use in certain intercity and local buses	.17		0		347

8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation. Registration No. ▶

Claimant sold the kerosene for use in aviation at a tax-excluded price and has not collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. See the instructions for additional information to be submitted.

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Use in commercial aviation (other than foreign trade) taxed at \$.219		\$.175		\$ 21		355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200		30		417
С	Nonexempt use in noncommercial aviation		.025		0		418
d	Other nontaxable uses taxed at \$.244		.243		6,264		346
е	Other nontaxable uses taxed at \$.219		.218		0		369
f	LUST tax on aviation fuels used in foreign trade		.001		0		433

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 4136 (2021) Page **2**

5 Kerosene Used in Aviation

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.244		\$.200		\$ 238		417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219		.175		99		355
С	Nontaxable use (other than use by state or local government) taxed at \$.244		.243		9,777		346
d	Nontaxable use (other than use by state or local government) taxed at \$.219		.218		0		369
е	LUST tax on aviation fuels used in foreign trade		.001		0		433

6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

Registration No. ▶

Claimant certifies that it sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim **did** contain visible evidence of dye, attach an explanation and check here

		(b) Rate	(c) Gallons	(d) Amount of cre	edit	(e) CRN
а	Use by a state or local government	\$.243		\$ 22,809		360
b	Use in certain intercity and local buses	.17		*		350

7 Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use in Aviation)

Registration No. ▶

Claimant certifies that it sold the kerosene at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception. If any of the kerosene included in this claim **did** contain visible evidence of dye, attach an explanation and check here . . . ▶ □

		(b) Rate	(c) Gallons	(d) Amount of cre	edit	(e) CRN
а	Use by a state or local government	\$.243)			
b	Sales from a blocked pump	.243	}	\$ 9,777		346
С	Use in certain intercity and local buses	.17		0		347

8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation. Registration No. ▶

Claimant sold the kerosene for use in aviation at a tax-excluded price and has not collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. See the instructions for additional information to be submitted.

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Use in commercial aviation (other than foreign trade) taxed at \$.219		\$.175		\$ 99		355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200		238		417
С	Nonexempt use in noncommercial aviation		.025		0		418
d	Other nontaxable uses taxed at \$.244		.243		9,777		346
е	Other nontaxable uses taxed at \$.219		.218		0		369
f	LUST tax on aviation fuels used in foreign trade		.001		0		433

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 4136 (2021) Page **3**

9	Reserved for future use	Registration No. ▶						
		(b) Rate	(c) Gallons of alcohol	(d) Amount of cr	edit	(e) CRN		
а	Reserved for future use			\$				
b	Reserved for future use							

10 Biodiesel or Renewable Diesel Mixture Credit

Registration No. ▶

Biodiesel mixtures. Claimant produced a mixture by mixing biodiesel with diesel fuel. The biodiesel used to produce the mixture met ASTM D6751 and met EPA's registration requirements for fuels and fuel additives. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, the Statement of Biodiesel Reseller. **Renewable diesel mixtures.** Claimant produced a mixture by mixing renewable diesel with liquid fuel (other than renewable diesel). The renewable diesel used to produce the renewable diesel mixture was derived from biomass, met EPA's registration requirements for fuels and fuel additives, and met ASTM D975, D396, or other equivalent standard approved by the IRS. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller, both of which have been edited as discussed in the instructions for line 10. See the instructions for line 10 for information about renewable diesel used in aviation.

		(b) Rate	(c) Gallons of biodiesel or renewable diesel	(d) Amount of credit		(e) CRN
а	Biodiesel (other than agri-biodiesel) mixtures	\$1.00		\$ *		388
b	Agri-biodiesel mixtures	1.00		0		390
С	Renewable diesel mixtures	1.00		0		307

11 Nontaxable Use of Alternative Fuel

Caution: There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See instructions.

		(a) Type of use	(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)		\$.183		\$ 1,034	419
b	"P Series" fuels		.183		*	420
С	Compressed natural gas (CNG) (see instructions)		.183		*	421
d	Liquefied hydrogen		.183		0	422
е	Fischer-Tropsch process liquid fuel from coal (including peat)		.243		0	423
f	Liquid fuel derived from biomass		.243		*	424
g	Liquefied natural gas (LNG) (see instructions)		.243		*	425
h	Liquefied gas derived from biomass		.183		*	435

12 Alternative Fuel Credit

Registration No. ▶

		(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of cred	lit (e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)	\$.50		\$ 1,012	426
b	"P Series" fuels	.50		15	427
С	Compressed natural gas (CNG) (see instructions)	.50		*	428
d	Liquefied hydrogen	.50		*	429
е	Fischer-Tropsch process liquid fuel from coal (including peat)	.50		0	430
f	Liquid fuel derived from biomass	.50		0	431
g	Liquefied natural gas (LNG) (see instructions)	.50		12	432
h	Liquefied gas derived from biomass	.50		0	436
i	Compressed gas derived from biomass	.50		*	437

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 4136 (2021) Page **3**

9 Reserved for future use (b) Rate (c) Gallons of alcohol Reserved for future use Reserved for future use Reserved for future use

10 Biodiesel or Renewable Diesel Mixture Credit

Registration No. ▶

Biodiesel mixtures. Claimant produced a mixture by mixing biodiesel with diesel fuel. The biodiesel used to produce the mixture met ASTM D6751 and met EPA's registration requirements for fuels and fuel additives. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, the Statement of Biodiesel Reseller. **Renewable diesel mixtures.** Claimant produced a mixture by mixing renewable diesel with liquid fuel (other than renewable diesel). The renewable diesel used to produce the renewable diesel mixture was derived from biomass, met EPA's registration requirements for fuels and fuel additives, and met ASTM D975, D396, or other equivalent standard approved by the IRS. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller, both of which have been edited as discussed in the instructions for line 10. See the instructions for line 10 for information about renewable diesel used in aviation.

		(b) Rate	(c) Gallons of biodiesel or renewable diesel	(d) Amount of cre	dit	(e) CRN
а	Biodiesel (other than agri-biodiesel) mixtures	\$1.00		\$ *		388
b	Agri-biodiesel mixtures	1.00		0		390
С	Renewable diesel mixtures	1.00		0		307

11 Nontaxable Use of Alternative Fuel

Caution: There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See instructions.

		(a) Type of use	(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)		\$.183		\$ 510	419
b	"P Series" fuels		.183		*	420
С	Compressed natural gas (CNG) (see instructions)		.183		*	421
d	Liquefied hydrogen		.183		0	422
е	Fischer-Tropsch process liquid fuel from coal (including peat)		.243		0	423
f	Liquid fuel derived from biomass		.243		*	424
g	Liquefied natural gas (LNG) (see instructions)		.243		*	425
h	Liquefied gas derived from biomass		.183		*	435

12 Alternative Fuel Credit

Registration No. ▶

		(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of cred	t (e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)	\$.50		\$ 1,383	426
b	"P Series" fuels	.50		14	427
С	Compressed natural gas (CNG) (see instructions)	.50		*	428
d	Liquefied hydrogen	.50		*	429
е	Fischer-Tropsch process liquid fuel from coal (including peat)	.50		0	430
f	Liquid fuel derived from biomass	.50		0	431
g	Liquefied natural gas (LNG) (see instructions)	.50		1,396	432
h	Liquefied gas derived from biomass	.50		0	436
i	Compressed gas derived from biomass	.50		*	437

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 4136 (2021) Page **4**

13	Registered Credit Card Issuers		Registration No. ▶							
			(b) Rate	(c) Gallons	(d) Amount of credi	(e) CRN				
а	Diesel fuel sold for the exclusive use of a state or local	government	\$.243		\$ 39.347	360				
b	Kerosene sold for the exclusive use of a state or local g	government	.243		6,264	346				
С	Kerosene for use in aviation sold for the exclusive use government taxed at \$.219	of a state or local	.218		0	369				
14	Nontaxable Use of a Diesel-Water Fuel Emuls	ion								
	Caution: There is a reduced credit rate for use in	certain intercity	and local bu	uses (type of use 5	5). See instructions.					
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credi	(e) CRN				
а	Nontaxable use		\$.197		\$ 0	309				
b	Exported		.198		0	306				
15	Diesel-Water Fuel Emulsion Blending		I	Registration No.	>					
			(b) Rate	(c) Gallons	(d) Amount of credi	(e) CRN				
	Blender credit		\$.046		\$ 0	310				
16	Exported Dyed Fuels and Exported Gasoline E	Blendstocks								
			(b) Rate	(c) Gallons	(d) Amount of credi	(e) CRN				
а	Exported dyed diesel fuel and exported gasoline blend at \$.001	stocks taxed	\$.001		\$ *	415				
b	Exported dyed kerosene		.001		0	416				
17	Total income tax credit claimed. Add lines 1 the Schedule 3 (Form 1040), line 12; Form 1120, Sche Form 1041, Schedule G, line 16b; or the proper line	edule J, line 20b; l	Form 1120-	S, line 23c;	\$ 241,533					

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 4	136 (2021)					Page 4
13	Registered Credit Card Issuers			Registration No	0. ▶	
			(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a b	Diesel fuel sold for the exclusive use of a state or local Kerosene sold for the exclusive use of a state or local	<u> </u>	\$.243		\$ 22,809	360 346
C	Kerosene for use in aviation sold for the exclusive use government taxed at \$.219		.218		9,777	369
14	Nontaxable Use of a Diesel-Water Fuel Emuls	sion				•
	Caution: There is a reduced credit rate for use in	n certain intercity	and local bu	ses (type of use	5). See instructions.	
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Nontaxable use		\$.197		\$ 0	309
b	Exported		.198		0	306
15	Diesel-Water Fuel Emulsion Blending		F	Registration No	.▶	
			(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
	Blender credit		\$.046		\$ 0	310
16	Exported Dyed Fuels and Exported Gasoline I	Blendstocks			,	
			(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Exported dyed diesel fuel and exported gasoline blend at \$.001	dstocks taxed	\$.001		\$ *	415
b	Exported dyed kerosene		.001		0	416
17	Total income tax credit claimed. Add lines 1 th Schedule 3 (Form 1040), line 12; Form 1120, Schemm 1041, Schedule G, line 16b; or the proper line	edule J, line 20b; l	Form 1120-S	6, line 23c;	\$ 236,397	1136 (2021)

^{*} Data not shown because of the small number of sample returns on which they are based.

Department of the Treasury

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

OMB No. 1545-0172 Attachment Sequence No. **179**

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

Name	(s) shown on return	Total F	orms Filed =		ss or activity to w 351,077		Identifying number			
Pai		Expense Cer have any liste					mplet	te Part I.		
1	Maximum amount (s	see instructions	s)						1	
2	Total cost of section		,						2	1,570,742
3	Threshold cost of se		-	-					3	
4	Reduction in limitati					•			4	
5	Dollar limitation for									
	separately, see instr	*							5	2,644,019
6	(a) De	scription of proper			(b) Cost (busin			(c) Elected cost		2,0 : :,0 : 0
			,		., .	,,				
7	Listed property. Ent	er the amount	from line 29			7		131,542		
	Total elected cost o						d 7		8	2,295,133
	Tentative deduction				•	* '			9	2,295,084
10	Carryover of disallo								10	204,810
11	Business income limi			-					11	2,412,707
12	Section 179 expens				•				12	2,263,103
	Carryover of disallor						13			2,200,100
	: Don't use Part II o									
	t II Special Depi						ıde list	ed property. See	instru	uctions.)
	Special depreciation									•
	during the tax year.	See instruction	ns		`				14	1,836,805
15	Property subject to	section 168(f)(1) election .						15	2,090
	Other depreciation (16	932,225
Par		preciation (D								002,220
	•	•			Section A					
17	MACRS deductions	for assets place	ced in service i	in tax y	ears beginnir	ng before 202	21		17	5,257,114
	If you are electing t									
	asset accounts, che	eck here						🕨 🗌		
	Section B	-Assets Plac	ed in Service	During	g 2021 Tax Y	ear Using th	e Gen	eral Depreciation	Syste	em
(a) (Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investm only—see instruc	ent use	(d) Recovery period	(e) Conventio	n	(f) Method	(g) D	epreciation deduction
19a	3-year property		66,272							66,016
b	5-year property		733,33	1						730,045
С	7-year property		610,842	2						606,624
d	10-year property		60,495							60,447
е	15-year property		181,290)						179,460
f	20-year property		30,104							30,087
g	25-year property		5,756		25 yrs.			S/L		5,756
h	Residential rental		1,065,40)7	27.5 yrs.	MM		S/L		1,063,627
	property undete	rmined type	371		27.5 yrs.	MM		S/L		372
i	Nonresidential real		473,514	1	39 yrs.	MM		S/L		471,481
	property Tot	al GDS cost	2,713,72	20		MM		S/L	2	704,115
	Section C-	-Assets Place	d in Service D	uring	2021 Tax Yea	ar Using the	Altern	ative Depreciation	n Sys	stem
20a	Class life		12,232					S/L		12,232
b	12-year		2,422		12 yrs.			S/L		2,419
	30-year		3,881		30 yrs.	MM		S/L		3,880
d	40-year 1	9,577	1,498		40 yrs.	MM	19,	572 S/L		1,498
	Summary (See instructio								
	Listed property. Ent								21	1,950,150
22	Total. Add amount									
	here and on the app	propriate lines o	of your return.	Partne	rships and S	corporations	–see i	nstructions .	22	10,026,025
23	For assets shown a									
	portion of the basis	attributable to	section 263A	costs .			23	*		

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 12906N

Form **4562** (2021)

^{*} Data not shown because of the small number of sample returns on which they are based.

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172

► Attach to your tax return. Attachment Internal Revenue Service (99) ▶ Go to www.irs.gov/Form4562 for instructions and the latest information. Sequence No. 179 Name(s) shown on return Business or activity to which this form relates Identifying number 10,351,077 Total Forms Filed = Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 53,210,212 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 2,747,915,954 (a) Description of property (b) Cost (business use only) 6 (c) Elected cost 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 56,650,952 9 56,542,134 10 Carryover of disallowed deduction from line 13 of your 2020 Form 4562 10 3,596,119 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 551,040,505 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 55,676,365 13 Carryover of disallowed deduction to 2022. 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 14 51,789,861 **15** Property subject to section 168(f)(1) election 15 15,237 **16** Other depreciation (including ACRS) 16 7,102,284 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2021 53,782,844 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2021 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery placed in (a) Classification of property (business/investment use (e) Convention (f) Method (g) Depreciation deduction only—see instructions) service 2,422,032 667.144 19a 3-year property 20,713,444 3,372,729 5-year property 17,693,506 2,057,276 **c** 7-year property 167,145 **d** 10-year property 2,606,550 e 15-year property 6.149.400 249,452 2,481,674 84.148 **f** 20-year property 25 yrs. S/L g 25-year property 444.325 16.906 h Residential rental 240,282,437 27.5 yrs. MM S/L 4,878,719 undetermined type 27.5 yrs. ММ S/L 7,240 6,950 property 75,518,446 ММ S/L i Nonresidential real 39 yrs. 1,074,852 Total GDS cost 368,319,052 S/L 12,575,322 MM property Section C-Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System 926,784 41,786 20a Class life 53,506 12 yrs. S/L 26.119 **b** 12-year 41,535 2,224,237 30 yrs. MM S/L **c** 30-year 129.567 S/L 4,608,138 1.403.610 40 yrs. MM 20,127 **d** 40-year Part IV Summary (See instructions.) 14,954,268 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 196.025.746 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23 Form **4562** (2021) For Paperwork Reduction Act Notice, see separate instructions. Cat No 12906N

^{*} Data not shown because of the small number of sample returns on which they are based.

	4562 (2021)																Page 2
Pai		d Proper tainment, i		lude auto			ertain	other	vehic	les,	certa	in a	ircraft	, and	prop	erty us	ed fo
		For any ve		•		,	standaı	rd mile	age ra	te o	r dedu	cting	lease	expens	e, com	plete o r	nly 24a
		olumns (a)															
24a	Section A a Do you have e	A—Deprect						See the	e instru ☑ No							nobiles.) Yes	☐ No
	(a)	(b)	(c) Business/		d)		(e)				(g)			(h)			
	e of property (list vehicles first)	Date placed in service	investment upercentage	se Cost or o			ness/inves use only)	stment	Recove period		Metho Conver			oreciation eduction	ı E	lected sec cost	
25	Special dep		llowance	for qualifie			erty pla	ced in									
	the tax year		-		•			e. See	instruc	ction	is .	25	372	2,533			
26	Property use	ed more tha		a qualified	d busin		e: 1,668,90	12					1 2/	2 764			
				%			1,000,90	JZ					1,34	3,764			
				%													
27	Property use	ed 50% or	1		ısiness												
				% %			429,175				3/L - 3/L -		36′	1,147			
				% %		_	al 26e + 2,018,80				3/L - 3/L -				-		
28	Add amount	ts in columi		, -I	ıh 27. E				21, pa			28	1,95	0,150			
	Add amount			_					-	-					29	131,542	
_							mation										
	plete this sect our employees																vehicles
to yo	our cripioyecs	, mot anowe	ino quos	110113 111 000	1		Ť .		Tooptio							1	(f)
30	30 Total business/investment miles driven during the year (don't include commuting miles) . (a) Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 5							icle 6									
	Total commu	•															
32	32 Total other personal (noncommuting) miles driven																
33	Total miles lines 30 thro		ring the y														
34	Was the veh		•		Yes	No	Yes	No	Yes	ı	No `	Yes	No	Yes	No	Yes	No
25	use during o																
33	Was the veh than 5% ow		•	•													
36	Is another vel		-														
				stions for	•	-						-					
	wer these que						to com	npleting	g Secti	on B	3 for ve	hicle	s used	by emp	oloyees	who ar	en't
	e than 5% ow		•							c I	-1-1	! I	-15			Yes	No
31	Do you main		tten policy	, statemer	-	oronibii	s all pe	rsonai 	use of	r ver	iicies,	inciu	aing co	ımmutli 	ng, by	163	140
38	Do you mai	ntain a writ			nt that p	orohibit											
20	employees? Do you treat					-	•	office	rs, dire	ctors	s, or 19	% or	more o	wners			
	Do you prov							 tain in	 formati	on f	rom v	Dur A	 mplove	es aho	 ut the		
	use of the v										-						
41	Do you mee																
D	Note: If you		o 37, 38, 3	39, 40, or 4	11 is "Y	es," do	n't com	plete S	Section	B fo	or the o	cover	ed veh	icles.			
Par	Amor	tization											(e)				
		(a) on of costs		(b) Date amortization begins	ation	Amo	(c) rtizable ar	mount			(d) e section		Amortiz period percent	ation I or	Amortiz	(f) ation for th	nis year
42	Amortization	of costs t	hat begins	s during yo	ur 202	1 tax ye	ear (see	instru	ctions):								
							276.00	<u> </u>				_					
42	Amortization	n of coete +	hat began	hefore vo	ur 2021		376,832	<u>.</u>						43		574,967	
	Total. Add								ort .		 			44		848,963	

Form Pa r		nclude auto			rtain	other	vehicl	es,	cert	ain a	ircraft	, and	pro	pert	y use	Page 2 ed for
	entertainment, recreat Note: For any vehicle for 24b, columns (a) through	or which you	are usi	ng the							lease e	expens	se, c	omple	ete on	l y 24a,
	Section A—Depreciation a										for nas	senne	r aut	omoh	niles 1	
24a	Do you have evidence to support the					Yes					the evi				Yes [No
Туре	(a) (b) Busine placed in service in service percent	ss/ (ont use Cost or o	d)	Basis	(e) for depre ess/inves use only	stment	(f) Recove period		Met	g) hod/ ention		(h) preciation eduction		Elect	(i) ed sect cost	ion 179
25	Special depreciation allowand the tax year and used more the									25	8,12	7,506				
26	Property used more than 50%	in a qualified	d busin	ess use	:						-					
		%		53	3,351,4	44					6,44	5,185				
		%														
	Duan automod 500/ au lana in a	%	!													
21	Property used 50% or less in a	% qualified bu	Isiness		,905,75	6			9/L -		555	5,480				
		%			l 26e +				5/L -			,,,,,,,				
		%		59	9,257,2	201			S/L -							
	Add amounts in column (h), lin	_						_		28		54,268				
29	Add amounts in column (i), line												29	2,22	26,950	
Com	plete this section for vehicles use			—Infori		-				r"orr	alatad r	narenn	If vo	ıı nrov	ıidəd v	ahiclas
	our employees, first answer the qu															/CITICIES
	1 - J 1			a)	<u> </u>	b)		(c)		(0		1	(e)		(f	
30	Total business/investment miles of the year (don't include commuting	•		icle 1		icle 2	Veh	nicle	3	Vehi			hicle 5		Vehic	
31 32	Total commuting miles driven dur Total other personal (none miles driven	•														
33	Total miles driven during the lines 30 through 32	year. Add														
34	Was the vehicle available for p	ersonal	Yes	No	Yes	No	Yes	1	No	Yes	No	Yes	N	lo	Yes	No
35	use during off-duty hours?. Was the vehicle used primarily than 5% owner or related personal transfer of the second secon	/ by a more														
36	Is another vehicle available for pe															
	Section C-Q		Emplo	yers W	ho Pro	vide V	ehicles	s fo	r Use	by Th	eir Em	ploye	es			
	wer these questions to determir e than 5% owners or related pe				to con	npletin	g Section	on E	3 for v	ehicles	s used	by em	ploye	es w	ho ar	en't
37	Do you maintain a written pol your employees?	icy statemer	-		-		use of	vel	nicles, 	, includ	ding co	mmuti 	ing, I	ру <u> </u>	Yes	No
38	Do you maintain a written pol employees? See the instruction	ons for vehicl	es use	d by co	rporate							٠,	, ,			
39	Do you treat all use of vehicles													·		
	Do you provide more than fivuse of the vehicles, and retain	the informati	ion rece	eived?												
41	Do you meet the requirements												•			
Par	Note: If your answer to 37, 38 tVI Amortization	3, 39, 40, or 4	I IS "Y	es," aoi	n't com	ipiete :	Section	Вт	or tne	cover	ea ven	icies.				
· Gi	(a) Description of costs	(b) Date amortiza	ation	Amor	(c) tizable ar	mount	((d) e section	n	(e) Amortiza period percent	or	Amo		(f) on for th	is year
42	Amortization of costs that beg	ins during yo	ur 202	1 tax ye	ar (see	instru	ctions):									
-40	Amaziki aki angat angat dinaki		0001		0,157,8							40		2 10)E 906	
	Amortization of costs that beg Total. Add amounts in column	-		-								43 44)5,886 68,44	
	Total. Add amounts in column	11 (1). GEE 111E	ii ioti uC	10115 10	· wilet	- 10 16	JUIL .	•	<u> </u>			7**				2 (2021)

-orm **4684**

Department of the Treasury Internal Revenue Service

Casualties and Thefts

▶ Go to www.irs.gov/Form4684 for instructions and the latest information.
 ▶ Attach to your tax return.
 ▶ Use a separate Form 4684 for each casualty or theft.

OMB No. 1545-0177

2021
Attachment Sequence No. 26

Name(s) shown on tax return

Total Forms Filed =

166,275

Identifying number

busi of pa Forr	ness or for income- ersonal-use propert n 4684 (through line	Use Property (Use the producing purposes. For y are deductible only if the 12) for each casualty ones for special rules that	r tax y he los r theft	/ears : s is at : even	2018 through 2 ttributable to a t involving pers	2025, if yo federally o sonal-use	u are an i declared c property.	ndividual, c lisaster. Yo	asual u mus	ty or theft losses st use a separate
	-	s is attributable to a feder	-		d disaster, chec	k here 🗌 a	and enter t	he DR		or EM
decl	aration number assig	ned by FEMA. (See instru	ıctions	.)						
1	property lost or dama	ties (show type, location (cit ged from the same casualty the property most affected o	or the	ft. If yo	ou checked the b					
		Type of Property			City and St	ate		ZIP Code		Date Acquired
	Property A									
	Property B									
	Property C									
	Property D						_			
							Prope			
_					Α		В	С		D
2	Cost or other basis of			2						
3		imbursement (whether or no								
	, ,	uctions) than line 3, skip line 4.		3						
4		theft. If line 3 is more than	line 2,							
	enter the difference h	ere and skip lines 5 through	9 for							
		uctions if line 3 includes insu								
		ent you did not claim, o our loss in a later tax year		4						
5		re casualty or theft		5						
6		r casualty or theft		6						
7	Subtract line 6 from lin	ne 5		7						
8	Enter the smaller of lin	ne 2 or line 7		8						
9	Subtract line 3 from lin	e 8. If zero or less, enter -0-		9						
10	Casualty or theft loss.	Add the amounts on line 9 in	colum	ns A th	rough D				10	
11		alified disaster loss rules app	-						11	
12	Subtract line 11 from I	ine 10. If zero or less, enter -	0						12	
	•	Form 4684 for lines 13 throu	ugh 18.							0.050
	Add the amounts on li								13	2,056
14		ne 12 of all Forms 4684. If yo				-				127,240
									14	121,240
		ons before completing line 1								
15	 If line 13 is more the complete the rest of the 	an line 14, enter the differer nis section.	nce her	e and	on Schedule D. I	Do not				
	• If line 13 is equal to	line 14, enter -0- here. Do no	t comp	lete th	e rest of this sect	ion.				
		n line 14, and you have no q								
	-	e 11 on any Form(s) 4684, er losses subject to the \$500 r			•	,				440.000
	•	of this difference or the an							15	110,836
		. Enter that result here and o			` ''					
		·0-NR), line 7. If you claim th 040), line 16, the amount o								
		1040). Do not complete the								
		s are subject to the \$500 red				·)				
16	Add lines 13 and 15. S	Subtract the result from line 1	4 .						16	18,459
17	Enter 10% of your ad	justed gross income from Fo	orm 104	40, 104	40-SR, or 1040-N	IR, line 11. I	Estates and	trusts, see		
40	instructions	lino 16 If novo or land and the				· · ·			17	18,444
10		line 16. If zero or less, enter J-NR), line 6. Estates and trus							18	11,132

4684

Department of the Treasury Internal Revenue Service

Casualties and Thefts

▶ Go to www.irs.gov/Form4684 for instructions and the latest information.
 ▶ Attach to your tax return.
 ▶ Use a separate Form 4684 for each casualty or theft.

2021 Attachment Sequence No. 26

OMB No. 1545-0177

Name(s) shown on tax return

Total Forms Filed =

166,275

Identifying number

busing of perform	ness or for ersonal-use n 4684 (thr	Personal Use Property (Use this income-producing purposes. For the property are deductible only if the ough line 12) for each casualty or the tructions for special rules that it	tax ye e loss theft	ears : is at even	2018 through 20 tributable to a fe t involving perso	25, if you are ederally declar onal-use prope	an individual, o ed disaster. Yo erty. If reportin	asual u mu	ity or theft losses st use a separate	
If the	casualty o	r theft loss is attributable to a federal	lly dec	clarec	l disaster, check	here 🗌 and en	ter the DR		or EM	
decl	aration num	nber assigned by FEMA. (See instruct	tions.))						
1	property los	of properties (show type, location (city, st or damaged from the same casualty or P code for the property most affected on the	r theft	. If yo	u checked the box					
		Type of Property			City and Stat	ZIP Code		Date Acquired		
	Property A									
	Property B									
	Property C									
	Property D									
							roperties		Г	
			г		Α	В	С		D	
2	Cost or other	er basis of each property	.	2						
3		or other reimbursement (whether or not								
) (see instructions)	.	3						
4		casualty or theft. If line 3 is more than line	ر م							
7		fference here and skip lines 5 through 9								
	that column	. See instructions if line 3 includes insura	nce							
		eimbursement you did not claim, or y yment for your loss in a later tax year		4						
5		value before casualty or theft		5						
6		value after casualty or theft		6						
7		e 6 from line 5		7						
8		naller of line 2 or line 7		8						
9		e 3 from line 8. If zero or less, enter -0		9						
10		theft loss. Add the amounts on line 9 in co	_		rough D			10		
11	•	(\$500 if qualified disaster loss rules apply;			· ·			11		
12		e 11 from line 10. If zero or less, enter -0-	-		,			12		
	Caution: Us	se only one Form 4684 for lines 13 through	h 18.							
13	Add the am	ounts on line 4 of all Forms 4684						13	-138,773	
14	Add the am	ounts on line 12 of all Forms 4684. If you l	have lo	osses	not attributable to	a federally declar	ed disaster, see			
		ons						14	2,683,803	
	Caution: Se	ee instructions before completing line 15.								
15		is more than line 14, enter the difference rest of this section.	e here	and	on Schedule D. Do	not \				
	• If line 13 is	s equal to line 14, enter -0- here. Do not o	comple	ete the	e rest of this section	n.				
	• If line 13 i	s less than line 14, and you have no qua	alified (disast	er losses subject to	o the				
		tion on line 11 on any Form(s) 4684, ente								
		ed disaster losses subject to the \$500 red he smaller of this difference or the amou		-				15	1,924,847	
		ose losses. Enter that result here and on			` '					
	Schedule A	(Form 1040-NR), line 7. If you claim the s	standa	rd de	duction, also includ	le on				
		(Form 1040), line 16, the amount of	,		`					
		for Form 1040). Do not complete the theft losses are subject to the \$500 reductions.		OI LIII	s section it all of	your				
	,	•				,			000 500	
		3 and 15. Subtract the result from line 14						16	938,529	
17		of your adjusted gross income from Form					and trusts, see	17	290,940	
18		e 17 from line 16. If zero or less, enter -0		-		,	, .			
	Schedule A (Form 1040-NR), line 6. Estates and trusts, enter the result on the "Other deductions" line of your tax return 18 749,815									

Attachment Sequence No. 26 Page 2 Name(s) shown on tax return. Do not enter name and identifying number if shown on other side. Identifying number SECTION B—Business and Income-Producing Property Casualty or Theft Gain or Loss (Use a separate Part I for each casualty or theft.) 19 Description of properties (show type, location, and date acquired for each property). Use a separate line for each property lost or damaged from the same casualty or theft. See instructions if claiming a loss due to a Ponzi-type investment scheme and Section C is not completed. Property A Property **B** Property **C** Property **D Properties** 20 20 Cost or adjusted basis of each property 21 Insurance or other reimbursement (whether or not you 21 filed a claim). See the instructions for line 3 Note: If line 20 is more than line 21, skip line 22. 22 Gain from casualty or theft. If line 21 is more than line 20, enter the difference here and on line 29 or line 34, column (c), except as provided in the instructions for line 33. Also, skip lines 23 through 27 for that column. See the instructions for line 4 if line 21 includes insurance or other reimbursement you did not claim, or you received payment for your loss in a later tax year 22 **23** Fair market value **before** casualty or theft . . . 23 24 Fair market value after casualty or theft 24 **25** Subtract line 24 from line 23 25 26 Enter the smaller of line 20 or line 25 26 Note: If the property was totally destroyed by casualty or lost from theft, enter on line 26 the amount from line 20. 27 Subtract line 21 from line 26. If zero or less, enter -0-... 28 Casualty or theft loss. Add the amounts on line 27. Enter the total here and on line 29 or line 34. See instructions . Part II Summary of Gains and Losses (from separate Parts I) (b) Losses from casualties or thefts (c) Gains from (i) Trade, business, casualties or thefts (ii) Income-(a) Identify casualty or theft rental, or royalty includible in income producing property property Casualty or Theft of Property Held One Year or Less 29 **30** Totals. Add the amounts on line 29 30 31 Combine line 30, columns (b)(i) and (c). Enter the net gain or (loss) here and on Form 4797, line 14. If Form 4797 is 6,340 31 32 Enter the amount from line 30, column (b)(ii), here. Individuals, enter the amount from income-producing property on Schedule A (Form 1040), line 16; or Schedule A (Form 1040-NR), line 7. (Do not include any loss on property used as 5,008 Casualty or Theft of Property Held More Than One Year **33** Casualty or theft gains from Form 4797, line 32 2,034 34 6.313 35 Total losses. Add amounts on line 34, columns (b)(i) and (b)(ii) **36** Total gains. Add lines 33 and 34, column (c) 36 6,411 22,693 **37** Add amounts on line 35, columns (b)(i) and (b)(ii) 37 **38** If the loss on line 37 is **more** than the gain on line 36: a Combine line 35, column (b)(i), and line 36, and enter the net gain or (loss) here. Partnerships and S corporations, see the Note below. All others, enter this amount on Form 4797, line 14. If Form 4797 is not otherwise required, see 38a 16,322 b Enter the amount from line 35, column (b)(ii), here. Individuals, enter the amount from income-producing property on Schedule A (Form 1040), line 16; or Schedule A (Form 1040-NR), line 7. (Do not include any loss on property used as an employee.) Estates and trusts, enter on the "Other deductions" line of your tax return. Partnerships and S 6,293 38b corporations, see the *Note* below . . . 39 If the loss on line 37 is less than or equal to the gain on line 36, combine lines 36 and 37 and enter here. Partnerships, 6.228 Note: Partnerships, enter the amount from line 38a, 38b, or 39 on Form 1065, Schedule K, line 11. S corporations, enter the amount from line 38a or 38b on Form 1120-S, Schedule K, line 10.

Form	Form 4684 (2021) Attachment Sequence No. 26 Page 2									
Name	(s) shown on tax return. Do not enter name and identifying number i	f showr	n on other side.			Identify	fying number			
CEC	TION D. Dusings and Income Duadusing D		uda -							
	TION B—Business and Income-Producing P TI Casualty or Theft Gain or Loss (Use a			och casualty or	tho	ft \				
	Description of properties (show type, location, and date as	•					orty lo	et or damaged from		
19	the same casualty or theft. See instructions if claiming a									
	Property A									
	Property B									
	Property C							_		
	Property D									
			Δ.		per	ties C		D		
20	Cost or adjusted basis of each property	20	Α	В		<u> </u>		<u> </u>		
	Cost or adjusted basis of each property	20								
21	filed a claim). See the instructions for line 3	21								
	Note: If line 20 is more than line 21, skip line 22.									
22	Gain from casualty or theft. If line 21 is more than line 20, enter									
	the difference here and on line 29 or line 34, column (c), except									
	as provided in the instructions for line 33. Also, skip lines 23 through 27 for that column. See the instructions for line 4 if line									
	21 includes insurance or other reimbursement you did not									
	claim, or you received payment for your loss in a later tax year	22								
	Fair market value before casualty or theft	23								
	Fair market value after casualty or theft	24								
25 26	Subtract line 24 from line 23	25 26								
20	Note: If the property was totally destroyed by casualty or	20						_		
	lost from theft, enter on line 26 the amount from line 20.									
27	Subtract line 21 from line 26. If zero or less, enter -0	27								
28	Casualty or theft loss. Add the amounts on line 27. Enter the			 			28			
Pai	Summary of Gains and Losses (from s	separ	ate Parts I)	(b) Losses from		ualties or thef	ts	(c) Gains from		
	(a) Identify casualty or theft			rental, or royalty	´	ii) Income producing pro		casualties or thefts includible in income		
	Casualty or Theft	of Pı	operty Held On		S					
29				() ()			
				() ()			
30	Totals. Add the amounts on line 29		30	() ()	_		
31	Combine line 30, columns (b)(i) and (c). Enter the net gair not otherwise required, see instructions	•	•		f For	m 4797 is	31	-231,656		
32	Enter the amount from line 30, column (b)(ii), here. Individu	uals, e	nter the amount fron	n income-produci	ng pi	operty on				
	Schedule A (Form 1040), line 16; or Schedule A (Form 104									
	an employee.) Estates and trusts, partnerships, and S corp Casualty or Theft o						32	444,446		
33	Casualty or theft gains from Form 4797, line 32		•				33	210,798		
34				() ()	210,730		
٠.				() ()			
35	Total losses. Add amounts on line 34, columns (b)(i) and (b)(ii) .	35	(598,681) (413,820)			
36	Total gains. Add lines 33 and 34, column (c)						36	297,670		
37	Add amounts on line 35, columns (b)(i) and (b)(ii)						37	1,012,501		
38	If the loss on line 37 is more than the gain on line 36:									
а	Combine line 35, column (b)(i), and line 36, and enter the n the <i>Note</i> below. All others, enter this amount on Form 4									
	instructions						38a	-580,551		
b	Enter the amount from line 35, column (b)(ii), here. Individu									
	Schedule A (Form 1040), line 16; or Schedule A (Form 104									
	an employee.) Estates and trusts, enter on the "Other corporations, see the <i>Note</i> below				ا ا اکا ا ک	ρο απα ο 	38b	413,637		
39	If the loss on line 37 is less than or equal to the gain on line				e. Par	tnerships.				
- =	see the Note below. All others, enter this amount on Form 4	797, li	ne 3				39	279,403		
	Note: Partnerships, enter the amount from line 38a, 38b, of S corporations, enter the amount from line 38a or 38b on F									
	o oorporations, ortion the amount holli line soa or sob our f	Omi I	120 0, Ochledule N,					Form 4684 (2021)		

Form	4684 (2021) Attach	nment Sequence No. 26	Page 3
Nam	e(s) shown on tax return		Identifying number
SE(CTION C—Theft Loss Deduction for Ponzi-Type Incedure 2009-20 (Complete this section in lieu of App	vestment Scheme Using the Propendix A in Revenue Procedure 20	ocedures in Revenue 09-20. See instructions.)
Pa	art I Computation of Deduction		
40	Initial investment	40	
41	Subsequent investments (see instructions)	41	
42	Income reported on your tax returns for tax years prior to the disc	covery year	
	(see instructions)	42	
43	Add lines 40, 41, and 42	43	
44	Withdrawals for all years (see instructions)		
45	Subtract line 44 from line 43. This is your total qualified investme	nt	
46	Enter 0.95 (95%) if you have no potential third-party recovery. E	Enter 0.75 (75%) if you have	
	potential third-party recovery	46	
47	Multiply line 46 by line 45	47	
48	Actual recovery	48	
49	Potential insurance/Securities Investor Protection Corporation (S	IPC) recovery 49	
50	Add lines 48 and 49. This is your total recovery	50	
51	Subtract line 50 from line 47. This is your deductible theft loss.	Include this amount on line	
	28 of Section B, Part I. Do not complete lines 19-27 for this loss	s. Then complete Section B,	
	Part II		3,171
Pa	rt II Required Statements and Declarations (Se	e instructions.)	
inc Na	m claiming a theft loss deduction pursuant to Revenue Procedur lividual or entity. Ime of individual or entity	e 2009-20 from a specified fraudulent am	angement conducted by the following
	dress		
	ave written documentation to support the amounts reported in Par	t Lof this Soction C	
	m a qualified investor, as defined in section 4.03 of Revenue Proce		
	have determined the amount of my theft loss deduction using 0.9		t purpued and do not intend to purpue
	y potential third-party recovery, as that term is defined in section 4		t pursued and do not intend to pursue
• I a	gree to comply with the conditions and agreements set forth in Rev	venue Procedure 2009-20 and this Section	ı C.
ad	have already filed a return or amended return that does not satigustments or actions that are necessary to comply with those concepts on which they were filed are as follows:	,	, 3

Form	4684 (2021)	Attachment Sequence No. 26			Page 3
Name(s) shown on tax return				Identifying n	umber
SEC Pro	CTION C-Theft Loss Decedure 2009-20 (Comple	eduction for Ponzi-Type Investment Scheme Usinete this section in lieu of Appendix A in Revenue Pro	g the Pro	cedures in F 09-20. See in	Revenue structions.)
Pa	rt I Computation of	Deduction			
40	Initial investment		40		
41	Subsequent investments (see	instructions)	41		
42	Income reported on your tax r	eturns for tax years prior to the discovery year			
	(see instructions)		42		
43	Add lines 40, 41, and 42 .		43		
44	Withdrawals for all years (see	instructions)	44		
45	Subtract line 44 from line 43.	This is your total qualified investment	45		
46	Enter 0.95 (95%) if you have	no potential third-party recovery. Enter 0.75 (75%) if you have			
	potential third-party recovery		46		
47	Multiply line 46 by line 45 .		47		
48	•		48		
49	Potential insurance/Securities	Investor Protection Corporation (SIPC) recovery	49		
50	Add lines 48 and 49. This is ye	our total recovery	50		
51		This is your deductible theft loss. Include this amount on line			
	,	t complete lines 19–27 for this loss. Then complete Section B,			
			51		651,321
Pai	Required Statem	ents and Declarations (See instructions.)			
		on pursuant to Revenue Procedure 2009-20 from a specified fr	audulent arra	angement condu	icted by the following
	vidual or entity.				
	me of individual or entity				
		known)			
	dress				
		upport the amounts reported in Part I of this Section C.			
	'	d in section 4.03 of Revenue Procedure 2009-20.			and the same
		f my theft loss deduction using 0.95 on line 46 above, I declare the as that term is defined in section 4.10 of Revenue Procedure 200		t pursued and do	o not intend to pursue
• I ag	ree to comply with the condition	ons and agreements set forth in Revenue Procedure 2009-20 and	this Section	C.	
adjı		amended return that does not satisfy the conditions in section (cessary to comply with those conditions. The tax year(s) for whice as follows:			
					Form 4684 (2021)

Form	4684 (2021) Attachment Sequence No. 26	Р	age 4
Name	e(s) shown on tax return	Identifying number	
SEC	CTION D—Election To Deduct Federally Declared Disaster Loss in Preceding	g Tax Year (See instructions.)	
Pa	art I Election Statement		
, ,	roviding all of the information below, the taxpayer elects, under section 165(i) of the Internal Revenue C ared disaster and that occurred in a federally declared disaster area in the tax year immediately preceding	•	lerally
	ch this Section D to your return or amended return for the tax year immediately preceding the tax year deduction.	ar the loss was sustained to claim the dis	saster
52	Provide the name or a description of the federally declared disaster.		
53	Provide the date or dates (mm/dd/yyyy) of the loss or losses attributable to the federally declared di	isaster.	
54	Specify the address, including the city or town, county or parish, state, and ZIP code where the dan the time of the disaster.	, , , ,	d at
Pai	rt II Revocation of Prior Election		
attrib	providing all of the information below, the taxpayer revokes the prior election under section 165(i) of putable to a federally declared disaster and that occurred in a federally declared disaster area in the oss was sustained.		
	ch this Section D to your amended return for the tax year immediately preceding the tax year the ster loss deduction.	e loss was sustained to remove the pre	vious
55	Provide the name or a description of the federally declared disaster and the address of the property which the election was claimed.	· ·	
56	Specify the date (mm/dd/yyyy) you filed the prior election, which you are now revoking. (See instruction October 13, 2016.)	ctions and note that new rules went into e	ffect
57		• •	t or

Form **4684** (2021)

Form	4684 (2021)	Attachment Sequence No. 26	Page 4
Name	e(s) shown on tax return		Identifying number
SEC	CTION D—Election	Го Deduct Federally Declared Disaster Loss in Preceding Ta	ax Year (See instructions.)
Pa	rt I Election Stat	ement	
		on below, the taxpayer elects, under section 165(i) of the Internal Revenue Code urred in a federally declared disaster area in the tax year immediately preceding t	
	ch this Section D to your rededuction.	eturn or amended return for the tax year immediately preceding the tax year th	e loss was sustained to claim the disaster
52	Provide the name or a de	escription of the federally declared disaster.	
53	Provide the date or date:	s (mm/dd/yyyy) of the loss or losses attributable to the federally declared disas	ter.
54		uding the city or town, county or parish, state, and ZIP code where the damage	, , , ,
Pa	rt II Revocation of	of Prior Election	
attrib		ation below, the taxpayer revokes the prior election under section 165(i) of the ared disaster and that occurred in a federally declared disaster area in the tax	
	ch this Section D to your ster loss deduction.	amended return for the tax year immediately preceding the tax year the los	ss was sustained to remove the previous
55		escription of the federally declared disaster and the address of the property that	g ,
56	Specify the date (mm/dd on October 13, 2016.)	l/yyyy) you filed the prior election, which you are now revoking. (See instruction	s and note that new rules went into effect
57		r otherwise provide evidence for, or explanation of, your arrangements for the red and which resulted from the prior election (which you are now revoking).	• •
			Form 4684 (2021)

Form **4797**

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) OMB No. 1545-0184

Department of the Treasury Internal Revenue Service

► Attach to your tax return.

► Go to www.irs.gov/Form4797 for instructions and the latest information.

Attachment Sequence No. **27**

Name(s) shown on return Identifying number Total Forms Filed = 3,544,694 1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or 351,993 1a Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 6,394 1b Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS 1,197 Part I 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 (loss) (c) Date sold (d) Gross 2 (a) Description (b) Date acquired basis, plus improvements and allowed or Subtract (f) from the allowable since of property (mo., day, yr.) (mo., day, yr.) sales price sum of (d) and (e) acquisition expense of sale 2,281,328 6,224 3 Gain, if any, from Form 4684, line 39 . 3 195,603 4 Section 1231 gain from installment sales from Form 6252, line 26 or 37. 4 17.288 5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824. 5 860,863 Gain, if any, from line 32, from other than casualty or theft 6 6 3.049.408 7 7 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. Nonrecaptured net section 1231 losses from prior years. See instructions . . . 296,218 8 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 long-term capital gain on the Schedule D filed with your return. See instructions. 207.526 Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 426.849 830,331 11 11 296,218 12 Gain, if any, from line 7 or amount from line 8, if applicable. 12 13 Gain, if any, from line 31 13 649,567 14 9,022 14 Net gain or (loss) from Form 4684, lines 31 and 38a 15 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 1,161 16 3,904 16 Ordinary gain or (loss) from like-kind exchanges from Form 8824 . 1,979,299 17 17 18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below. a 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 property used as an 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 1.979.296

* Data not shown because of the small number of sample returns on which they are based.

Form **4797**

Sales of Business Property

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

OMB No. 1545-0184

Department of the Treasury Internal Revenue Service

► Attach to your tax return.

Attachment Sequence No. 27

▶ Go to www.irs.gov/Form4797 for instructions and the latest information. Name(s) shown on return Identifying number Total Forms Filed = 3,544,694 1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or 202,660,817 Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 2,796,575 1b Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS 44,000 Part I 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 (loss) (b) Date acquired (c) Date sold (d) Gross (a) Description 2 basis, plus improvements and allowed or Subtract (f) from the allowable since of property (mo., day, yr.) (mo., day, yr.) sales price sum of (d) and (e) acquisition expense of sale 311,135,372 279,403 Gain, if any, from Form 4684, line 39 3 3 13,489,336 4 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 3.728.334 5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824. . . . 5 116,950,797 Gain, if any, from line 32, from other than casualty or theft 6 6 445.583.242 7 7 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. Nonrecaptured net section 1231 losses from prior years. See instructions 12,242,512 8 9 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 long-term capital gain on the Schedule D filed with your return. See instructions. 91.314.573 Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 39.755.957 13,996,878 11 11 5,129,858 12 12 Gain, if any, from line 7 or amount from line 8, if applicable 13 13 20,223,991 Net gain or (loss) from Form 4684, lines 31 and 38a 14 -263,101 14 197,634 15 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 147,402 16 16 Ordinary gain or (loss) from like-kind exchanges from Form 8824 . . . 51,194,863 17 17 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines 18 a and b below. For individual returns, complete lines a and b below. a 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 property used as an 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 51.195.020 Form 4797 (2021) For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 130861

* Data not shown because of the small number of sample returns on which they are based.

Form 4797 (2021) Page **2**

	(see instructions)							(c) Date sold
9	(a) Description of section 1245, 1250, 1252, 1254, or 1255 property:						uired /r.)	(mo., day, yr.)
Α								
В								
C								
D								
	These selections relate to the appropriate on lines 404 through 400		Property A	Propert	у В	Property	C	Property D
0	These columns relate to the properties on lines 19A through 19D Gross sales price (Note: See line 1a before completing.).	20						
1	Cost or other basis plus expense of sale	21						
2	Depreciation (or depletion) allowed or allowable	22						
3	Adjusted basis. Subtract line 22 from line 21	23						
	Adjusted Sasie. Gastraet into 22 from into 21.							
4	Total gain. Subtract line 23 from line 20	24						
25	If section 1245 property:							
а	Depreciation allowed or allowable from line 22	25a						
b	Enter the smaller of line 24 or 25a	25b	630,499					
26	If section 1250 property: If straight line depreciation was used,							
	enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975. See instructions .	26a						
b	Applicable percentage multiplied by the smaller of line							
	24 or line 26a. See instructions	26b						
С	Subtract line 26a from line 24. If residential rental property							
	or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d	Additional depreciation after 1969 and before 1976	26d						
е	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
g	Add lines 26b, 26e, and 26f	26g	26,932					
27	If section 1252 property: Skip this section if you didn't							
	dispose of farmland or if this form is being completed							
_	for a partnership.	07-					ŀ	
a	Soil, water, and land clearing expenses	27a						
b	Line 27a multiplied by applicable percentage. See instructions Enter the smaller of line 24 or 27b	27b 27c	*					
<u>с</u> 8	If section 1254 property:	210						
		1		,				
а	Intangible drilling and development costs, expenditures for development of mines and other natural deposits,							
	mining exploration costs, and depletion. See instructions	28a						
b	Enter the smaller of line 24 or 28a	28b	854					
9	If section 1255 property:							
	Applicable percentage of payments excluded from							
.	income under section 126. See instructions	29a						
b	Enter the smaller of line 24 or 29a. See instructions .	29b	*					
um	mary of Part III Gains. Complete property colur	nns A	through D through	gh line 29b	befor	e going to lir	ne 30.	
0	Total gains for all properties. Add property columns A thro	_					30	1,252,807
1	Add property columns A through D, lines 25b, 26g, 27c, 2	8b, and	29b. Enter here an	d on line 13			31	649,567
2	Subtract line 31 from line 30. Enter the portion from casu	ualty or	theft on Form 4684	1, line 33. Ent	ter the	portion from		
) o r							32	862,438
Œľ	Recapture Amounts Under Sections 17 (see instructions)	y and	∠8UF(D)(2) Wh	en Busine	ss Us	rops to urops	5 0%	or Less
	(COO ITION GONOTIO)					(a) Section	on	(b) Section
						179	,	280F(b)(2)
3	Section 179 expense deduction or depreciation allowable	in prior	vears		33			. , , ,
ა 4	Recomputed depreciation. See instructions	•	•		34			
					35	+		

	4797 (2021)							Page
Pa	Gain From Disposition of Property Und (see instructions)	ler Se	ctions 1245, 12	250, 1252, ⁻	1254,	and 1255		
19	(a) Description of section 1245, 1250, 1252, 1254, or 125		(b) Date acqui (mo., day, yr		(c) Date sold (mo., day, yr.)			
Α								
В								
С								
D								
	These columns relate to the properties on lines 19A through 19D		Property A	Property	у В	Property (C	Property D
20	Gross sales price (Note: See line 1a before completing.).	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
24	Total gain. Subtract line 23 from line 20	24						
25	If section 1245 property:							
а	Depreciation allowed or allowable from line 22	25a						
b	Enter the smaller of line 24 or 25a	25b	19,666,573					
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975. See instructions .	26a						
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions.	26b						
С	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d	Additional depreciation after 1969 and before 1976	26d						
е	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
g	Add lines 26b, 26e, and 26f	26g	597,043					
27	If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
а		27a						
b	Line 27a multiplied by applicable percentage. See instructions	27b						
С	Enter the smaller of line 24 or 27b	27c	*					
28	If section 1254 property:							
а	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
b	Enter the smaller of line 24 or 28a	28b	152,931					
29	If section 1255 property:							
а	Applicable percentage of payments excluded from income under section 126. See instructions	29a						
	Enter the smaller of line 24 or 29a. See instructions .	29b	*					
Sur	nmary of Part III Gains. Complete property colun	nns A	through D throu	gh line 29b	before	e going to line	30.	
								107 074 564
30 31	Total gains for all properties. Add property columns A through D, lines 25b, 26g, 27c, 2	•				F	30 31	137,374,561 20,223,991
32	Subtract line 31 from line 30. Enter the portion from casu other than casualty or theft on Form 4797, line 6						32	117,150,570
'a	Recapture Amounts Under Sections 17 (see instructions)	/9 and	1 280F(b)(2) Wh	en Busine	ss Us	se Drops to	50%	or Less
						(a) Section 179	1	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable	in prior	years		33			
34	Recomputed depreciation. See instructions				34			
35	Recapture amount. Subtract line 34 from line 33. See the	instruct	ions for where to re	port	35			5 4707 (200)

Department of the Treasury Internal Revenue Service (99)

Farm Rental Income and Expenses
(Crop and Livestock Shares (Not Cash) Received by Landowner (or Sub-Lessor))
(Income Not Subject to Self-Employment Tax)

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

OMB No. 1545-0074

▶ Go to www.irs.gov/Form4835 for the latest information.

Attachment Sequence No. **37**

Name(s)	shown on tax return						Your soci	al secu	urity numbe	r	
	Total Forms	Filed	= 454,633						. (=151)		
							Employer	וט nur	nber (EIN), i	τany ∣ ∣	
	Did you gatively participate in the energi	on of	this form during (20212	Cao inatruat	iono				\perp	
<u> </u>	Did you actively participate in the operati	OH OI	this farm during 2	2021?	See mstruct	ions		•	Yes	r	lo
Part	Gross Farm Rental Income – B	asec	d on Production	n. Inc	lude amou	nts converte	d to cas	sh or	the equiv	valen	t.
1	Income from production of livestock, pro	duce,	grains, and other	rcrops	3			1	195,8	397	
2 a	Cooperative distributions (Form(s) 1099-I	PATR) 2a	80,4	439 2	b Taxable am	ount	2b			
3a	Agricultural program payments (see instr	uctior	ns) 3a	169	,261 3	b Taxable am	ount	3b	166,8	377	
4	Commodity Credit Corporation (CCC) loa	ıns (se	ee instructions):								
а	CCC loans reported under election .		1 1					4a	*		
b	CCC loans forfeited					c Taxable am	ount	4c			
5	Crop insurance proceeds and federal cro	•		ee ins	tructions):						
а	Amount received in 2021			19.0	001	b Taxable am		5b	17,5	86	
С	If election to defer to 2022 is attached, cl					eferred from 2	2020	5d			
6	Other income, including federal and state							6	226,3	314	
7	Gross farm rental income. Add amount										
	and on Schedule E (Form 1040), line 42	• •					. •	7	437,9	967	
Part	II Expenses – Farm Rental Prope	erty.	Do not include	perso	nal or living	g expenses.					
8	Car and truck expenses (see			21		and profit-					
	Schedule F (Form 1040) instructions).				•			21	*		
	Also attach Form 4562	8	44,179	22	Rent or le						
9	Chemicals	9	55,113	а	,	machinery,					
10	Conservation expenses (see instructions)	10	3,363	1		t (see instruct		22a			
11	Custom hire (machine work)	11	35,399	b		d, animals, etc		22b			
12	Depreciation and section 179 expense		400.540	23	-	nd maintenan		23	110,		
	deduction not claimed elsewhere	12	129,518	24		d plants		24	44,3	34	
13	Employee benefit programs other than			25	_	nd warehousi	-	25			
	on line 21 (see Schedule F (Form 1040)		*	26				26	62,6		
	instructions)	13		27				27	323,2	235	
14	Feed	14	9,029	28				28			
15	Fertilizers and lime	15	80,695	29	Veterinary	, breeding,					
16	Freight and trucking	16	74.000	-				29			
17	Gasoline, fuel, and oil	17	71,823	30	Otner exp	enses (specify	y):	20-			
18	Insurance (other than health) Interest (see instructions):	18	191,095	_ a				30a 30b			
19		100	43 702	b							
a b	Mortgage (paid to banks, etc.) Other	19a 19b	43,792 14,761	c d				30c 30d			
20	Labor hired (less employment credits)	190	14,701	-				30e			
20	(see Schedule F (Form 1040)			e f				30f			
	instructions)	20	12,130	_				30g			
31	Total expenses. Add lines 8 through 30c			g			•	31	388,9	910	
32	Net farm rental income or (loss). Subtra	•		 If the r			ere and	<u> </u>			
-	on Schedule E (Form 1040), line 40. If the					•		32	445,	300	
33	Reserved for future use		, ,					33	,		
34	If line 32 is a loss, check the b	oox ·	that describes	vour	investment	in this ac	tivity.	34a	All investm	ont is at	rick
••	.						}				
			le loss (+) / susp	ender	loss carry	over (-) = 35	166 J	34b	Some inverse at risk.	stment is	; not
С	You may have to complete Form 8582										
J	you checked. If you checked box 34b, you										
	either case, enter the deductible loss he							34c	75,4	87	
	namicals Dadication Act Notice and very tax			•	··				Form 49		204

Form **4835**

Department of the Treasury Internal Revenue Service (99) Farm Rental Income and Expenses

(Crop and Livestock Shares (Not Cash) Received by Landowner (or Sub-Lessor))
(Income Not Subject to Self-Employment Tax)

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

► Go to www.irs.gov/Form4835 for the latest information.

OMB No. 1545-0074

2021

Attachment
Sequence No. 37

Name(s) shown on tax return Your social security number 454.633 Total Forms Filed = Employer ID number (EIN), if any Part I Gross Farm Rental Income - Based on Production. Include amounts converted to cash or the equivalent. 1 Income from production of livestock, produce, grains, and other crops 6,380,262 2a Cooperative distributions (Form(s) 1099-PATR) . . 2a 2,187,083 **2b** Taxable amount 2b 3b 1,097,115 3a Agricultural program payments (see instructions) . . 1,110,583 3b Taxable amount 4 Commodity Credit Corporation (CCC) loans (see instructions): CCC loans reported under election 4a а 4c Taxable amount b 4c 0 5 Crop insurance proceeds and federal crop disaster payments (see instructions): 119,494 Amount received in 2021 5a **5b** Taxable amount 5b If election to defer to 2022 is attached, check here ▶ □ 5d Amount deferred from 2020 5d С 3,526,568 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) 6 7 Gross farm rental income. Add amounts in the right column for lines 1 through 6. Enter the total here 7 12,577,304 Part II Expenses - Farm Rental Property. Do not include personal or living expenses. Pension and profit-sharing 8 Car truck expenses (see Schedule F (Form 1040) instructions). plans 21 Also attach Form 4562 47.910 8 22 Rent or lease: 430.488 Chemicals Vehicles, 9 9 machinery, 26,184 equipment (see instructions) 10 Conservation expenses (see instructions) 10 22a 205,063 11 Custom hire (machine work) 11 Other (land, animals, etc.) . . 22b 12 Depreciation and section 179 expense 23 23 Repairs and maintenance 377,756 deduction not claimed elsewhere . . 12 1,335,950 24 Seeds and plants 24 396,282 25 25 Employee benefit programs other than Storage and warehousing 13 on line 21 (see Schedule F (Form 1040) 26 Supplies 26 111,912 instructions) 13 27 Taxes 27 1,132,034 14 14 14.578 28 Utilities . . 28 Feed 29 850,633 Veterinary, breeding, and 15 Fertilizers and lime 15 medicine 16 Freight and trucking 16 29 17 Gasoline, fuel, and oil 17 110.270 30 Other expenses (specify): 18 Insurance (other than health) . . 18 405,114 30a а Interest (see instructions): 30b 19 b 388,154 30c Mortgage (paid to banks, etc.) . . . 19a а 94,870 b Other 19b d 30d 20 Labor hired (less employment credits) 30e (see Schedule F (Form 1040) 30f instructions) 20 89,082 30g 7,418,585 31 31 Net farm rental income or (loss). Subtract line 31 from line 7. If the result is income, enter it here and 32 on Schedule E (Form 1040), line 40. If the result is a loss, you must go to line 34. See instructions. 5,158,719 32 33 33 34 If line 32 is a loss, check the box that describes your investment in this activity. **34a** All investment is at risk. See instructions 34b Some investment is not Nondeductible loss (+) / suspended carryover (-) = 397,236 You may have to complete Form 8582 to determine your deductible loss, regardless of which box you checked. If you checked box 34b, you must complete Form 6198 before going to Form 8582. In either case, enter the deductible loss here and on Schedule E (Form 1040), line 40. See instructions. 34c 675,529 Form **4835** (2021) For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 13117W

* Data not shown because of the small number of sample returns on which they are based.

Form **4952**

Department of the Treasury Internal Revenue Service (99)

For Paperwork Reduction Act Notice, see page 4.

Investment Interest Expense Deduction

► Go to www.irs.gov/Form4952 for the latest information.

► Attach to your tax return.

OMB No. 1545-0191

2021

Attachment
Sequence No. 51

8

1,128,977

Form **4952** (2021)

Identifying number Name(s) shown on return Total Forms Filed = 1,327,589 Part I **Total Investment Interest Expense** Investment interest expense paid or accrued in 2021 (see instructions) 952,033 2 Disallowed investment interest expense from 2020 Form 4952, line 7 2 584,516 3 **Total investment interest expense.** Add lines 1 and 2 1,323,563 Part II **Net Investment Income** Gross income from property held for investment (excluding any net gain from 4a 4a 1,203,319 Qualified dividends included on line 4a 4b 1,002,410 4c 1,142,740 **d** Net gain from the disposition of property held for investment 4d 706,034 Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions 4e 651,152 4f f 380,934 Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 113,364 1,172,440 h 4h 335,860 5 5 **Net investment income.** Subtract line 5 from line 4h. If zero or less, enter -0-. 6 1,132,973 6 Part III **Investment Interest Expense Deduction** 7 Disallowed investment interest expense to be carried forward to 2022. Subtract line 6 from line 7 634.518

Cat. No. 13177Y

Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions

For Paperwork Reduction Act Notice, see page 4.

Investment Interest Expense Deduction

▶ Go to www.irs.gov/Form4952 for the latest information. ► Attach to your tax return.

OMB No. 1545-0191

Form **4952** (2021)

Department of the Treasury Attachment Sequence No. 51 Internal Revenue Service (99) Identifying number Name(s) shown on return **Total Forms Filed =** 1,327,589 Part I **Total Investment Interest Expense** 1 Investment interest expense paid or accrued in 2021 (see instructions) 25,425,286 2 Disallowed investment interest expense from 2020 Form 4952, line 7 2 36,163,418 3 61,588,703 Part II **Net Investment Income** Gross income from property held for investment (excluding any net gain from 4a 190,147,338 4a Qualified dividends included on line 4a 104,019,150 4c 86,128,188 **d** Net gain from the disposition of property held for investment 700,236,638 Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions 607,906,275 4f f 92,330,363 Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 5,404,137 183,862,688 h 4h 8,598,891 5 5 **Net investment income.** Subtract line 5 from line 4h. If zero or less, enter -0- 176,431,756 6 Part III **Investment Interest Expense Deduction** 7 Disallowed investment interest expense to be carried forward to 2022. Subtract line 6 from line 7 37.164.796 24,423,907 Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions 8

Cat. No. 13177Y

23

24

25

2021 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Department of the Treasury

Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

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

Attachment Sequence No. **29**

OMB No. 1545-0074

Internal Revenue Service (99) ► Go to www.irs.gov/Form5329 for instructions and the latest information. Name of individual subject to additional tax. If married filing jointly, see instructions. Your social security number Total Forms Filed = 2.551.270 Home address (number and street), or P.O. box if mail is not delivered to your home Apt. no. Fill in Your Address Only City, town or post office, state, and ZIP code. If you have a foreign address, also complete the if You Are Filing This spaces below. See instructions. If this is an amended Form by Itself and Not return, check here ▶ With Your Tax Return Foreign postal code Foreign country name Foreign province/state/county If you only owe the additional 10% tax on the full amount of the early distributions, you may be able to report this tax directly on Schedule 2 (Form 1040), line 8, without filing Form 5329. See instructions. Part I Additional Tax on Early Distributions. Complete this part if you took a taxable distribution (other than a qualified disaster distribution) before you reached age 591/2 from a qualified retirement plan (including an IRA) or modified endowment contract (unless you are reporting this tax directly on Schedule 2 (Form 1040) - see above). You may also have to complete this part to indicate that you qualify for an exception to the additional tax on early distributions or for certain Roth IRA distributions. See instructions. Early distributions includible in income (see instructions). For Roth IRA distributions, see instructions. 1,556,847 Early distributions included on line 1 that are not subject to the additional tax (see instructions). 2 Enter the appropriate exception number from the instructions: _____ 2 607,967 3 3 1,151,337 Additional tax. Enter 10% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040), line 8 . . . 4 1,142,430 Caution: If any part of the amount on line 3 was a distribution from a SIMPLE IRA, you may have to include 25% of that amount on line 4 instead of 10%. See instructions. Part II Additional Tax on Certain Distributions From Education Accounts and ABLE Accounts. Complete this part if you included an amount in income, on Schedule 1 (Form 1040), line 8z, from a Coverdell education savings account (ESA) or a qualified tuition program (QTP), or on Schedule 1 (Form 1040), line 8p, from an ABLE account. 5 Distributions included in income from a Coverdell ESA, a QTP, or an ABLE account 259,875 6 Distributions included on line 5 that are not subject to the additional tax (see instructions) 6 7 7 173.811 8 Additional tax. Enter 10% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040), line 8. 8 170.335 Additional Tax on Excess Contributions to Traditional IRAs. Complete this part if you contributed more to your Part III traditional IRAs for 2021 than is allowable or you had an amount on line 17 of your 2020 Form 5329. 9 Enter your excess contributions from line 16 of your 2020 Form 5329. See instructions. If zero, go to line 15 If your traditional IRA contributions for 2021 are less than your maximum 10 allowable contribution, see instructions. Otherwise, enter -0- 10 11 2021 traditional IRA distributions included in income (see instructions) . . . 12 2021 distributions of prior year excess contributions (see instructions) . . . 12 13 13 14 14 Prior year excess contributions. Subtract line 13 from line 9. If zero or less, enter -0- 15 15 Total excess contributions. Add lines 14 and 15 16 16 32,872 Additional tax. Enter 6% (0.06) of the smaller of line 16 or the value of your traditional IRAs on December 31, 2021 (including 2021 contributions made in 2022). Include this amount on Schedule 2 (Form 1040), line 8 17 Part IV Additional Tax on Excess Contributions to Roth IRAs. Complete this part if you contributed more to your Roth IRAs for 2021 than is allowable or you had an amount on line 25 of your 2020 Form 5329. Enter your excess contributions from line 24 of your 2020 Form 5329. See instructions. If zero, go to line 23 18 18 61,646 19 If your Roth IRA contributions for 2021 are less than your maximum allowable 19 20 2021 distributions from your Roth IRAs (see instructions) 21 21 Prior year excess contributions. Subtract line 21 from line 18. If zero or less, enter -0-. . .

66,175

105,712

Excess contributions for 2021 (see instructions)

Additional tax. Enter 6% (0.06) of the smaller of line 24 or the value of your Roth IRAs on December 31, 2021 (including 2021 contributions made in 2022). Include this amount on Schedule 2 (Form 1040), line 8

23

24

Department of the Treasury Internal Revenue Service (99)

Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts

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

▶ Go to www.irs.gov/Form5329 for instructions and the latest information.

OMB No. 1545-0074 Attachment Sequence No. **29**

Name o	f individual subject to additional t	ax. If married filing jointly, see instructions. Total Forms F	led = 2,551,2	270	Your soci	ial security number
		Home address (number and street), or P.O. b	ox if mail is not delivere	d to your home		Apt. no.
if You Form	Your Address Only Are Filing This by Itself and Not Your Tax Return	City, town or post office, state, and ZIP code. spaces below. See instructions.	If this is an amended return, check here ▶ □			
willi	rour rax neturn y	Foreign country name	Foreign province/s	state/county	· ·	ostal code
		10% tax on the full amount of the ewithout filing Form 5329. See instruction		you may be able to r	eport this	s tax directly on
Part	disaster distribution endowment contract have to complete t	on Early Distributions. Complete n) before you reached age 59½ froct (unless you are reporting this tax his part to indicate that you qualify the stributions. See instructions.	om a qualified redirectly on Sched	etirement plan (includ dule 2 (Form 1040)—se	ing an II ee above	RA) or modified e). You may also
1		ible in income (see instructions). For			1	25,676,915
2		ed on line 1 that are not subject to th	•	ee instructions).		
•		ception number from the instructions			2	9,124,823
3		onal tax. Subtract line 2 from line 1 % (0.10) of line 3. Include this amoun			3	16,540,898
4		% (0.10) of line 3. Include this amount ne amount on line 3 was a distribution	,	**		1,664,968
	, ,	ount on line 4 instead of 10%. See ins		ina, you may have to		
Part 5	if you included an (ESA) or a qualified	n Certain Distributions From Edamount in income, on Schedule 1 (Intuition program (QTP), or on Schedulincome from a Coverdell ESA, a QTP	Form 1040), line 8 e 1 (Form 1040), li	z, from a Coverdell ed ne 8p, from an ABLE a	lucation	
6		line 5 that are not subject to the add			6	943,469
7		onal tax. Subtract line 6 from line 5	•	•	7	610,703
8	-	% (0.10) of line 7. Include this amoun			8	61,078
Part		n Excess Contributions to Trad		•	contribut	
	traditional IRAs for	2021 than is allowable or you had an	amount on line 17	of your 2020 Form 53	29.	
9	Enter your excess contrib	utions from line 16 of your 2020 Form 5	329. See instruction	ons. If zero, go to line 15	9	
10	allowable contribution, se	contributions for 2021 are less that ee instructions. Otherwise, enter -0-		10		
11		ributions included in income (see inst	•	11		
12		or year excess contributions (see instr		12		
13					13	
14		outions. Subtract line 13 from line 9. If			14 15	
15 16		2021 (see instructions)			16	710,441
17		(0.06) of the smaller of line 16 or the				7 10,44 1
.,		ontributions made in 2022). Include this			17	40,339
Part		on Excess Contributions to Rotl			buted mo	
	IRAs for 2021 than	is allowable or you had an amount or	line 25 of your 20	20 Form 5329.		
18	Enter your excess contrib	utions from line 24 of your 2020 Form	329. See instruction	ons. If zero, go to line 23	18	267,367
19	•	utions for 2021 are less than your ma				
		tions. Otherwise, enter -0		19		
20	-	our Roth IRAs (see instructions) .		20 43,745	- 04	
21					21	
22 23	-	outions. Subtract line 21 from line 18. 2021 (see instructions)			23	306 330
23 24		ns. Add lines 22 and 23			24	306,339 522,285
2 4 25		(0.06) of the smaller of line 24 or the				J22,20J
20		tributions made in 2022). Include this a			25	27,377
For Pr		eduction Act Notice, see your tax return				Form 5329 (2021)

2021 Line Item Estimates—All figures are estimates based on samples.

		Number of returns filed for selected lines			
Form 53	`	,			Page 2
Part '		Additional Tax on Excess Contributions to Coverdell ESAs. Complete this	•		•
		Coverdell ESAs for 2021 were more than is allowable or you had an amount on line 33 of the control of the contr			n 5329.
26		the excess contributions from line 32 of your 2020 Form 5329. See instructions. If zero, go	to line 31	26	
27		contributions to your Coverdell ESAs for 2021 were less than the			
		num allowable contribution, see instructions. Otherwise, enter -0 27		_	
28		distributions from your Coverdell ESAs (see instructions)			
29		nes 27 and 28		29	
30		year excess contributions. Subtract line 29 from line 26. If zero or less, enter -0		30	
31		s contributions for 2021 (see instructions)		31	*
32		excess contributions. Add lines 30 and 31		32	"
33		ional tax. Enter 6% (0.06) of the smaller of line 32 or the value of your Coverdell			
		mber 31, 2021 (including 2021 contributions made in 2022). Include this amount on S			*
Part \		1040), line 8		33	
rait		nore to your Archer MSAs for 2021 than is allowable or you had an amount on line 41 o			
34		the excess contributions from line 40 of your 2020 Form 5329. See instructions. If zero, go			11 3329.
) to line 3	, 34	
35		contributions to your Archer MSAs for 2021 are less than the maximum able contribution, see instructions. Otherwise, enter -0			
36		distributions from your Archer MSAs from Form 8853, line 8		\dashv	
37		nes 35 and 36		37	
38		/ear excess contributions. Subtract line 37 from line 34. If zero or less, enter -0		38	
39		s contributions for 2021 (see instructions)		39	
40		excess contributions. Add lines 38 and 39		40	8,457
41		ional tax. Enter 6% (0.06) of the smaller of line 40 or the value of your Archer			0,107
71		mber 31, 2021 (including 2021 contributions made in 2022). Include this amount on S			
		1040), line 8		41	6.638
Part \		Additional Tax on Excess Contributions to Health Savings Accounts (H			- 1
		someone on your behalf, or your employer contributed more to your HSAs for 202	•		•
		amount on line 49 of your 2020 Form 5329.			•
42	Enter	the excess contributions from line 48 of your 2020 Form 5329. If zero, go to line 47 .		42	
43	If the	contributions to your HSAs for 2021 are less than the maximum			
		able contribution, see instructions. Otherwise, enter -0			
44	2021	distributions from your HSAs from Form 8889, line 16			
45	Add li	nes 43 and 44		45	
46	Prior	/ear excess contributions. Subtract line 45 from line 42. If zero or less, enter -0		46	
47	Exces	s contributions for 2021 (see instructions)		47	
48	Total	excess contributions. Add lines 46 and 47		48	519,510
49	Addit	onal tax. Enter 6% (0.06) of the smaller of line 48 or the value of your HSAs on Dec	ember 31	,	
	2021	including 2021 contributions made in 2022). Include this amount on Schedule 2 (Form 10	40), line 8	49	392,643
Part V	Ш .	Additional Tax on Excess Contributions to an ABLE Account. Complete this	s part if co	ontribut	ions to your ABLE
		account for 2021 were more than is allowable.			
50		s contributions for 2021 (see instructions)		50	*
51		ional tax. Enter 6% (0.06) of the smaller of line 50 or the value of your ABLE ac			
		nber 31, 2021. Include this amount on Schedule 2 (Form 1040), line 8		51	*
Part I		Additional Tax on Excess Accumulation in Qualified Retirement Plans (Inc	•	RAs).	Complete this part
		f you did not receive the minimum required distribution from your qualified retirement p			T
52		num required distribution for 2021 (see instructions)		52	
53		nt actually distributed to you in 2021		53	
54		act line 53 from line 52. If zero or less, enter -0		54	8.350
55	Addıt	ional tax. Enter 50% (0.50) of line 54. Include this amount on Schedule 2 (Form 1040),		55	8,350
		nly if You Under penalties of perjury, I declare that I have examined this form, including accompanying attact belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all in	chments, and formation of	to the be which prep	st of my knowledge and oarer has any knowledge.
		iis Form		. ,	
Your T		Not With turn	Deta		
- Jul 1	יייייייייייייייייייייייייייייייייייייי		Date		DTIN
Paid		Print/Type preparer's name Preparer's signature Date		k if employed	PTIN
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Form **5329** (2021)

Phone no.

Firm's address ▶

	329 (202	1)				Page 2
Part		Additional Tax on Excess Contributions to Coverdell ESAs. Complete t				
		Coverdell ESAs for 2021 were more than is allowable or you had an amount on line 3				1 5329.
26		the excess contributions from line 32 of your 2020 Form 5329. See instructions. If zero, or approximate to your Countries of the contributions to your Countries of the contributions to your Countries of the contributions to your Countries of the contributions to your Countries of the contributions to your Countries of the contributions to your Countries of the contributions f the contribution of the contribution	go to iin	e 31	26	
27		contributions to your Coverdell ESAs for 2021 were less than the num allowable contribution, see instructions. Otherwise, enter -0 27				
28		distributions from your Coverdell ESAs (see instructions)				
29		ines 27 and 28			29	
30		year excess contributions. Subtract line 29 from line 26. If zero or less, enter -0			30	
31	Exces	ss contributions for 2021 (see instructions)		🗆	31	
32	Total	excess contributions. Add lines 30 and 31		🗆	32	*
33	Addit	ional tax. Enter 6% (0.06) of the smaller of line 32 or the value of your Coverd	ell ESA	s on		
	Dece	mber 31, 2021 (including 2021 contributions made in 2022). Include this amount on	Sched	ule 2		
		n 1040), line 8			33	*
Part		Additional Tax on Excess Contributions to Archer MSAs. Complete this par	-	-		•
		more to your Archer MSAs for 2021 than is allowable or you had an amount on line 4				1 5329.
34		the excess contributions from line 40 of your 2020 Form 5329. See instructions. If zero,	go to IIr	ne 39	34	
35		contributions to your Archer MSAs for 2021 are less than the maximum				
36		able contribution, see instructions. Otherwise, enter -0				
37		ines 35 and 36			37	
38		year excess contributions. Subtract line 37 from line 34. If zero or less, enter -0			38	
39		ss contributions for 2021 (see instructions)		-	39	
40		excess contributions. Add lines 38 and 39		<u> </u>	40	43,172
41		ional tax. Enter 6% (0.06) of the smaller of line 40 or the value of your Arche				
		mber 31, 2021 (including 2021 contributions made in 2022). Include this amount on				
		n 1040), line 8			41	563
Part	VII	Additional Tax on Excess Contributions to Health Savings Accounts	(HSAs). Comp	olete	this part if you,
		someone on your behalf, or your employer contributed more to your HSAs for 20	121 tha	n is allo	wab	le or you had an
		amount on line 49 of your 2020 Form 5329.				
42		the excess contributions from line 48 of your 2020 Form 5329. If zero, go to line 47		📙	42	
43		e contributions to your HSAs for 2021 are less than the maximum				
		able contribution, see instructions. Otherwise, enter -0				
44 45		distributions from your HSAs from Form 8889, line 16			AE.	
45 46		ines 43 and 44			45 46	
47		ss contributions for 2021 (see instructions)		-	47	
48		excess contributions. Add lines 46 and 47			48	1,084,190
49		ional tax. Enter 6% (0.06) of the smaller of line 48 or the value of your HSAs on De				1,004,100
10		(including 2021 contributions made in 2022). Include this amount on Schedule 2 (Form 1			49	40,652
Part '		Additional Tax on Excess Contributions to an ABLE Account. Complete the			ibuti	·
		account for 2021 were more than is allowable.	•			•
50	Exces	ss contributions for 2021 (see instructions)			50	*
51		tional tax. Enter 6% (0.06) of the smaller of line 50 or the value of your ABLE				
		mber 31, 2021. Include this amount on Schedule 2 (Form 1040), line 8			51	*
Part		Additional Tax on Excess Accumulation in Qualified Retirement Plans (In		ng IRA	s). C	Complete this part
		if you did not receive the minimum required distribution from your qualified retirement				
52		num required distribution for 2021 (see instructions)			52	
53		ant actually distributed to you in 2021			53	44.004
54 55		act line 53 from line 52. If zero or less, enter -0			54 55	11,381
55		Under populties of periory. I dealers that I have examined this form, including accompanying at				5,692
		only if You belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all	informati	on of which	prepa	arer has any knowledge.
		I Not With				
	Tax Re		Dat	te		
Deid		Print/Type preparer's name Preparer's signature Date		Check	if	PTIN
Paid				self-emplo		
-	oarer Only	Firm's name ▶	Firm's	EIN ▶		
<u> </u>	Citiy	Firm's address ▶	Phone	no.		
						Form 5329 (2021)

^{*} Data not shown because of the small number of sample returns on which they are based.

Department of the Treasury Internal Revenue Service

Repayment of the First-Time
Homebuyer Credit

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

Go to www.irs.gov/Form5405 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. **58**

Name shown on return

75,184 Total Forms Filed =

Your social security number

Par	Disposition or Change in Use of Main Home for Which the Credit Was Claimed				
1	Enter the date you disposed of, or ceased using as your main home, the home for which you claimed the credit (MM/DD/YYYY). See instructions	ne • •			
2	If you meet the following conditions, check here				
	I (or my spouse if married) am, or was, a member of the uniformed services or Foreign Service, or an employee of the intelligence community. I sold the home, or it ceased to be my main home, in connection with U.S. Government orders for qualified official extended duty service. No repayment of the credit is required. See instructions. Stop here.				
3	Check the box below that applies to you. See the instructions for the definition of "related person."				
а	☐ I sold (including through foreclosure) the home to a person who isn't related to me and had a gain on the below). Go to Part II below.	sale (a	s figured in Part III		
b	I sold (including through foreclosure) the home to a person who isn't related to me and didn't have a gain Part III below). No repayment of the credit is required. Stop here.	on the	sale (as figured in		
С	☐ I sold the home to a related person OR I gave the home to someone other than my spouse (or ex-spou settlement). Go to Part II below.	se as	part of my divorce		
d	☐ I converted the entire home to a rental or business use OR I still own the home but no longer use it as my below.	main h	nome. Go to Part II		
е	☐ I transferred the home to my spouse (or ex-spouse as part of my divorce settlement). The full name of my	ex-spc	ouse is 🕨		
	The responsibility for repayment of the credit is transferred to your spouse or ex-spouse. Stop here.				
f	My home was destroyed, condemned, or sold under threat of condemnation and I had a gain. See instruct		***		
g h	✓ My home was destroyed, condemned, or sold under threat of condemnation and I didn't have a gain. See✓ The taxpayer who claimed the credit died in 2021. No repayment of the credit is required of the deceased				
"	a joint return for 2021 with the deceased taxpayer, see instructions. Otherwise, stop here.	iaxpa	yer. II you are illing		
Part	Repayment of the Credit				
4	Enter the amount of the credit you claimed on Form 5405 for 2008. See instructions if you filed a joint return for 2008 or you checked the box on line 3f or 3g	4	46,398		
5	Enter the amount of the credit you repaid with your tax returns for the years 2010 through 2020	5	43,102		
6	Subtract line 5 from line 4. If you checked the box on line 3f or 3g, see instructions. If you checked the box on line 3a, go to line 7. Otherwise, skip line 7 and go to line 8	6	45,353		
7	Enter the gain on the disposition of your main home (from line 15 below)	7	7,765		
8	Amount of the credit to be repaid. See instructions	8	59,752		
3. 1	Next: Enter the amount from line 8 on your 2021 Schedule 2 (Form 1040), line 10.				
Part	,				
hroug เทd 1:	Complete this part only if your home was destroyed or you sold your home to someone who isn't related the condemnation or under threat of condemnation). See Pub. 523, Selling Your Home, for information on what 2. But if you sold your home through condemnation, see chapter 1 in Pub. 544, Sales and Other Dispositions of the enter on lines 9 and 10.	t to er	nter on lines 9, 10,		
9	Selling price of home, insurance proceeds, or gross condemnation award	9	10,491		
10	Selling expenses (including commissions, advertising and legal fees, and seller-paid loan charges) or expenses in getting the condemnation award	10	9,488		
11	Subtract line 10 from line 9. This is the amount realized on the sale of the home	11	10,491		
12	Adjusted basis of home sold (see instructions)	12	9,593		
13	Enter the first-time homebuyer credit claimed on Form 5405 minus the amount of the credit you repaid with your tax returns for the years 2010 through 2020	13	8,638		
14	Subtract line 13 from line 12. This is the adjusted basis for purposes of repaying the credit	14	9,530		
15	Subtract line 14 from line 11	15	9,495		
	• If line 15 is more than -0-, you have a gain. Check the box on line 3a and complete Part II. However, check the box on line 3f (instead of the box on line 3a) if your home was destroyed or you sold the home through condemnation or under threat of condemnation. Then complete Part II if the event occurred in 2019.				
	• If line 15 is -0- or less, check the box on line 3b. However, if your home was destroyed or you sold the home through condemnation or under threat of condemnation, check the box on line 3g instead. You don't have to repay the credit.				

Cat. No. 11880I

Form **5405**(Rev. November 2021)
Department of the Treasury
Internal Revenue Service

Repayment of the First-Time Homebuyer Credit

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

► Go to www.irs.gov/Form5405 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. **58**

Name shown on return

Total Forms Filed = 75.184

Your social security number

	. 5					
Part	Disposition or Change in Use of Main Home for Which the Credit Was Claimed					
1	Enter the date you disposed of, or ceased using as your main home, the home for which you claimed the credit (MM/DD/YYYY). See instructions	ne ▶				
2	If you meet the following conditions, check here		🕨 🗌			
	I (or my spouse if married) am, or was, a member of the uniformed services or Foreign Service, or an employee of the intelligence community. I sold the home, or it ceased to be my main home, in connection with U.S. Government orders for qualified official extended duty service. No repayment of the credit is required. See instructions. Stop here.					
3	Check the box below that applies to you. See the instructions for the definition of "related person."					
а	I sold (including through foreclosure) the home to a person who isn't related to me and had a gain on the below). Go to Part II below.	sale (a	s figured in Part III			
b	I sold (including through foreclosure) the home to a person who isn't related to me and didn't have a gain Part III below). No repayment of the credit is required. Stop here.	on the	sale (as figured in			
С	☐ I sold the home to a related person OR I gave the home to someone other than my spouse (or ex-spous settlement). Go to Part II below.	se as	part of my divorce			
d	☐ I converted the entire home to a rental or business use OR I still own the home but no longer use it as my below.	main I	nome. Go to Part II			
е	☐ I transferred the home to my spouse (or ex-spouse as part of my divorce settlement). The full name of my expouse (or ex-spouse as part of my divorce settlement).	ex-spo	ouse is >			
f g h	The responsibility for repayment of the credit is transferred to your spouse or ex-spouse. Stop here. My home was destroyed, condemned, or sold under threat of condemnation and I had a gain. See instruct My home was destroyed, condemned, or sold under threat of condemnation and I didn't have a gain. See The taxpayer who claimed the credit died in 2021. No repayment of the credit is required of the deceased a joint return for 2021 with the deceased taxpayer, see instructions. Otherwise, stop here.	instrud				
Part						
4	Enter the amount of the credit you claimed on Form 5405 for 2008. See instructions if you filed a joint return for 2008 or you checked the box on line 3f or 3g	4	296,000			
5	Enter the amount of the credit you repaid with your tax returns for the years 2010 through 2020	5	173,957			
6	Subtract line 5 from line 4. If you checked the box on line 3f or 3g, see instructions. If you checked the box on line 3a, go to line 7. Otherwise, skip line 7 and go to line 8	6	122,042			
7	Enter the gain on the disposition of your main home (from line 15 below)	7	738,088			
8	Amount of the credit to be repaid. See instructions	8	38,678			
Dout	Next: Enter the amount from line 8 on your 2021 Schedule 2 (Form 1040), line 10.					
Part	,					
hroug and 12	Complete this part only if your home was destroyed or you sold your home to someone who isn't related h condemnation or under threat of condemnation). See Pub. 523, Selling Your Home, for information on wha 2. But if you sold your home through condemnation, see chapter 1 in Pub. 544, Sales and Other Dispositions out to enter on lines 9 and 10.	t to er	nter on lines 9, 10, ets, for information			
9	Selling price of home, insurance proceeds, or gross condemnation award	9	2,624,970			
10	Selling expenses (including commissions, advertising and legal fees, and seller-paid loan charges) or expenses in getting the condemnation award	40	404.050			
44	Subtract line 10 from line 9. This is the amount realized on the sale of the home	10 11	191,652			
11 12	Adjusted basis of home sold (see instructions)	12	2,433,318 1,734,254			
13	Enter the first-time homebuyer credit claimed on Form 5405 minus the amount of the credit you repaid with	12	1,704,204			
	your tax returns for the years 2010 through 2020	13	12,229			
14	Subtract line 13 from line 12. This is the adjusted basis for purposes of repaying the credit	14	1,722,025			
15	Subtract line 14 from line 11	15	711,292			
	• If line 15 is more than -0-, you have a gain. Check the box on line 3a and complete Part II. However, check the box on line 3f (instead of the box on line 3a) if your home was destroyed or you sold the home through condemnation or under threat of condemnation. Then complete Part II if the event occurred in 2019.					
	• If line 15 is -0- or less, check the box on line 3b. However, if your home was destroyed or you sold the home through condemnation or under threat of condemnation, check the box on line 3g instead. You don't have to repay the credit.					

Form **5695**

Department of the Treasury Internal Revenue Service **Residential Energy Credits**

► Go to www.irs.gov/Form5695 for instructions and the latest information.

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

OMB No. 1545-0074

2021

Attachment
Sequence No. 158

Name(s) shown on return

Total Forms Filed = 2,736,596

Par	Residential Energy Efficient Property Credit (See instructions bef	ore c	ompletino	g this p	art.)	
Note	: Skip lines 1 through 11 if you only have a credit carryforward from 202	0.				
1	Qualified solar electric property costs				1	730,422
2	Qualified solar water heating property costs				2	109,032
3	Qualified small wind energy property costs				3	32,297
4	Qualified geothermal heat pump property costs				4	53,396
5	Qualified biomass fuel property costs				5	42,265
6a	Add lines 1 through 5				6a	866,834
b	Multiply line 6a by 26% (0.26)				6b	866,834
7a	Qualified fuel cell property. Was qualified fuel cell property installed on, or in main home located in the United States? (See instructions.)				7a	☐ Yes ☐ No
	Caution: If you checked the "No" box, you cannot take a credit for qualified folines 7b through 11.	uel ce	ll property	. Skip		
b	Print the complete address of the main home where you installed the fuel cell pro-	operty	·.			
	Number and street		Unit 1	No.		
	City, State, and ZIP code	1 1	<u> </u>			
8	Qualified fuel cell property costs	8	16,091			
9	Multiply line 8 by 26% (0.26)	9	16,091			
10	Kilowatt capacity of property on line 8 above ▶ x \$1,000	10	19,681			
11	Enter the smaller of line 9 or line 10				11	15,062
12	Credit carryforward from 2020. Enter the amount, if any, from your 2020 Form 56	895, lir	ne 16 .		12	391,722
13	Add lines 6b, 11, and 12				13	1,216,456
14	Limitation based on tax liability. Enter the amount from the Residential Ene Credit Limit Worksheet (see instructions)			-	14	1,229,981
15	Residential energy efficient property credit. Enter the smaller of line 13 or line amount on Schedule 3 (Form 1040), line 5				15	1,095,570
16	Credit carryforward to 2022. If line 15 is less than line 13, subtract line 15 from line 13	16	475,765	i		
						

Form **5695**

Department of the Treasury Internal Revenue Service

Residential Energy Credits

► Go to www.irs.gov/Form5695 for instructions and the latest information.

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

OMB No. 1545-0074

2021

Attachment Sequence No. 158

Name(s) shown on return

Total Forms Filed = 2,736,596

Sequence No. 158
Your social security number

Part	Residential Energy Efficient Property Credit (See instructions before completing this p	art.)	
Note:	Skip lines 1 through 11 if you only have a credit carryforward from 2020.		
1	Qualified solar electric property costs	1	19,313,575
2	Qualified solar water heating property costs	2	671,099
3	Qualified small wind energy property costs	3	148,820
4	Qualified geothermal heat pump property costs	4	498,530
5	Qualified biomass fuel property costs	5	257,281
6a	Add lines 1 through 5	6a	20,889,305
b	Multiply line 6a by 26% (0.26)	6b	5,437,887
7a	Qualified fuel cell property. Was qualified fuel cell property installed on, or in connection with, your main home located in the United States? (See instructions.)	7a	☐ Yes ☐ No
	Caution: If you checked the "No" box, you cannot take a credit for qualified fuel cell property. Skip lines 7b through 11.		
b	Print the complete address of the main home where you installed the fuel cell property.		
	Number and street Unit No.		
	City, State, and ZIP code		
8	Qualified fuel cell property costs 8 242,915		
9	Multiply line 8 by 26% (0.26)		
10	Kilowatt capacity of property on line 8 above ▶ x \$1,000 10 496,798		
11	Enter the smaller of line 9 or line 10	11	60,020
12	Credit carryforward from 2020. Enter the amount, if any, from your 2020 Form 5695, line 16	12	1,782,061
13	Add lines 6b, 11, and 12	13	7,279,968
14	Limitation based on tax liability. Enter the amount from the Residential Energy Efficient Property Credit Limit Worksheet (see instructions)	14	29,672,105
15	Residential energy efficient property credit. Enter the smaller of line 13 or line 14. Also include this amount on Schedule 3 (Form 1040), line 5	15	4,885,747
16	Credit carryforward to 2022. If line 15 is less than line 13, subtract line 15 from line 13		
For Pa	perwork Reduction Act Notice, see your tax return instructions. Cat. No. 13540P		Form 5695 (2021)

Form 5695 (2021) Page **2**

Par	Nonbusiness Energy Property Credit		
17a	Were the qualified energy efficiency improvements or residential energy property costs for your main home located in the United States? (see instructions)	17a	☐ Yes ☐ No
	Caution: If you checked the "No" box, you cannot claim the nonbusiness energy property credit. Do not complete Part II.		
b	Print the complete address of the main home where you made the qualifying improvements.		
	Caution: You can only have one main home at a time.		
	Number and street Unit No.		
	City, State, and ZIP code		
С	Were any of these improvements related to the construction of this main home?	17c	☐ Yes ☐ No
	Caution: If you checked the "Yes" box, you can only claim the nonbusiness energy property credit for qualifying improvements that were not related to the construction of the home. Do not include expenses related to the construction of your main home, even if the improvements were made after you moved into the home.		
18	Lifetime limitation. Enter the amount from the Lifetime Limitation Worksheet (see instructions)	18	315,560
19	Qualified energy efficiency improvements (original use must begin with you and the component must reasonably be expected to last for at least 5 years; do not include labor costs) (see instructions).		
а	Insulation material or system specifically and primarily designed to reduce heat loss or gain of your home that meets the prescriptive criteria established by the 2009 IECC	19a	451,716
b	Exterior doors that meet or exceed the version 6.0 Energy Star program requirements	19b	353,178
c	Metal or asphalt roof that meets or exceeds the Energy Star program requirements and has appropriate		555,115
J	pigmented coatings or cooling granules which are specifically and primarily designed to reduce the heat gain of your home		205,311
d	Exterior windows and skylights that meet or exceed the version 6.0 Energy Star program requirements		
е	Maximum amount of cost on which the credit can be figured 19e \$2,000)	
f	If you claimed window expenses on your Form 5695 prior to 2021, enter the amount from the Window Expense Worksheet (see instructions); otherwise		
	enter -0	4	
g	Subtract line 19f from line 19e. If zero or less, enter -0	401	404
h 20	Enter the smaller of line 19d or line 19g	19h 20	491,576
21	Multiply line 20 by 10% (0.10)	21	1,094,320 1,094,218
22	Residential energy property costs (must be placed in service by you; include labor costs for onsite preparation, assembly, and original installation) (see instructions).		1,034,210
а	Energy-efficient building property. Do not enter more than \$300	22a	379,484
b	Qualified natural gas, propane, or oil furnace or hot water boiler. Do not enter more than \$150	22b	474,785
С	Advanced main air circulating fan used in a natural gas, propane, or oil furnace. Do not enter more than \$50	22c	152,193
23	Add lines 22a through 22c	23	810,982
24	Add lines 21 and 23	24	1,650,046
25	Maximum credit amount. (If you jointly occupied the home, see instructions)	25	\$500
26	Enter the amount, if any, from line 18	26	
27	Subtract line 26 from line 25. If zero or less, stop ; you cannot take the nonbusiness energy property credit	27	1,821,981
28	Enter the smaller of line 24 or line 27	28	1,632,665
29	Limitation based on tax liability. Enter the amount from the Nonbusiness Energy Property Credit Limit Worksheet (see instructions)		1,002,000
30	Nonbusiness energy property credit. Enter the smaller of line 28 or line 29. Also include this amount		4 040 555
	on Schedule 3 (Form 1040), line 5	30	1,619,206

Form 5695 (2021) Page **2**

Par	Nonbusiness Energy Property Credit		
17a	Were the qualified energy efficiency improvements or residential energy property costs for your main		
	home located in the United States? (see instructions)	17a	☐ Yes ☐ No
	Caution: If you checked the "No" box, you cannot claim the nonbusiness energy property credit. Do not complete Part II.		
b	Print the complete address of the main home where you made the qualifying improvements.		
	Caution: You can only have one main home at a time.		
	Number and street Unit No.		
	City, State, and ZIP code		
С	Were any of these improvements related to the construction of this main home?	17c	☐ Yes ☐ No
	Caution: If you checked the "Yes" box, you can only claim the nonbusiness energy property credit for qualifying improvements that were not related to the construction of the home. Do not include expenses related to the construction of your main home, even if the improvements were made after you moved		
40	into the home.	10	422.000
18	Lifetime limitation. Enter the amount from the Lifetime Limitation Worksheet (see instructions)	18	132,060
19	Qualified energy efficiency improvements (original use must begin with you and the component must reasonably be expected to last for at least 5 years; do not include labor costs) (see instructions).		
а	Insulation material or system specifically and primarily designed to reduce heat loss or gain of your	10-	4 500 754
b	home that meets the prescriptive criteria established by the 2009 IECC	19a 19b	1,533,754 787,093
		190	707,093
С	Metal or asphalt roof that meets or exceeds the Energy Star program requirements and has appropriate pigmented coatings or cooling granules which are specifically and primarily designed to reduce the heat gain of your home	19c	1,895,180
d	Exterior windows and skylights that meet or exceed the version 6.0 Energy		
	Star program requirements		
е	Maximum amount of cost on which the credit can be figured		
f	If you claimed window expenses on your Form 5695 prior to 2021, enter the amount from the Window Expense Worksheet (see instructions); otherwise		
	enter -0-	_	
g h	Subtract line 19f from line 19e. If zero or less, enter -0	19h	814,923
20	Add lines 19a, 19b, 19c, and 19h	20	5,030,950
21	Multiply line 20 by 10% (0.10)	21	503,142
22	Residential energy property costs (must be placed in service by you; include labor costs for onsite preparation, assembly, and original installation) (see instructions).		000,142
а	Energy-efficient building property. Do not enter more than \$300	22a	112,306
b	Qualified natural gas, propane, or oil furnace or hot water boiler. Do not enter more than \$150	22b	70,809
С	Advanced main air circulating fan used in a natural gas, propane, or oil furnace. Do not enter more		
	than \$50	22c	7,519
23	Add lines 22a through 22c	23	190,635
24	Add lines 21 and 23	24	693,777
25	Maximum credit amount. (If you jointly occupied the home, see instructions)	25	\$500
26	Enter the amount, if any, from line 18	26	
27	Subtract line 26 from line 25. If zero or less, stop; you cannot take the nonbusiness energy property credit	27	0.47.004
28	Enter the smaller of line 24 or line 27	28	847,981 453,027
29	Limitation based on tax liability. Enter the amount from the Nonbusiness Energy Property Credit Limit		<u>433,UZ/</u>
-	Worksheet (see instructions)	29	
30	Nonbusiness energy property credit. Enter the smaller of line 28 or line 29. Also include this amount		
	on Schedule 3 (Form 1040), line 5	30	446,049
			Form 5695 (2021)

Form **5884**(Rev. March 2021)

Work Opportunity Credit

OMB No. 1545-0219

(Rev. March 2021) Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see separate instructions.

► Attach to your tax return.
 ► Go to www.irs.gov/Form5884 for instructions and the latest information.

Attachment Sequence No. **884**

Form **5884** (Rev. 3-2021)

Name(s) shown on return Identifying number Total Forms Filed = 14.811 Enter on the applicable line below the total qualified first- or second-year wages paid or incurred during the tax year, and multiply by the percentage shown, for services of employees who are certified as members of a targeted group. a Qualified first-year wages of employees who worked for \$____× 25% (0.25) 8,684 you at least 120 hours but fewer than 400 hours . . . **b** Qualified first-year wages of employees who worked for \$____× 40% (0.40) 1b 6,713 c Qualified second-year wages of employees certified as long-term family assistance recipients 1c 2,088 Add lines 1a, 1b, and 1c. See instructions for the adjustment you must make to your 2 10,115 3 Work opportunity credit from partnerships, S corporations, cooperatives, estates, and 3 4.877 Add lines 2 and 3. Cooperatives, estates, and trusts, go to line 5. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, stop here and 4 14,811 5 Amount allocated to patrons of the cooperative or beneficiaries of the estate or trust (see 5 Cooperatives, estates, and trusts, subtract line 5 from line 4. Report this amount on Form

Cat. No. 13570D

Work Opportunity Credit

OMB No. 1545-0219

(Rev. March 2021) ► Attach to your tax return. Attachment Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form5884 for instructions and the latest information. Sequence No. 884 Name(s) shown on return Identifying number Total Forms Filed = 14.811 Enter on the applicable line below the total qualified first- or second-year wages paid or incurred during the tax year, and multiply by the percentage shown, for services of employees who are certified as members of a targeted group. a Qualified first-year wages of employees who worked for \$____× 25% (0.25) you at least 120 hours but fewer than 400 hours . . . 20,190 **b** Qualified first-year wages of employees who worked for \$ × 40% (0.40) 1b 30,417 c Qualified second-year wages of employees certified as long-term family assistance recipients 1c 2,723 Add lines 1a, 1b, and 1c. See instructions for the adjustment you must make to your 2 2 53,330 3 Work opportunity credit from partnerships, S corporations, cooperatives, estates, and 3 32,730 4 Add lines 2 and 3. Cooperatives, estates, and trusts, go to line 5. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, stop here and 86,060 4 5 Amount allocated to patrons of the cooperative or beneficiaries of the estate or trust (see 5 Cooperatives, estates, and trusts, subtract line 5 from line 4. Report this amount on Form For Paperwork Reduction Act Notice, see separate instructions. Form **5884** (Rev. 3-2021) Cat. No. 13570D

Form **6251**

Alternative Minimum Tax—Individuals

OMB No. 1545-0074

2021

Attachment Sequence No. **32**

Department of the Treasury Internal Revenue Service (99) ► Go to www.irs.gov/Form6251 for instructions and the latest information.

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

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

Total Forms Filed = 5,749,454

Your social security number

	Total Forms Filed = 5,749,454		
Part	Alternative Minimum Taxable Income (See instructions for how to complete each li	ne.)	
1	Enter the amount from Form 1040 or 1040-SR, line 15, if more than zero. If Form 1040 or 1040-SR, line is zero, subtract line 14 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the reshere. (If less than zero, enter as a negative amount.)	sult	5,747,581
2a	If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from 1040 or 1040-SR, line 12a		5,726,940
b	Tax refund from Schedule 1 (Form 1040), line 1 or line 8z	. 2b	(180,348)
С	Investment interest expense (difference between regular tax and AMT)	. 2c	38,142
d	Depletion (difference between regular tax and AMT)	. 2d	22,078
е	Net operating loss deduction from Schedule 1 (Form 1040), line 8a. Enter as a positive amount		185,314
f	Alternative tax net operating loss deduction		(151,964)
g	Interest from specified private activity bonds exempt from the regular tax		
h	Qualified small business stock, see instructions		1-,000
i	Exercise of incentive stock options (excess of AMT income over regular tax income)		'
j	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)		
ı	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)		,-
m	Passive activities (difference between AMT and regular tax income or loss)	-	, , , , , , , , , , , , , , , , , , , ,
n	Loss limitations (difference between AMT and regular tax income or loss)		
0	Circulation costs (difference between regular tax and AMT)		1,1.00
р	Long-term contracts (difference between AMT and regular tax income)		10.011
q	Mining costs (difference between regular tax and AMT)		
r	Research and experimental costs (difference between regular tax and AMT)		+ ,
s t	Income from certain installment sales before January 1, 1987)
3	Other adjustments, including income-based related adjustments		895 126,961
4	Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4		120,901
4	more than \$752,800, see instructions.)		5,731,235
Part			0,701,200
5	Exemption.		
	IF your filing status is AND line 4 is not over THEN enter on line 5		
	Single or head of household \$ 523,600 \$ 73,600		
	Married filing jointly or qualifying widow(er) 1,047,200		
	Married filing separately	. 5	5,450,902
	If line 4 is over the amount shown above for your filing status, see instructions.		
6	Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9, a	ınd	
	11, and go to line 10	. 6	3,202,532
7	If 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		0.440.000
	16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the	. 7	3,143,266
	back and enter the amount from line 40 here.		
	 All others: If line 6 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result. 		
8	Alternative minimum tax foreign tax credit (see instructions)	. 8	1,405,532
9	Tentative minimum tax. Subtract line 8 from line 7	. 9	3,074,870
10	Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line	2	
	Subtract from the result Schedule 3 (Form 1040), line 1 and any negative amount reported on Form 89 line 14 (treated as a positive number). If zero or less, enter -0 If you used Schedule J to figure your tax Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line.	78, on See	4.050.000
	instructions	. 10	
11 For Po	AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040), line between Reduction Act Notice, see your tax return instructions. Cat. No. 13600G	e 1 11	Form 6251 (2021)
ı vı Fa	perwork Reduction Act Notice, see your tax return instructions. Cat. No. 13600G		1 01111 520 1 (2021)

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

Cat. No. 13600G

^{*} Data not shown because of the small number of sample returns on which they are based.

Form **6251**

Department of the Treasury Internal Revenue Service (99)

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.

2021
Attachment
Sequence No. 32

OMB No. 1545-0074

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

Total Forms Filed = 5,749,454

Your social security number

	Iotal Forms Filed = 5,749,454		
Par	Alternative Minimum Taxable Income (See instructions for how to complete each line.)		
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 line 14 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the result here. (If less than zero, enter as a negative amount.)	1	2,544,187,592
2 a	If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040 or 1040-SR, line 12a	2a	99,817,117
b	Tax refund from Schedule 1 (Form 1040), line 1 or line 8z	2b	(373,900)
С	Investment interest expense (difference between regular tax and AMT)	2c	637,606
d	Depletion (difference between regular tax and AMT)	2d	267,658
е	Net operating loss deduction from Schedule 1 (Form 1040), line 8a. Enter as a positive amount	2e	86,876,283
f	Alternative tax net operating loss deduction	2f	(33,760,211)
g	Interest from specified private activity bonds exempt from the regular tax	2g	969,640
h	Qualified small business stock, see instructions	2h	360,036
i	Exercise of incentive stock options (excess of AMT income over regular tax income)	2i	11,888,863
J	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	2j	167,061
k	Disposition of property (difference between AMT and regular tax gain or loss)	2k	-4,520,515
l m	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	2l 2m	-1,065,149 1,131,782
m n	Loss limitations (difference between AMT and regular tax income or loss)	2111 2n	-78,869
0	Circulation costs (difference between regular tax and AMT).	20	-10,176
р	Long-term contracts (difference between AMT and regular tax income)	2p	98,553
q	Mining costs (difference between regular tax and AMT)	2q	93,993
r	Research and experimental costs (difference between regular tax and AMT)	2r	-418,865
s	Income from certain installment sales before January 1, 1987	2s	(*)
t	Intangible drilling costs preference	2t	143,521
3	Other adjustments, including income-based related adjustments	3	-1,007,306
4 Part	` '	4	2,706,045,727
5	Exemption. IF your filing status is AND line 4 is not over THEN enter on line 5 Single or head of household \$ 523,600 \$ 73,600 Married filing jointly or qualifying widow(er) 1,047,200 114,600 Married filing separately 523,600 57,300 If line 4 is over the amount shown above for your filing status, see instructions.	5	517,255,478
6	Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9, and 11, and go to line 10	6	2,328,552,939
7	• If 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 AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.	7	543,960,095
	• All others: If line 6 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result.		
8 9	Alternative minimum tax foreign tax credit (see instructions)	9	22,884,881 521,159,728
10	Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result Schedule 3 (Form 1040), line 1 and any negative amount reported on Form 8978, line 14 (treated as a positive number). If zero or less, enter -0 If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line. See instructions	10	605,533,433
11	AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040), line 1	11	5,598,598
	perwork Reduction Act Notice, see your tax return instructions. Cat. No. 13600G	-	Form 6251 (2021)

* Data not shown because of the small number of sample returns on which they are based.

Form 6251 (2021) Page **2**

Part III Tax Computation Using Maximum Capital Gains Rates Complete Part III only if you are required to do so by line 7 or by the Foreign Earned Income Tax Worksheet in the instructions. Enter the amount from Form 6251, line 6. If you are filing Form 2555, enter the amount from line 3 of the 12 12 Enter the amount from line 4 of the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions 13 for Form 1040 or the amount from line 13 of the Schedule D Tax Worksheet in the Instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary). See instructions. If you are filing 13 2,680,894 14 Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary). See instructions. If you are filing Form 2555, see instructions for the amount to enter 457,347 If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from 15 line 13. Otherwise, add lines 13 and 14, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see 2,657,898 15 16 16 17 17 If line 17 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, 18 multiply line 17 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result ▶ 18 1,925,272 19 • \$80,800 if married filing jointly or qualifying widow(er), • \$40,400 if single or married filing separately, or 19 • \$54,100 if head of household. Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from 20 line 14 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter 20 21 21 22 22 23 Enter the **smaller** of line 21 or line 22. This amount is taxed at 0% 23 24 24 25 Enter: • \$445,850 if single, • \$250,800 if married filing separately, 25 • \$501,600 if married filing jointly or qualifying widow(er), or • \$473,750 if head of household. 26 Enter the amount from line 21 27 Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter 27 28 28 Subtract line 28 from line 25. If zero or less, enter -0- 29 29 30 30 1,791,225 31 31 32 If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33. 33 33 691,371 34 34 If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35. 35 35 36 36 317,438 37 37 38 38 If line 12 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 12 by 26% (0.26). 39 2,290,936 Otherwise, multiply line 12 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result 39 40 Enter the smaller of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7 40

Form 6251 (2021) Page **2**

Part	Tax Computation Using Maximum Capital Gains Rates Complete Part III only if you are required to do so by line 7 or by the Foreign Earned Income Tax Worksh	eet in	the instructions.
12	Enter the amount from Form 6251, line 6. If you are filing Form 2555, enter the amount from line 3 of the		
	worksheet in the instructions for line 7	12	
13	Enter the amount from line 4 of the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040 or the amount from line 13 of the Schedule D Tax Worksheet in the Instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary). See instructions. If you are filing Form 2555, see instructions for the amount to enter	13	1,259,946,538
14	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary). See instructions. If you are filing Form 2555, see instructions for the amount to enter	14	31,333,078
15	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see instructions for the amount to enter	15	1 290 700 640
16	Enter the smaller of line 12 or line 15	16	1,289,709,640
17	Subtract line 16 from line 12	17	
18	If line 17 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result	18	276,931,448
19	Enter:		
	• \$80,800 if married filing jointly or qualifying widow(er),		
	• \$40,400 if single or married filing separately, or	19	
	• \$54,100 if head of household.		
20	Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 14 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0 If you are filing Form 2555, see instructions for the amount to enter	20	
21	Subtract line 20 from line 19. If zero or less, enter -0-	21	
22	Enter the smaller of line 12 or line 13	22	
23	Enter the smaller of line 21 or line 22. This amount is taxed at 0%	23	
24	Subtract line 23 from line 22	24	
25	Enter:		
	• \$445,850 if single,		
	• \$250,800 if married filing separately,	25	
	 \$501,600 if married filing jointly or qualifying widow(er), or \$473,750 if head of household. 		
26	Enter the amount from line 21	26	
27	Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0 If you are filing Form 2555, see instructions for the amount to enter	27	
28	Add line 26 and line 27	28	
29	Subtract line 28 from line 25. If zero or less, enter -0-	29	
30	Enter the smaller of line 24 or line 29	30	
31	Multiply line 30 by 15% (0.15)	31	18,814,951
32	Add lines 23 and 30	32	
	If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33.		
33	Subtract line 32 from line 22	33	000 110 100
34	Multiply line 33 by 20% (0.20)	34	206,118,436
	If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35.		
35	Add lines 17, 32, and 33	35	
36 27	Subtract line 35 from line 12	36	5 406 920
37 39	Multiply line 36 by 25% (0.25)	37	5,406,830
38	Add lines 18, 31, 34, and 37	38	
39	If line 12 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 12 by 26% (0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result	39	607,791,123
40	Enter the smaller of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7	40	- 0054
			Form 6251 (2021)

Form **6252**

Department of the Treasury Internal Revenue Service

Installment Sale Income

► Attach to your tax return.

▶ Use a separate form for each sale or other disposition of property on the installment method.
 ▶ Go to www.irs.gov/Form6252 for the latest information.

OMB No. 1545-0228

2021

Attachment
Sequence No. 67

Name(s) shown on return Identifying number 461,165 Total Forms Filed = Description of property ► _____ 2a Date acquired (mm/dd/yyyy) ▶ **b** Date sold (mm/dd/yyyy) ▶ Was the property sold to a related party (see instructions) after May 14, 1980? If "No," skip line 4 3 Was the property you sold to a related party a marketable security? If "Yes," complete Part III, If "No." complete 4 Yes No Gross Profit and Contract Price. Complete this part for all years of the installment agreement. Selling price including mortgages and other debts. **Don't** include interest, whether stated or unstated 428,553 Mortgages, debts, and other liabilities the buyer assumed or took the property 6 7 7 Subtract line 6 from line 5 8 Cost or other basis of property sold 8 9 9 10 10 11 12 12 Income recapture from Form 4797, Part III (see instructions) 13 13 370,942 14 Subtract line 13 from line 5. If zero or less, don't complete the rest of this form. See instructions . . . 14 427,517 15 If the property described on line 1 above was your main home, enter the amount of your excluded 4,513 15 425,904 16 16 17 17 6,785 18 18 426,572 Part II **Installment Sale Income.** Complete this part for all years of the installment agreement. 19 Gross profit percentage (expressed as a decimal amount). Divide line 16 by line 18. (For years after 19 20 If this is the year of sale, enter the amount from line 17. Otherwise, enter -0- 20 1,317 21 Payments received during year (see instructions). Don't include interest, whether stated or unstated . 21 414,216 22 22 415,993 Payments received in prior years (see instructions). Don't include interest, 23 24 24 413,142 Enter the part of line 24 that is ordinary income under the recapture rules. See instructions 25 25 1,444 26 Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797. See instructions . . . 413.118 Related Party Installment Sale Income. Don't complete if you received the final payment this tax year. Part III Name, address, and taxpayer identifying number of related party ▶ 27 28 Did the related party resell or dispose of the property ("second disposition") during this tax year? If the answer to question 28 is "Yes," complete lines 30 through 37 below unless one of the following conditions is met. 29 Check the box that applies. The second disposition was more than 2 years after the first disposition (other than dispositions of marketable securities). If b ☐ The first disposition was a sale or exchange of stock to the issuing corporation. ☐ The second disposition was an involuntary conversion and the threat of conversion occurred after the first disposition. С The second disposition occurred after the death of the original seller or buyer. d ☐ It can be established to the satisfaction of the IRS that tax avoidance wasn't a principal purpose for either of the dispositions. е If this box is checked, attach an explanation. See instructions. Selling price of property sold by related party (see instructions) 30 30 31 31 32 32 33 Total payments received by the end of your 2021 tax year (see instructions) 33 34 34 Multiply line 34 by the gross profit percentage on line 19 for year of first sale 35 35 36 Enter the part of line 35 that is ordinary income under the recapture rules. See instructions . . . 36 0 Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797. See instructions . . . 37

* Data not shown because of the small number of sample returns on which they are based.

6252

Department of the Treasury Internal Revenue Service

Installment Sale Income

► Attach to your tax return.

▶ Use a separate form for each sale or other disposition of property on the installment method. ► Go to www.irs.gov/Form6252 for the latest information.

Attachment Sequence No. 67

OMB No. 1545-0228

Name(s) shown on return Identifying number Total Forms Filed = 461,165 Description of property ► **b** Date sold (mm/dd/yyyy) ▶ 2a Date acquired (mm/dd/yyyy) ▶ Was the property sold to a related party (see instructions) after May 14, 1980? If "No," skip line 4 3 Was the property you sold to a related party a marketable security? If "Yes," complete Part III. If "No." complete 4 Part I Gross Profit and Contract Price. Complete this part for all years of the installment agreement. 425.441.922 Selling price including mortgages and other debts. **Don't** include interest, whether stated or unstated 6 Mortgages, debts, and other liabilities the buyer assumed or took the property 7 7 8 Cost or other basis of property sold 8 9 9 10 10 11 12 Income recapture from Form 4797, Part III (see instructions) 13 106,706,745 13 14 Subtract line 13 from line 5. If zero or less, **don't** complete the rest of this form. See instructions . . . 318,735,176 15 If the property described on line 1 above was your main home, enter the amount of your excluded 680.477 15 16 16 318,043,411 17 685,385 17 18 422.521.657 Part II Installment Sale Income. Complete this part for all years of the installment agreement. 19 Gross profit percentage (expressed as a decimal amount). Divide line 16 by line 18. (For years after 19 20 20 If this is the year of sale, enter the amount from line 17. Otherwise, enter -0- 158,590 Payments received during year (see instructions). Don't include interest, whether stated or unstated . 21 21 89,643,300 22 89,901,878 Payments received in prior years (see instructions). Don't include interest, 23 24 24 70,573,776 Enter the part of line 24 that is ordinary income under the recapture rules. See instructions 25 25 283,571 26 Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797. See instructions . . . 70,290,205 Related Party Installment Sale Income. Don't complete if you received the final payment this tax year. Part III Name, address, and taxpayer identifying number of related party ▶ 27 28 If the answer to question 28 is "Yes," complete lines 30 through 37 below unless one of the following conditions is met. 29 Check the box that applies. The second disposition was more than 2 years after the first disposition (other than dispositions of marketable securities). If this box is checked, enter the date of disposition (mm/dd/yyyy) ▶ ☐ The first disposition was a sale or exchange of stock to the issuing corporation. h ☐ The second disposition was an involuntary conversion and the threat of conversion occurred after the first disposition. The second disposition occurred after the death of the original seller or buyer. d ☐ It can be established to the satisfaction of the IRS that tax avoidance wasn't a principal purpose for either of the dispositions. е If this box is checked, attach an explanation. See instructions. 30 Selling price of property sold by related party (see instructions) 30 31 31 32 32 33 Total payments received by the end of your 2021 tax year (see instructions) 33 34 34 Multiply line 34 by the gross profit percentage on line 19 for year of first sale 35 35 36 36 Enter the part of line 35 that is ordinary income under the recapture rules. See instructions . . . 0 Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797. See instructions . . . For Paperwork Reduction Act Notice, see page 4.

* Data not shown because of the small number of sample returns on which they are based.

Department of the Treasury Internal Revenue Service

Credit for Increasing Research Activities

► Attach to your tax return. ▶ Go to www.irs.gov/Form6765 for instructions and the latest information. OMB No. 1545-0619

Attachment Sequence No. 676

Name(s) shown on return

Total Forms Filed =

11,412

Identifying number

	on A-Regular Credit. Skip this section and go to Section B if you are electing or previously elected (are ative simplified credit.	nd are	e not revoking) the
	·	_	*
1	Certain amounts paid or incurred to energy consortia (see instructions)	1	*
2	Basic research payments to qualified organizations (see instructions) 2 Qualified organization base period amount	-	
3			*
4	Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Wages for qualified services (do not include wages used in figuring the work		
•	opportunity credit)	-	
6	Cost of supplies	-	
7	Rental or lease costs of computers (see instructions)	-	
8	Enter the applicable percentage of contract research expenses. See instructions 8	-	
9	Total qualified research expenses. Add lines 5 through 8	-	
10	Enter fixed-base percentage, but not more than 16% (0.16) (see instructions) 10 %	-	
11	Enter average annual gross receipts. See instructions	-	
12	Multiply line 11 by the percentage on line 10	_	
13	Subtract line 12 from line 9. If zero or less, enter -0		
14	Multiply line 9 by 50% (0.50)		
15	Enter the smaller of line 13 or line 14	15	2,511
16	Add lines 1, 4, and 15	16	2,528
17	Are you electing the reduced credit under section 280C? ▶ Yes ☐ No ☐		
	If "Yes," multiply line 16 by 15.8% (0.158). If "No," multiply line 16 by 20% (0.20) and see the		
	instructions for the statement that must be attached. Members of controlled groups or businesses		
	under common control, see instructions for the statement that must be attached	17	2,528
Section	on B-Alternative Simplified Credit. Skip this section if you are completing Section A.		
18	Certain amounts paid or incurred to energy consortia (see the line 1 instructions)	18	0
19	Basic research payments to qualified organizations (see the line 2 instructions)		
20	Qualified organization base period amount (see the line 3 instructions) 20		
21	Subtract line 20 from line 19. If zero or less, enter -0-	21	*
22	Add lines 18 and 21	22	*
23	Multiply line 22 by 20% (0.20)	23	*
24	Wages for qualified services (do not include wages used in figuring the work		
	opportunity credit)		
25	Cost of supplies		
26	Rental or lease costs of computers (see the line 7 instructions)		
27	Enter the applicable percentage of contract research expenses. See the line 8		
	instructions		
28	Total qualified research expenses. Add lines 24 through 27		
29	Enter your total qualified research expenses for the prior 3 tax years. If you had		
	no qualified research expenses in any one of those years, skip lines 30 and 31		
30	Divide line 29 by 6.0		
31	Subtract line 30 from line 28. If zero or less, enter -0		
32	Multiply line 31 by 14% (0.14). If you skipped lines 30 and 31, multiply line 28 by 6% (0.06)	32	470
33	Add lines 23 and 32	33	477
34	Are you electing the reduced credit under section 280C? ► Yes □ No □		111
	If "Yes," multiply line 33 by 79% (0.79). If "No," enter the amount from line 33 and see the line 17		
	instructions for the statement that must be attached. Members of controlled groups or businesses		
	under common control, see instructions for the statement that must be attached	34	477
	normark Deduction Act Notice and congrete instructions	- Cours	6765 (Day 10 0000)

Form **6765** (Rev. 12-2020)

^{*} Data not shown because of the small number of sample returns on which they are based.

Form **6765** (Rev. December 2020)

Credit for Increasing Research Activities

► Attach to your tax return.

► Go to www.irs.gov/Form6765 for instructions and the latest information.

OMB No. 1545-0619

Attachment Sequence No. **676**

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

Total Forms Filed =

11,412

Identifying number

1	Certain amounts paid or incurred to energy consortia (see instructions)				1	*
2	Basic research payments to qualified organizations (see instructions)	2	 		•	
3	Qualified organization base period amount	3			-	
4	Subtract line 3 from line 2. If zero or less, enter -0		ļ		4	*
5	Wages for qualified services (do not include wages used in figuring the work	1	 I			
•	opportunity credit)	5				
6	Cost of supplies	6				
7	Rental or lease costs of computers (see instructions)	7				
3	Enter the applicable percentage of contract research expenses. See instructions	8				
9	Total qualified research expenses. Add lines 5 through 8	9				
)	Enter fixed-base percentage, but not more than 16% (0.16) (see instructions)	10		%	0	
1	Enter average annual gross receipts. See instructions	11				
2	Multiply line 11 by the percentage on line 10	12				
3	Subtract line 12 from line 9. If zero or less, enter -0	13				
4	Multiply line 9 by 50% (0.50)	14				
5	Enter the smaller of line 13 or line 14				15	147,911
3	Add lines 1, 4, and 15				16	148,040
7	Are you electing the reduced credit under section 280C? ▶ Yes ☐ No ☐					
	instructions for the statement that must be attached. Members of controlled under common control, see instructions for the statement that must be attached				17	24,816
	on B-Alternative Simplified Credit. Skip this section if you are completing Section				1.0	
3	Certain amounts paid or incurred to energy consortia (see the line 1 instructions))			18	0
3	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions)	. 19			18	0
3 9)	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions)	19 20				
3 9 0	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions) Subtract line 20 from line 19. If zero or less, enter -0	19			21	*
3 9 0 1	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions) Subtract line 20 from line 19. If zero or less, enter -0	19 20			21 22	*
3 9 0 1 2	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions). Subtract line 20 from line 19. If zero or less, enter -0	19 20			21	*
3	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions) Subtract line 20 from line 19. If zero or less, enter -0	19 20			21 22	*
3)) ! 2	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions). Subtract line 20 from line 19. If zero or less, enter -0	19 20			21 22	*
3 9 0 1 2 3 4	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions). Subtract line 20 from line 19. If zero or less, enter -0	19 20			21 22	*
3 9 0 1 1 2 3 4	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions). Subtract line 20 from line 19. If zero or less, enter -0	19 20 			21 22	*
3 9 9 1 2 3 1	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions). Subtract line 20 from line 19. If zero or less, enter -0	19 20 			21 22	*
3 9 9 1 2 3 4	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions). Subtract line 20 from line 19. If zero or less, enter -0- Add lines 18 and 21	24 25 26 27			21 22	*
3 3 1 3 4 3	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions). Subtract line 20 from line 19. If zero or less, enter -0- Add lines 18 and 21	19 20 			21 22	*
3 3 1 3 4 3	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions) Subtract line 20 from line 19. If zero or less, enter -0- Add lines 18 and 21	24 25 26 27 28			21 22	*
3 9 9 1 2 3 1 5 6 7	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions)	24 25 26 27 28			21 22	*
3 9 1 2 3 1 5 6 7	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions). Subtract line 20 from line 19. If zero or less, enter -0- Add lines 18 and 21	24 25 26 27 28 29			21 22	*
3 9 9 1 5 6 7 8	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions). Subtract line 20 from line 19. If zero or less, enter -0- Add lines 18 and 21	24 25 26 27 28 29 30 31			21 22 23	*
3 9 9 1 2 3 1 3 9 9 9	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions). Subtract line 20 from line 19. If zero or less, enter -0- Add lines 18 and 21	24 25 26 27 28 29 30 31			21 22 23 32	* * * * * * * * * * * * * * * * * * * *
3 9 9 1 2 3 1 3 9 9 9 9 9	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions) Subtract line 20 from line 19. If zero or less, enter -0	24 25 26 27 28 29 30 31			21 22 23	*
3 9 0 1 2 3 4 5 6 7 9	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions) Subtract line 20 from line 19. If zero or less, enter -0	24 25 26 27 28 29 30 31 6% (0.06)		21 22 23 32	* * * * * * * * * * * * * * * * * * * *
3 9 0 1	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions) Subtract line 20 from line 19. If zero or less, enter -0	24 25 26 27 28 29 30 31 6% (0	0.06) .		21 22 23 32	* * * * * * * * * * * * * * * * * * * *
3 9 0 1 2 3 4 5 6 7 3 9 0 1 1 2 3 1 1 2 3 3 1 1 2 3 3 3 3 3 3 3 3	Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 2 instructions) Qualified organization base period amount (see the line 3 instructions) Subtract line 20 from line 19. If zero or less, enter -0	24 25 26 27 28 29 30 31 6% (0	0.06) .		21 22 23 32	* * 32,328

* Data not shown because of the small number of sample returns on which they are based.

Form 6765 (Rev. 12-2020)

Secti	on C—Current Year Credit		
35	Enter the portion of the credit from Form 8932, line 2, that is attributable to wages that were also used to figure the credit on line 17 or line 34 (whichever applies)	35	*
36	Subtract line 35 from line 17 or line 34 (whichever applies). If zero or less, enter -0	36	2,995
37	Credit for increasing research activities from partnerships, S corporations, estates, and trusts	37	8,612
38	Add lines 36 and 37	38	11,407
	• Estates and trusts, go to line 39.		
	• Partnerships and S corporations not electing the payroll tax credit, stop here and report this amount on Schedule K.		
	• Partnerships and S corporations electing the payroll tax credit, complete Section D and report on Schedule K the amount on this line reduced by the amount on line 44.		
	• Eligible small businesses, stop here and report the credit on Form 3800, Part III, line 4i. See instructions for the definition of eligible small business.		
	• Filers other than eligible small businesses, stop here and report the credit on Form 3800, Part III, line 1c.		
	Note: Qualified small business filers, other than partnerships and S corporations, electing the payroll tax credit must complete Form 3800 before completing Section D.		
39	Amount allocated to beneficiaries of the estate or trust (see instructions)	39	
40	Estates and trusts, subtract line 39 from line 38. For eligible small businesses, report the credit on		
	Form 3800, Part III, line 4i. See instructions. For filers other than eligible small businesses, report the		
	credit on Form 3800, Part III, line 1c	40	
	on D—Qualified Small Business Payroll Tax Election and Payroll Tax Credit. Skip this section if the ppply. See instructions.	ayroll	tax election does
41	Check this box if you are a qualified small business electing the payroll tax credit. See instructions		
42	Enter the portion of line 36 elected as a payroll tax credit (do not enter more than \$250,000). See		
	instructions	42	*
43	General business credit carryforward from the current year (see instructions). Partnerships and S		
	corporations, skip this line and go to line 44	43	26
44	Partnerships and S corporations, enter the smaller of line 36 or line 42. All others, enter the smallest of line 36, line 42, or line 43. Enter here and on the applicable line of Form 8974, Part 1, column (e). Members of controlled groups or businesses under common control, see instructions for the statement that must be attached	44	*

Form **6765** (Rev. 12-2020)

* Data not shown because of the small number of sample returns on which they are based.

Form 6	3765 (Rev. 12-2020)		Page 2
Secti	on C—Current Year Credit		
35	Enter the portion of the credit from Form 8932, line 2, that is attributable to wages that were also used to figure the credit on line 17 or line 34 (whichever applies)	35	*
36	Subtract line 35 from line 17 or line 34 (whichever applies). If zero or less, enter -0	36	53,061
37	Credit for increasing research activities from partnerships, S corporations, estates, and trusts	37	142,969
38	Add lines 36 and 37	38	196,030
	• Partnerships and S corporations not electing the payroll tax credit, stop here and report this amount on Schedule K.		
	• Partnerships and S corporations electing the payroll tax credit, complete Section D and report on Schedule K the amount on this line reduced by the amount on line 44.		
	• Eligible small businesses, stop here and report the credit on Form 3800, Part III, line 4i. See instructions for the definition of eligible small business.		
	• Filers other than eligible small businesses, stop here and report the credit on Form 3800, Part III, line 1c.		
	Note: Qualified small business filers, other than partnerships and S corporations, electing the payroll tax credit must complete Form 3800 before completing Section D.		
39	Amount allocated to beneficiaries of the estate or trust (see instructions)	39	
40	Estates and trusts, subtract line 39 from line 38. For eligible small businesses, report the credit on Form 3800, Part III, line 4i. See instructions. For filers other than eligible small businesses, report the credit on Form 3800, Part III, line 1c	40	
	on D—Qualified Small Business Payroll Tax Election and Payroll Tax Credit. Skip this section if the ppply. See instructions.	ayroll	tax election does
41	Check this box if you are a qualified small business electing the payroll tax credit. See instructions		
42	Enter the portion of line 36 elected as a payroll tax credit (do not enter more than \$250,000). See		
	instructions	42	*
43	General business credit carryforward from the current year (see instructions). Partnerships and S corporations, skip this line and go to line 44	43	2,058
44	Partnerships and S corporations, enter the smaller of line 36 or line 42. All others, enter the smallest of line 36, line 42, or line 43. Enter here and on the applicable line of Form 8974, Part 1, column (e). Members of controlled groups or businesses under common control, see instructions for the statement		
	that must be attached	44	*
* Dat	a not shown because of the small number of sample returns on which they are based	Form	6765 (Rev. 12-2020)

Form **6781**

Gains and Losses From Section 1256 Contracts and Straddles

• Go to www.irs.gov/Form6781 for the latest information.

OMB No. 1545-0644

	Revenue Service	P GO to t	_	tach to your			St IIIIOII	nation.		A	Attachment Sequence No. 82
Name(s	shown on tax return Tota	l Forms Fil	ed = 57	8,706					I		ring number
	x all applicable boxes. Anstructions. B		straddle ele e-bv-strade	ection dle identific	ation	electi		C Mixed			election acts loss election
Part	Section 1256 Contract		•								
	(a) Identif	ication of acc	ount				(b)	(Loss)	(c) Gain		
1											
2	Add the amounts on line 1 in o										
3	Net gain or (loss). Combine lin									3	573,098
4 5	Form 1099-B adjustments. Se Combine lines 3 and 4	e instructio								<u>4</u> 5	8,190
5	Note: If line 5 shows a net gair see instructions.				-	-			porations,	3	573,819
6	If you have a net section 1256								of loss to		
_	be carried back. Enter the loss	s as a posit	ive numbe	r. If you did	n't ch	neck b	ox D, e	enter -0		6	806
7	Combine lines 5 and 6					 				7	573,484
8	Short-term capital gain or (I Schedule D or on Form 8949.	See instruc	tions							8	561,724
9	Long-term capital gain or (lo		-							_	
Part	Schedule D or on Form 8949. Gains and Losses Fro									9	573,484
	on A-Losses From Strado		iles. Alla	cri a separa	ale Sia	ateme	HIL HSUI	ig each sira	udie and its	COITI	porients.
	(a) Description of property	(b) Date entered into or acquired	(c) Date closed out or sold	(d) Gross sales pric	e	other plus ex	ost or basis kpense sale	(f) Loss. If column (e) more than (c) enter differen Otherwise, enter -0	d), unrecog gain offsett	on ing	(h) Recognized loss. If column (f) is more than (g), enter difference. Otherwise, enter -0
10											
11a	Enter the short-term portion o D or on Form 8949. See instru		m line 10,	column (h)	here	and i	nclude 	on line 4 of	Schedule	11a	(1,992)
b	Enter the long-term portion of D or on Form 8949. See instru								Schedule	11b	(209)
Secti	on B-Gains From Straddle										,
	(a) Description of prop	erty		(b) Date entered into or acquired	close	Date ed out sold) Gross es price	(e) Cost of other base plus expertion of sale	is	(f) Gain. If column (d) is more than (e), enter difference. Otherwise, enter -0
12											
13a	Enter the short-term portion o or on Form 8949. See instruct					nd inc	lude oi	n line 4 of S	chedule D	13a	1,343
b	Enter the long-term portion of D or on Form 8949. See instru									13b	286
Part	III Unrecognized Gains	From Pos	itions He	ld on Las	t Da	y of T	ax Ye	ar. Memo	entry only (s		
	(a) Description o	of property				Date uired	valu busi	air market le on last ness day tax year	(d) Cost of other bas as adjuste	is	(e) Unrecognized gain. If column (c) is more than (d), enter difference. Otherwise, enter -0
14											
					1		İ				1

6781

Gains and Losses From Section 1256 **Contracts and Straddles**

OMB No. 1545-0644 ► Go to www.irs.gov/Form6781 for the latest information. Department of the Treasury Attachment Sequence No. **82** Internal Revenue Service ► Attach to your tax return. Identifying number Name(s) shown on tax return Total Forms Filed = 578,706 Check all applicable boxes. A ☐ Mixed straddle election **C** Mixed straddle account election See instructions. **B** Straddle-by-straddle identification election **D** ☐ Net section 1256 contracts loss election Part I **Section 1256 Contracts Marked to Market** (a) Identification of account (b) (Loss) (c) Gain 1 Add the amounts on line 1 in columns (b) and (c) 2 3 Net gain or (loss). Combine line 2, columns (b) and (c) 9,417,938 4 Form 1099-B adjustments. See instructions and attach statement 4 21,780 5 9.439.718 Note: If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions. If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to be carried back. Enter the loss as a positive number. If you didn't check box D, enter -0-304.584 7 7 9.744.302 Short-term capital gain or (loss). Multiply line 7 by 40% (0.40). Enter here and include on line 4 of 3,897,716 Long-term capital gain or (loss). Multiply line 7 by 60% (0.60). Enter here and include on line 11 of 5,846,586 Gains and Losses From Straddles. Attach a separate statement listing each straddle and its components. Part II Section A-Losses From Straddles (f) Loss. (a) Description of property (b) Date (c) Date (d) Gross (e) Cost or (h) Recognized loss. (g) If column (e) is Unrecognized If column (f) is entered into closed out sales price other basis more than (d), more than (g), or acquired or sold plus expense gain on enter difference. enter difference. of sale offsetting Otherwise. positions Otherwise, enter -0-. enter -0-. 10 Enter the short-term portion of losses from line 10, column (h), here and include on line 4 of Schedule 87.090 11a Enter the long-term portion of losses from line 10, column (h), here and include on line 11 of Schedule 11b 35.326 Section B-Gains From Straddles (f) Gain. (a) Description of property (b) Date (c) Date (d) Gross (e) Cost or If column (d) is entered into closed out sales price other basis more than (e), or acquired plus expense or sold enter difference. of sale Otherwise, enter -0-. 12 Enter the short-term portion of gains from line 12, column (f), here and include on line 4 of Schedule D 13a 1,012,597 Enter the long-term portion of gains from line 12, column (f), here and include on line 11 of Schedule 587,999 Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo entry only (see instructions) Part III (e) Unrecognized (a) Description of property (b) Date (c) Fair market (d) Cost or gain. If column (c) acquired value on last other basis is more than (d), business day as adjusted enter difference. of tax year Otherwise, enter -0-. 14

Form **8283**(Rev. December 2021)
Department of the Treasury
Internal Revenue Service

Noncash Charitable Contributions

► Attach one or more Forms 8283 to your tax return if you claimed a total deduction of over \$500 for all contributed property.

▶ Go to www.irs.gov/Form8283 for instructions and the latest information.

OMB No. 1545-0074

Attachment
Sequence No. **155**

Name(s) shown on your income tax return

Total Forms Filed = 2.980.762

Identifying number

			· Otal I			2,000,702				
Note	Figure the amo	ount of your cont	ribution de	duction	before	completing this	form. See ye	our tax	return instruction	S.
	(or a gı securit	oup of similar ies and certain	items) for other pro	which y perty e	you cl ven if	aimed a deduct the deduction i	tion of \$5,0 s more tha	00 or n \$5,0	t in this section less. Also list pu 100. See instruct	blicly traded
Par	t I Informa	ation on Dona	ted Prope	rty—If	you n	eed more spac	e, attach a	stater	ment.	
1		ne and address of th onee organization	e	check	the box.	operty is a vehicle (se Also enter the vehicle aless Form 1098-C is a	identification	(For	escription and conditio a vehicle, enter the yea nileage. For securities a see instruct	ar, make, model, and nd other property,
Α										
В										
С										
D										
E										
Note	: If the amount y	ou claimed as a	deduction	for an it	em is	\$500 or less, you	do not have	to co	mplete columns (e	e), (f), and (g).
	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)		/ acquired donor		(g) Donor's cost or adjusted basis	(h) Fair market (see instruct			ed to determine arket value
Α						1,945,739	2,891,	884		
В										
D E										
Par	Invent which Section qualifie t I Informa	ory Reportably you claimed a on A). Provide a ed appraisal is on Dona	e in Secti deduction separate generally i ted Prope	on A) – of mor form fo required erty	Comple than reach differ it	plete this section \$5,000 per ite item donated tems reportable	on for one it m or group unless it is	em (o (exce part o	cles, Intellectua r a group of sim ept contributions of a group of sim ee instructions.	ilar items) for reportable in
2		that describes			y dona					
		ntribution of \$20 d Conservation		•	e f	• ☐ Other Real ☐ Securities	Estate		i	d household items
	b ☐ Qualifie		Continbutio	111	9	<u> </u>	**	i	k □ Other	a nousenoid items
		ntribution of less	than \$20,0	000)	h	′ =				
	historical memo	rabilia, and other	similar objec	ts.		ngs, ceramics, antic				ver, rare manuscripts,
Note			_			f the property. Se				
3		ion of donated prope ace, attach a separat		d					as donated, give a brief rty at the time of the gift	
Α	_									138,641
В										
С										
	(d) Date acquired by donor (mo., yr.)	(e) Ho	w acquired by	donor		(f) Donor's cost or adjusted basis	(g) For barga enter am receiv	ount	(h) Amount claimed as a deduction (see instructions)	(i) Date of contribution (see instructions)
Α						118,694	878	3	107,641	
В										

С

(Rev. December 2021) Department of the Treasury Internal Revenue Service

Noncash Charitable Contributions

► Attach one or more Forms 8283 to your tax return if you claimed a total deduction of over \$500 for all contributed property.

▶ Go to www.irs.gov/Form8283 for instructions and the latest information.

OMB No. 1545-0074 Attachment Sequence No. **155**

Name(s) shown on your income tax return

Identifying number

	.,		Total F	orms F	iled =	2,980,762				
Note	Figure the amo	ount of your cont	ribution de	duction	before	e completing this	form. See yo	our tax	return instructions	S.
Sect	(or a gr	oup of similar i	tems) for	which y	ou c	laimed a deduct	ion of \$5,0	00 or I	t in this section (less. Also list pu 00. See instructi	blicly traded
Par	t I Informa	ation on Donat	ed Prope	rty—If	you r	need more spac	e, attach a	stater	nent.	
			check t	check the box. Also enter the vehicle identification (For a			Description and condition of donated property or a vehicle, enter the year, make, model, and mileage. For securities and other property, see instructions.)			
Α										
В										
С										
D										
E										
Note	If the amount y	ou claimed as a	deduction	for an it	em is	\$500 or less, you	do not have	to cor	mplete columns (e), (f), and (g).
	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)		acquired donor		(g) Donor's cost or adjusted basis	(h) Fair market (see instructi		(i) Method use the fair ma	
Α						30,985,128	91,480	,618		
В										
_ <u>D</u> _										
E	ion P. Donote	d Bronorty O	VOT \$5 000	0 (Evoc	nt Di	ublick Traded	Coourition	Vobio	les, Intellectua	I Droporty or
	Invente which y Section qualifie	ory Reportable you claimed a d n A). Provide a ed appraisal is g	e in Section deduction separate to generally r	on A) – of mor form fo required	Come that reacl	plete this section \$5,000 per ite	n for one it m or group unless it is	em (or (exce part o	r a group of simi pt contributions f a group of simi	lar items) for reportable in
Par 2		ation on Donate that describes			v don	atad				
2	 a Art* (co b Qualifie c Equipm d Art* (co 	ntribution of \$20 d Conservation ent ntribution of less	,000 or mo Contributio than \$20,0	ore) n 000)	; ;	e	** Property		c ☐ Other	d household items
	historical memo	rabilia, and other s	imilar objec	ts.		ports memorabilia, c			•	er, rare manuscripts,
Note	: In certain case	s, you must attac	ch a qualifi	ed appr	aisal c	of the property. Se	e instruction	ns.		
3		ion of donated prope ace, attach a separate		d					as donated, give a brief ty at the time of the gift	(c) Appraised fair market value
Α										44,362,119
В										
С										
	(d) Date acquired by donor (mo., yr.)	(e) Ho	w acquired by	donor		(f) Donor's cost or adjusted basis	(g) For barga enter am receive	ount ed	(h) Amount claimed as a deduction (see instructions)	(i) Date of contribution (see instructions)
_A						11,743,307	654,6	89	14,429,993	
B										

Form 82	83 (Rev. 12-2021)			F	Page 2
Name(s	s) shown on your income tax return		Identifying number	er	
Part	Partial Interests and Restricted Use Property (Of Complete lines 4a through 4e if you gave less than Complete lines 5a through 5c if conditions were pla attach the required statement. See instructions.	an entire interest in a property lis	sted in Section B	, Par	t I.
4a	Enter the letter from Section B, Part I that identifies the proper		ntire interest ►		
	If Section B, Part II applies to more than one property, attach a	•	_		
b	Total amount claimed as a deduction for the property listed in Se	ection B, Part I: (1) For this tax yea (2) For any prior ta			
С	Name and address of each organization to which any such of from the donee organization in Section B, Part V, below): Name of charitable organization (donee)			if diffe	erent
	Address (number, street, and room or suite no.)	City or town, state, and ZIP co	de		
d	For tangible property, enter the place where the property is loc	eated or kent ►			
e	Name of any person, other than the donee organization, having		>		
5a b	Is there a restriction, either temporary or permanent, on the dor Did you give to anyone (other than the donee organization or organization in cooperative fundraising) the right to the incom- the property, including the right to vote donated securities, to designate the person having such income, possession, or right	or another organization participating e from the donated property or to the acquire the property by purchase out to acquire?	g with the donee he possession of r otherwise, or to	Yes	No
	Is there a restriction limiting the donated property for a particul			idoni	ifico
Part	Taxpayer (Donor) Statement—List each item incluas having a value of \$500 or less. See instructions.	ided in Section B, Part rabove ti	nat trie appraisai	ideni	lilles
►Signatu	more than \$500 (per item). Enter identifying letter from Section ure of er (donor) ▶	B, Part I and describe the specific it	em. See instructio	ns.	
Part	,		Date		
l declare married	that I am not the donor, the donee, a party to the transaction in which the donor to any person who is related to any of the foregoing persons. And, if regularly use als during my tax year for other persons.				
of prope fraudule abetting substan under se	eclare that I perform appraisals on a regular basis; and that because of my qualificate being valued. I certify that the appraisal fees were not based on a percentage nt overstatement of the property value as described in the qualified appraisal or the understatement of tax liability). I understand that my appraisal will be used in tial or gross valuation misstatement of the value of the property claimed on the reaction 6695A of the Internal Revenue Code, as well as other applicable penalties. Opraisal barred from presenting evidence or testimony before the Department of the	of the appraised property value. Furthermore, nis Form 8283 may subject me to the penalty connection with a return or claim for refund. I turn or claim for refund that is based on my ap I affirm that I have not been at any time in the	I understand that a fals under section 6701(a) (a also understand that, if opraisal, I may be subject three-year period endin	e or iding ar there is ot to a p g on the	nd s a penalty
Sign	Appraiser signature ▶		Date ►		
Here	Appraiser name ▶	Title ▶			
Busine	ss address (including room or suite no.)		Identifying number	er	
City or	town, state, and ZIP code				
Part	V Donee Acknowledgment				
	naritable organization acknowledges that it is a qualified organiza	tion under section 170(c) and that it i	received the donate	ed pro	perty
Furthe B, Par and gi	eribed in Section B, Part I, above on the following date rmore, this organization affirms that in the event it sells, exchant I (or any portion thereof) within 3 years after the date of receip ve the donor a copy of that form. This acknowledgment does not be experient in intend to use the property for an unrelated use.	t, it will file Form 8282 , Donee Infor ot represent agreement with the claim	mation Return, wit imed fair market va	h the alue.	IRS
	the organization intend to use the property for an unrelated use of charitable organization (donee)	Employer identification number	► <u></u> Ye	es L	No
ivalile (or arrantable organization (dollee)	Employer identification number			
Addres	s (number, street, and room or suite no.)	City or town, state, and ZIP code			
Authori	zed signature	Title	Date		

Form 82	83 (Rev. 12-2021)		Pag	e 2
Name(s	s) shown on your income tax return		Identifying number	
Part	Partial Interests and Restricted Use Property (O Complete lines 4a through 4e if you gave less than Complete lines 5a through 5c if conditions were plaattach the required statement. See instructions.	an entire interest in a property lis	sted in Section B, Part I.	_
4a	Enter the letter from Section B, Part I that identifies the proper		ntire interest ►	
	If Section B, Part II applies to more than one property, attach			
b	Total amount claimed as a deduction for the property listed in S	bection B, Part I: (1) For this tax year (2) For any prior tax		
С	Name and address of each organization to which any such of from the donee organization in Section B, Part V, below): Name of charitable organization (donee)			mt
	Address (number, street, and room or suite no.)	City or town, state, and ZIP co	de	
d	For tangible property, enter the place where the property is lo	cated or kept ►		
е	Name of any person, other than the donee organization, having	ng actual possession of the property l	>	
			Yes N	
5a b	Is there a restriction, either temporary or permanent, on the do Did you give to anyone (other than the donee organization organization in cooperative fundraising) the right to the incom the property, including the right to vote donated securities, to designate the person having such income, possession, or right	or another organization participating ne from the donated property or to the acquire the property by purchase or	onated property? I with the donee ne possession of otherwise, or to	lo
c Part	Is there a restriction limiting the donated property for a particular Taxpayer (Donor) Statement—List each item includes as having a value of \$500 or less. See instructions.	uded in Section B, Part I above th		es
Signatu	more than \$500 (per item). Enter identifying letter from Section ure of er (donor) ▶	, spiritura associas ins specime is	Date ▶	
Part	• •			
married	e that I am not the donor, the donee, a party to the transaction in which the dono to any person who is related to any of the foregoing persons. And, if regularly us als during my tax year for other persons.			
of prope fraudule abetting substant under se	eclare that I perform appraisals on a regular basis; and that because of my quality being valued. I certify that the appraisal fees were not based on a percentage into verstatement of the property value as described in the qualified appraisal or the understatement of tax liability). I understand that my appraisal will be used in tital or gross valuation misstatement of the value of the property claimed on the reaction 6695A of the Internal Revenue Code, as well as other applicable penalties, oppraisal barred from presenting evidence or testimony before the Department of	e of the appraised property value. Furthermore, this Form 8283 may subject me to the penalty un connection with a return or claim for refund. I eturn or claim for refund that is based on my ap . I affirm that I have not been at any time in the	I understand that a false or under section 6701(a) (aiding and also understand that, if there is a praisal, I may be subject to a pena three-year period ending on the da	alty
Sign	Appraiser signature ▶		Date ►	
Here	Appraiser name ►	Title ►		
Busines	ss address (including room or suite no.)		Identifying number	
City or	town, state, and ZIP code			
Part	V Donee Acknowledgment			
as des Furthe B, Pari and gi	naritable organization acknowledges that it is a qualified organization or incribed in Section B, Part I, above on the following date remore, this organization affirms that in the event it sells, exchant I (or any portion thereof) within 3 years after the date of receip we the donor a copy of that form. This acknowledgment does rethe organization intend to use the property for an unrelated use	nges, or otherwise disposes of the prot, it will file Form 8282 , Donee Infornot represent agreement with the clai	roperty described in Sectio mation Return, with the IRS med fair market value.	on S
	of charitable organization (donee)	Employer identification number	▶ ∐Yes ∐N	-
Addres	s (number, street, and room or suite no.)	City or town, state, and ZIP code		
Authori	zed signature	Title	Date	

Form **8396**

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on your tax return

Mortgage Interest Credit

(For Holders of Qualified Mortgage Credit Certificates Issued by State or Local Governmental Units or Agencies)

► Go to www.irs.gov/Form8396 for the latest information.
 ► Attach to Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074

2021

Attachment Sequence No. **138**

Your social security number

rvarrie(.	Total Forms Filed = 101,172	Tour Social s	security number
Enter t	ne address of your main home to which the qualified mortgage certificate relates if it is different from the address shown on your ta	x return.	
Name	of Issuer of Mortgage Credit Certificate Mortgage Credit Certificate Number	Issue date	
	re you begin Part I, figure the amounts of any of the following credits you are claiming: credit for ative motor vehicle credit, and qualified plug-in electric drive motor vehicle credit.	the elderly	or the disabled
Par	Current Year Mortgage Interest Credit		
1	Interest paid on the certified indebtedness amount. If someone else (other than your spouse if fili jointly) also held an interest in the home, enter only your share of the interest paid		
2	Enter the certificate credit rate shown on your Mortgage Credit Certificate. Do not enter the interest rate on your home mortgage	est 2	%
3	If line 2 is 20% or less, multiply line 1 by line 2. If line 2 is more than 20%, or you refinanced your mortgage and received a reissued certificate, see the instructions for the amount to enter		93,125
	You must reduce your deduction for home mortgage interest on Schedule A (Form 1040) by t amount on line 3.	he	
4	Enter any 2018 credit carryforward from line 16 of your 2020 Form 8396	. 4	4,319
5	Enter any 2019 credit carryforward from line 14 of your 2020 Form 8396	. 5	5,317
6	Enter any 2020 credit carryforward from line 17 of your 2020 Form 8396	. 6	8,362
7	Add lines 3 through 6	. 7	95,127
8	Limitation based on tax liability. Enter the amount from line 3 of the Credit Limit Worksheet in tinstructions	he . 8	96,833
9	Current year mortgage interest credit. Enter the smaller of line 7 or line 8. Also include this amount on Schedule 3 (Form 1040), line 6g		90,788
Par			
10	Add lines 3 and 4	. 10	
11	Enter the amount from line 7	. 11	
12	Enter the larger of line 9 or line 10	. 12	
13	Subtract line 12 from line 11	. 13	
14	2020 credit carryforward to 2022. Enter the smaller of line 6 or line 13	. 14	
15	Subtract line 14 from line 13	. 15	
16	2019 credit carryforward to 2022. Enter the smaller of line 5 or line 15	. 16	

17

Cat. No. 62502X

2021 credit carryforward to 2022. Subtract line 9 from line 3. If zero or less, enter -0-

Form **8396**

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on your tax return

Mortgage Interest Credit

(For Holders of Qualified Mortgage Credit Certificates Issued by State or Local Governmental Units or Agencies)

► Go to www.irs.gov/Form8396 for the latest information.
 ► Attach to Form 1040, 1040-SR, or 1040-NR.

101,172

Total Forms Filed =

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

OMB No. 1545-0074

2021

Attachment Sequence No. **138**

Form **8396** (2021)

Cat. No. 62502X

Your social security number

Enter t	ne address of your main home to which the qualified mortgage	e certificate relates if it is different from the address shown on your	tax return.	
Name	of Issuer of Mortgage Credit Certificate	Mortgage Credit Certificate Number	Issue date	
	re you begin Part I, figure the amounts of any ative motor vehicle credit, and qualified plug-in o	of the following credits you are claiming: credit for electric drive motor vehicle credit.	r the elder	ly or the disabled,
Par	Current Year Mortgage Interest Cr	edit		
1		nount. If someone else (other than your spouse if fi only your share of the interest paid		
2		Mortgage Credit Certificate. Do not enter the inte	rest 2	%
3		2. If line 2 is more than 20%, or you refinanced ysee the instructions for the amount to enter		144,303
	You must reduce your deduction for home amount on line 3.	mortgage interest on Schedule A (Form 1040) by	the	
4	Enter any 2018 credit carryforward from line 16	6 of your 2020 Form 8396	. 4	9,950
5	Enter any 2019 credit carryforward from line 14	4 of your 2020 Form 8396	. 5	8,845
6	Enter any 2020 credit carryforward from line 17	7 of your 2020 Form 8396	. 6	15,424
7 8	Add lines 3 through 6		. 7	178,521
J	instructions		. 8	804,988
9		the smaller of line 7 or line 8. Also include this amo		136,590
Par	Mortgage Interest Credit Carryforw	vard to 2022 (Complete only if line 9 is less that	n line 7.)	
10	Add lines 3 and 4		. 10	
11	Enter the amount from line 7		. 11	
12	Enter the larger of line 9 or line 10		. 12	
13	Subtract line 12 from line 11		. 13	
14	2020 credit carryforward to 2022. Enter the s	smaller of line 6 or line 13	. 14	
15	Subtract line 14 from line 13		. 15	
16	2019 credit carryforward to 2022. Enter the s	smaller of line 5 or line 15	. 16	
17	2021 credit carryforward to 2022. Subtract lii	ne 9 from line 3. If zero or less, enter -0	. 17	

Form **8582**

Department of the Treasury Internal Revenue Service (99)

Passive Activity Loss Limitations

► See separate instructions.

► Attach to Form 1040, 1040-SR, or 1041.

▶ Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

2021

Attachment Sequence No. 858

Name(s) shown on return Total Forms File	d = 8,012,324			ld	entifying ı	number
Par	2021 Passive Activity Loss Caution: Complete Parts IV ar		eting Part I.		I		
	Il Real Estate Activities With Active Pa ance for Rental Real Estate Activities	• •		ive participation	, see Specia		
1a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the Combine lines 1a, 1b, and 1c	unt from Part IV, c ne amount from Pa	olumn (b)) art IV, column (c))	1b (3	2,767,003 3,338,804 1,749,776))	4,902,722
All Ot	her Passive Activities						
2a b c d	Activities with net income (enter the a Activities with net loss (enter the amo Prior years' unallowed losses (enter the Combine lines 2a, 2b, and 2c	unt from Part V, co ne amount from Pa	olumn (b)) art V, column (c))	2b (1	,723,733 ,870,909 ,477,953)) 2d	3,988,194
3	Combine lines 1d and 2d. If this line i all losses are allowed, including any losses on the forms and schedules no	s zero or more, st prior year unallow	op here and inclu	de this form with on line 1c or 2	n your return c. Report the	n;	7,996,297
	If line 3 is a loss and: • Line 1d is a lead on: If your filing status is married filing labeled.	oss (and line 1d is	·	-		the year	, do not complet
Par	t II Special Allowance for Rer Note: Enter all numbers in Par				-		
4	Note: Enter all numbers in Par Enter the smaller of the loss on line 1	t II as positive amo	ounts. See instruc ne 3	tions for an exar	nple.	4	2,751,319
4 5	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ	t II as positive amo d or the loss on lir ately, see instructi	ounts. See instructions	tions for an exar	nple. 730,379	4	2,751,319
4	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.	t II as positive amo d or the loss on lir ately, see instructi e, but not less thar	ounts. See instruction on see instruction on see instruction on see instruction of the see	tions for an exar 	730,379 951,959	4	2,751,319
4 5 6	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5	t II as positive amo d or the loss on lir ately, see instructi e, but not less thar to line 5, skip line	ounts. See instruction of the second of the	tions for an exar 	730,379 951,959		
4 5 6	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not experience.	t II as positive amod or the loss on lir ately, see instructie, but not less than to line 5, skip line	ounts. See instruction of a constant of the second of the	tions for an exam	730,379 951,959 .251,227 e instruction	s 8	1,251,227
4 5 6 7 8 9	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not enter the smaller of line 4 or line 8	t II as positive amo d or the loss on lir ately, see instructi e, but not less thar to line 5, skip line	ounts. See instruction of a constant of the second of the	tions for an exam	730,379 951,959 .251,227 e instruction	s 8	
4 5 6	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not enter the smaller of line 4 or line 8	t II as positive amod or the loss on lir ately, see instruction, but not less that to line 5, skip line	ounts. See instruction of a construction on see instruction of a construction of a c	tions for an exam	730,379 951,959 ,251,227 e instruction	s 8	1,251,227
4 5 6 7 8 9 Pari	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not el Enter the smaller of line 4 or line 8 III Total Losses Allowed Add the income, if any, on lines 1a an Total losses allowed from all passiv	t II as positive amoder of the loss on lire ately, see instruction, but not less than to line 5, skip line the more than \$25	ounts. See instruc- ne 3	tions for an exam.	730,379 951,959 ,251,227 e instruction	s 8 9	1,251,227 1,251,186 1,308,046
4 5 6 7 8 9 Pari 10 11	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not end Enter the smaller of line 4 or line 8 III Total Losses Allowed Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your to	t II as positive amode or the loss on lire ately, see instruction, but not less that to line 5, skip line 1, skip line 1, skip	ounts. See instruc- ne 3	tions for an examendations for an examendations for an examendation for an examendatio	730,379 951,959 251,227 e instruction	s 8 9	1,251,227 1,251,186
4 5 6 7 8 9 Par	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not elenter the smaller of line 4 or line 8 III Total Losses Allowed Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your terms.	t II as positive amode or the loss on lire ately, see instruction, but not less that to line 5, skip line 1, skip line 1, skip	ounts. See instruc- ne 3	tions for an examendations for an examendations for an examendation for an examendatio	730,379 951,959 251,227 e instruction	s 8 9	1,251,227 1,251,186 1,308,046
4 5 6 7 8 9 Pari 10 11	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not elenter the smaller of line 4 or line 8 III Total Losses Allowed Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your total losses allowed This Part Before	t II as positive amoder of the loss on lire ately, see instruction, but not less than to line 5, skip line to line 5, skip line the more than \$25 to 10 ax return to 20 ax ret	ounts. See instruc- ne 3 ons n zero. See instruc- s 7 and 8 and ent ,000. If married filin e total 21. Add lines 9 ar a, 1b, and 1c. See	tions for an examendations for an examendations and examendations are seen in the control of the	730,379 951,959 .251,227 e instruction	8 9 10 d 11	1,251,227 1,251,186 1,308,046
4 5 6 7 8 9 Pari 10 11	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not end Enter the smaller of line 4 or line 8 III Total Losses Allowed Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your to	t II as positive amoder of the loss on lire ately, see instruction, but not less than to line 5, skip line to line 5, skip line the more than \$25 to 10 and enter the eactivities for 20 ax return to 10 ax	ounts. See instruc- ne 3	tions for an exam.	730,379 951,959 .251,227 e instruction	10 d 11 overall ga	1,251,227 1,251,186 1,308,046 3,824,525
4 5 6 7 8 9 Pari 10 11	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not elenter the smaller of line 4 or line 8 III Total Losses Allowed Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your total losses allowed This Part Before	t II as positive amoder of the loss on lire ately, see instruction, but not less than to line 5, skip line to line 5, skip line to line 5, skip line the more than \$25 to 10 ax return to 20 a	ounts. See instruc- ne 3 ons n zero. See instruc- s 7 and 8 and ent n,000. If married filin e total 21. Add lines 9 ar a, 1b, and 1c. S nt year (b) Net loss	tions for an example.	730,379 951,959 251,227 e instruction	10 d 11 overall ga	1,251,227 1,251,186 1,308,046 3,824,525 ain or loss
4 5 6 7 8 9 Pari 10 11	Note: Enter all numbers in Par Enter the smaller of the loss on line 1 Enter \$150,000. If married filing separ Enter modified adjusted gross income Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7. Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not elenter the smaller of line 4 or line 8 III Total Losses Allowed Add the income, if any, on lines 1a an Total losses allowed from all passiv out how to report the losses on your total losses allowed This Part Before	t II as positive amoder of the loss on lire ately, see instruction, but not less than to line 5, skip line to line 5, skip line to line 5, skip line the more than \$25 to 10 ax return to 20 a	ounts. See instruc- ne 3 ons n zero. See instruc- s 7 and 8 and ent n,000. If married filin e total 21. Add lines 9 ar a, 1b, and 1c. S nt year (b) Net loss	tions for an example.	730,379 951,959 251,227 e instruction	10 d 11 overall ga	1,251,227 1,251,186 1,308,046 3,824,525 ain or loss

Total. Enter on Part I, lines 1a, 1b, and 1c ▶

Form **8582**

Department of the Treasury Internal Revenue Service (99)

Passive Activity Loss Limitations

► See separate instructions.

► Attach to Form 1040, 1040-SR, or 1041.

► Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

2021

Attachment Sequence No. 858

Name(s) shown on return Identifying number Total Forms Filed = 8.012.324 2021 Passive Activity Loss Part I Caution: Complete Parts IV and V before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.) **1a** Activities with net income (enter the amount from Part IV, column (a)) . . . 138,190,065 **b** Activities with net loss (enter the amount from Part IV, column (b)) 1b (57,311,073 1c (89,297,911 c Prior years' unallowed losses (enter the amount from Part IV, column (c)) . . . 1d -8,418,919 **All Other Passive Activities** 264,460,183 2a Activities with net income (enter the amount from Part V, column (a)) . . . **b** Activities with net loss (enter the amount from Part V, column (b)) 116,944,417 c Prior years' unallowed losses (enter the amount from Part V, column (c)) . . . 134,908,155 12,607,611 **d** Combine lines 2a, 2b, and 2c 2d Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used 4,188,690 If line 3 is a loss and: • Line 1d is a loss, go to Part II. • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10. Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See instructions for an example. 4 Enter the **smaller** of the loss on line 1d or the loss on line 3 114,719,571 408,917,356 Enter \$150,000. If married filing separately, see instructions Enter modified adjusted gross income, but not less than zero. See instructions 1,093,411,389 Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0on line 9. Otherwise, go to line 7. 75,388,485 7 Subtract line 6 from line 5 23,286,977 Multiply line 7 by 50% (0.50). **Do not** enter more than \$25,000. If married filing separately, see instructions 8 9 9 12,898,877 **Total Losses Allowed** Part III 10 10 48,680,345 Total losses allowed from all passive activities for 2021. Add lines 9 and 10. See instructions to find 115,753,339 Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions. Part IV Current year Overall gain or loss Prior years Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) (line 1b) loss (line 1c)

Total. Enter on Part I, lines 1a, 1b, and 1c ▶

Form **8586**(Rev. December 2021)
Department of the Treasury
Internal Revenue Service

Low-Income Housing Credit

► Attach to your tax return.
 Go to www.irs.gov/Form8586 for the latest information.

OMB No. 1545-0984

Attachment Sequence No. **36a**

Name(s) shown on return Identifying number Total Forms Filed = 1.750 2 Has there been a decrease in the qualified basis of any buildings accounted for on line 1 since the close of the Yes No If "Yes," enter the building identification numbers (BINs) of the preceding tax year? buildings that had a decreased basis. If you need more space, attach a schedule. (iii)_____ 20 3 4 1,682 Low-income housing credit from partnerships, S corporations, estates, and trusts Add lines 3 and 4. Estates and trusts, go to line 6. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, stop here and report this amount on Form 3800, Part III, line 4d, 1,699 6 6 Estates and trusts, subtract line 6 from line 5. Report this amount on Form 3800, Part III, line 4d, column (c)

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form 8586 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/Form8586*.

Purpose of Form

Use Form 8586 to claim the low-income housing credit. This general business credit is allowed for each new qualified low-income building placed in service after 1986. Generally, it is taken over a 10-year credit period.

Taxpayers, other than partnerships, S corporations, estates, or trusts, whose only source of this credit is from those pass-through entities, are not required to complete or file this form. Instead, they can report this credit directly on Form 3800.

Qualified Low-Income Housing Project

The credit cannot exceed the amount allocated to the building. See section 42(h)(1) for details.

The low-income housing credit can only be claimed for residential rental buildings in low-income housing projects that meet one of the minimum set-aside tests. For details, see the instructions for Form 8609, Part II, line 10c.

Except for buildings financed with certain tax-exempt bonds, you may not take a low-income housing credit on a building if it has not received an allocation from the housing credit agency. No allocation is needed when 50% or more of the aggregate basis of the building and the land on which the building is located is financed with certain tax-exempt bonds. The owner must still get a Form 8609 from the appropriate housing credit agency (with the applicable items completed, including an assigned BIN). "Land on which the building is located" includes only land that is functionally related and subordinate to the qualified low-income building. (See Regulations sections 1.103-8(a)(3) and 1.103-8(b)(4)(iii).)

Recapture of Credit

There is a 15-year compliance period during which the residential rental building must continue to meet certain requirements. If, as of the close of any tax year in this period, there is a reduction in the qualified basis of the building from the previous year, you may have to recapture a part of the credit you have taken. Similarly, you may have to recapture part of the credits taken in previous years upon certain dispositions of the building or interests therein, unless you follow the procedures to prevent recapture. See Recapture and building dispositions in the Instructions for Form 8609-A, Annual Statement for Low-Income Housing Credit, for details. If you must recapture credits, use Form 8611, Recapture of Low-Income Housing Credit. See section 42(j) for details.

Recordkeeping

Keep a copy of this Form 8586 together with all Forms 8609, Forms 8609-A, and Forms 8611 for 3 years after the 15-year compliance period ends.

Specific Instructions

Line 2. A decrease in qualified basis will result in recapture if the qualified basis at the close of the tax year is less than the qualified basis at the close of the first year of the credit period.

If the reduction in qualified basis at the close of the tax year also results in a violation of the minimum set-aside requirement, then no credit is allowable for the year.

Line 3. The credit for the year is figured on Form 8609-A for each building. Attach a copy of each Form 8609-A you completed for the tax year to Form 8586. Enter on line 3 the total credit for attached Form(s) 8609-A.

Line 6. Estates or trusts. Allocate the low-income housing credit on line 5 between the estate or trust and the beneficiaries in the same proportion as income was allocated and enter the beneficiaries' share on line 6.

If the estate or trust is subject to the passive activity rules, include on line 4 any low-income housing credits from passive activities disallowed for prior years and carried forward to this year. Complete Form 8582-CR, Passive Activity Credit Limitations, to determine the allowed credit that must be allocated between the estate or trust and the beneficiaries. For details, see the Instructions for Form 8582-CR.

Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated burden for individual taxpayers filing this form is approved under OMB control number 1545-0074 and is included in the estimates shown in the instructions for their individual income tax return. The estimated burden for all other taxpayers who file this form is shown below.

 Recordkeeping
 ...
 5 hr., 44 min.

 Learning about the law or the form
 ...
 52 min.

 Preparing and sending the form to the IRS
 ...
 2 hr., 11 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. See the instructions for the tax return with which this form is filed.

Form **8586**(Rev. December 2021)
Department of the Treasury
Internal Revenue Service

Low-Income Housing Credit

► Attach to your tax return.
 Go to www.irs.gov/Form8586 for the latest information.

OMB No. 1545-0984

Sequence No. **36a**

Name(s) shown on return Identifying number Total Forms Filed = 1.750 2 Has there been a decrease in the qualified basis of any buildings accounted for on line 1 since the close of the ☐ Yes ☐ No If "Yes," enter the building identification numbers (BINs) of the preceding tax year? buildings that had a decreased basis. If you need more space, attach a schedule. (ii) _____ 2.623 3 4 28,295 Low-income housing credit from partnerships, S corporations, estates, and trusts Add lines 3 and 4. Estates and trusts, go to line 6. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, stop here and report this amount on Form 3800, Part III, line 4d, 30,918 6 Amount allocated to beneficiaries of the estate or trust (see instructions) 6 Estates and trusts, subtract line 6 from line 5. Report this amount on Form 3800, Part III, line 4d, column (c) 7

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form 8586 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/Form8586*.

Purpose of Form

Use Form 8586 to claim the low-income housing credit. This general business credit is allowed for each new qualified low-income building placed in service after 1986. Generally, it is taken over a 10-year credit period.

Taxpayers, other than partnerships, S corporations, estates, or trusts, whose only source of this credit is from those pass-through entities, are not required to complete or file this form. Instead, they can report this credit directly on Form 3800.

Qualified Low-Income Housing Project

The credit cannot exceed the amount allocated to the building. See section 42(h)(1) for details.

The low-income housing credit can only be claimed for residential rental buildings in low-income housing projects that meet one of the minimum set-aside tests. For details, see the instructions for Form 8609, Part II, line 10c.

Except for buildings financed with certain tax-exempt bonds, you may not take a low-income housing credit on a building if it has not received an allocation from the housing credit agency. No allocation is needed when 50% or more of the aggregate basis of the building and the land on which the building is located is financed with certain tax-exempt bonds. The owner must still get a Form 8609 from the appropriate housing credit agency (with the applicable items completed, including an assigned BIN). "Land on which the building is located" includes only land that is functionally related and subordinate to the qualified low-income building. (See Regulations sections 1.103-8(a)(3) and 1.103-8(b)(4)(iii).)

Recapture of Credit

There is a 15-year compliance period during which the residential rental building must continue to meet certain requirements. If, as of the close of any tax year in this period, there is a reduction in the qualified basis of the building from the previous year, you may have to recapture a part of the credit you have taken. Similarly, you may have to recapture part of the credits taken in previous years upon certain dispositions of the building or interests therein, unless you follow the procedures to prevent recapture. See Recapture and building dispositions in the Instructions for Form 8609-A, Annual Statement for Low-Income Housing Credit, for details. If you must recapture credits, use Form 8611, Recapture of Low-Income Housing Credit. See section 42(j) for details.

Recordkeeping

Keep a copy of this Form 8586 together with all Forms 8609, Forms 8609-A, and Forms 8611 for 3 years after the 15-year compliance period ends.

Specific Instructions

Line 2. A decrease in qualified basis will result in recapture if the qualified basis at the close of the tax year is less than the qualified basis at the close of the first year of the credit period.

If the reduction in qualified basis at the close of the tax year also results in a violation of the minimum set-aside requirement, then no credit is allowable for the year.

Line 3. The credit for the year is figured on Form 8609-A for each building. Attach a copy of each Form 8609-A you completed for the tax year to Form 8586. Enter on line 3 the total credit for attached Form(s) 8609-A.

Line 6. Estates or trusts. Allocate the low-income housing credit on line 5 between the estate or trust and the beneficiaries in the same proportion as income was allocated and enter the beneficiaries' share on line 6.

If the estate or trust is subject to the passive activity rules, include on line 4 any low-income housing credits from passive activities disallowed for prior years and carried forward to this year. Complete Form 8582-CR, Passive Activity Credit Limitations, to determine the allowed credit that must be allocated between the estate or trust and the beneficiaries. For details, see the Instructions for Form 8582-CR.

Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated burden for individual taxpayers filing this form is approved under OMB control number 1545-0074 and is included in the estimates shown in the instructions for their individual income tax return. The estimated burden for all other taxpayers who file this form is shown below.

Recordkeeping5 hr., 44 min.Learning about the law or the form5 preparingPreparing and sending the form to the IRS2 hr., 11 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. See the instructions for the tax return with which this form is filed.

Form **8606**

Department of the Treasury Internal Revenue Service (99)

Nondeductible IRAs

► Go to www.irs.gov/Form8606 for instructions and the latest information.

► Attach to 2021 Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074

2021

Attachment
Sequence No. 48

Name. If married, file a separate form for each spouse required to file 2021 Form 8606. See instructions. **Total Forms Filed =** 3,076,146

Your social security number

Fill in Your Address
Only if You Are
Filing This Form by
Itself and Not With
Your Tax Return

Home address (number and street, or P.O. box if mail is not delivered to your home)

Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instructions).

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

Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, SEP, and SIMPLE IRAs Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2021.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2021 **and** you made nondeductible contributions to a traditional IRA in 2021 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2021 Forms 8915-D and 8915-F)), qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2021 **and** you made nondeductible contributions to a traditional IRA in 2021 or an earlier year.

nondeductible contributions to a traditional IRA in 2021 or an earlier year.						
1	Enter your nondeductible contributions to traditional IRAs for 2021, including those made for 2021					
	from January 1, 2022, through April 18, 2022. See instructions	2	1,102,407 1,076,074			
2	•	Enter your total basis in traditional IRAs. See instructions				
3	Add lines 1 and 2			3	1,809,348	
	In 2021, did you take a distribution No Enter the amount					
	from traditional, SEP, or SIMPLE IRAs, Do not complete t	he res	st of Part I.			
	or make a Roth IRA conversion? Yes — Go to line 4.				00 745	
4	Enter those contributions included on line 1 that were made from January 1, 2022,	throug	h April 18, 2022	4	23,745	
5	Subtract line 4 from line 3			5	1,801,440	
6	Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December					
	31, 2021, plus any outstanding rollovers. Subtract any repayments of qualified		434,526			
	disaster distributions (see 2021 Forms 8915-D and 8915-F)	6	434,320			
7	Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2021. Do not					
	include rollovers (other than repayments of qualified disaster distributions (see					
	2021 Forms 8915-D and 8915-F)), qualified charitable distributions, a one-time					
	distribution to fund an HSA, conversions to a Roth IRA, certain returned					
	contributions, or recharacterizations of traditional IRA contributions (see instructions)					
0	Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to					
8	Roth IRAs in 2021. Also, enter this amount on line 16					
9	Add lines 6, 7, and 8	-				
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3					
	places. If the result is 1.000 or more, enter "1.000"					
11	places. If the result is 1.000 or more, enter "1.000"					
	converted to Roth IRAs. Also, enter this amount on line 17					
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions					
	that you did not convert to a Roth IRA	12	480,074			
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions	13	827,202			
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2021 $$	14	1,515,676			
15a	Subtract line 12 from line 7	15a	503,835			
b	Enter the amount on line 15a attributable to qualified disaster distributions from					
	and 8915-F (see instructions). Also, enter this amount on 2021 Form 8915-D, li					
	8915-F, line 18, as applicable	15b	1,830			
С	Taxable amount. Subtract line 15b from line 15a. If more than zero, also include		500 507			
	Form 1040, 1040-SR, or 1040-NR, line 4b	15c	503,597			
	Note: You may be subject to an additional 10% tax on the amount on line 15c in 50% at the disease of the elicitative time. One instructions					
	59½ at the time of the distribution. See instructions.					

Form **8606**

Department of the Treasury

Nondeductible IRAs

► Go to www.irs.gov/Form8606 for instructions and the latest information.

OMB No. 1545-0074

Internal Revenue Service (99) ► Attach to 2021 Form 1040, 1040-SR, or 1040-NR. Sequence No. 48 Name. If married, file a separate form for each spouse required to file 2021 Form 8606. See instructions. Your social security number Total Forms Filed = 3,076,146 Home address (number and street, or P.O. box if mail is not delivered to your home) Apt. no. **Fill in Your Address** Only if You Are City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instructions). Filing This Form by **Itself and Not With** Foreign country name Foreign province/state/county Foreign postal code **Your Tax Return** Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, SEP, and SIMPLE IRAs Part I Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2021.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2021 and you made nondeductible contributions to a traditional IRA in 2021 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2021 Forms 8915-D and 8915-F)), qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2021 and you made nondeductible contributions to a traditional IRA in 2021 or an earlier year.

nonacauclible contributions to a traditional in Vin 2021 of an earlier year.		
Enter your nondeductible contributions to traditional IRAs for 2021, including those made for 2021		
	\vdash	7,693,101
·	\vdash	37,296,031
	3	44,989,131
··· = · · · · · · · · · · · · · · ·		
[
Enter those contributions included on line 1 that were made from January 1, 2022, through April 18, 2022	4	165,826
Subtract line 4 from line 3	5	44,823,306
Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December		
31, 2021, plus any outstanding rollovers. Subtract any repayments of qualified		
disaster distributions (see 2021 Forms 8915-D and 8915-F)		
Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2021, Do not		
include rollovers (other than repayments of qualified disaster distributions (see		
2021 Forms 8915-D and 8915-F)), qualified charitable distributions, a one-time		
Multiply line 8 by line 10. This is the nontaxable portion of the amount you		
Multiply line 7 by line 10. This is the nontaxable portion of your distributions		
· · · · · · · · · · · · · · · · · · ·	13	5,322,693
·	-	39,666,438
	15a	19,649,978
Enter the amount on line 15a attributable to qualified disaster distributions from 2021 Forms 8915-D		
	15b	5,219
· · · · · · · · · · · · · · · · · · ·	_	40.044.750
	15c	19,644,759
59/2 at the time of the distribution. See instructions.		- 0000
	Enter your nondeductible contributions to traditional IRAs for 2021, including those made for 2021 from January 1, 2022, through April 18, 2022. See instructions Add lines 1 and 2 In 2021, did you take a distribution from traditional, SEP, or SIMPLE IRAs, or make a Roth IRA conversion? Per those contributions included on line 1 that were made from January 1, 2022, through April 18, 2022 Subtract line 4 from line 3 Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December 31, 2021, plus any outstanding rollovers. Subtract any repayments of qualified disaster distributions (see 2021 Forms 8915-D and 8915-F) Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2021. Do not include rollovers (other than repayments of qualified disaster distributions (see 2021 Forms 8915-D and 8915-F), qualified charitable distributions, a one-time distributions, or recharacterizations of traditional IRA contributions (see instructions) Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2021. Also, enter this amount on line 16 Add lines 6, 7, and 8 Do not complete the rest of Part I. Yes Go to line 4. Fine the value of all your traditional, SEP, and SIMPLE IRAs as of December 31, 2022, through April 18, 2022 Better the value of all your distributions (see 2021 Forms 8915-D and 8915-F) Enter the net amount you converted from traditional IRA contributions (see instructions) Fine the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000" Multiply line 8 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000" Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth IRA 21,786,053 Add lines 11 and 12. This is the nontaxable portion of all your distributions Subtract line 13 from line 3. This is your total basis in traditi	Enter your nondeductible contributions to traditional IRAs for 2021, including those made for 2021 from January 1, 2022, through April 18, 2022. See instructions

Form 8606 (2021) Page 2 2021 Conversions From Traditional, SEP, or SIMPLE IRAs to Roth IRAs Part II Complete this part if you converted part or all of your traditional, SEP, and SIMPLE IRAs to a Roth IRA in 2021. If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted 16 16 626,598 If you completed Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on 17 17 368,197 18 Taxable amount. Subtract line 17 from line 16. If more than zero, also include this amount on 2021 18 Part III **Distributions From Roth IRAs** Complete this part only if you took a distribution from a Roth IRA in 2021. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2021 Forms 8915-D and 8915-F)), qualified charitable distribution, one-time distribution to fund an HSA, recharacterization, or return of certain contributions (see instructions). 19 Enter your total nonqualified distributions from Roth IRAs in 2021, including any qualified first-time homebuyer distributions, and any qualified disaster distributions (see instructions). Also, see 2021 374,192 19 Qualified first-time homebuyer expenses (see instructions). **Do not** enter more than \$10,000 reduced 20 by the total of all your prior qualified first-time homebuyer distributions 20 16,773 21 362,830 21 22 Enter your basis in Roth IRA contributions (see instructions). If line 21 is zero, stop here 22 202,135 23 Subtract line 22 from line 21. If zero or less, enter -0- and skip lines 24 and 25. If more than zero, you 218,113 23 24 Enter your basis in conversions from traditional, SEP, and SIMPLE IRAs and rollovers from qualified 24 16.348 Subtract line 24 from line 23. If zero or less, enter -0- and skip lines 25b and 25c 25a 205,224 25a Enter the amount on line 25a attributable to qualified disaster distributions from 2021 Forms 8915-D and 8915-F (see instructions). Also, enter this amount on 2021 Form 8915-D, line 24; or 2021 Form 25b 3.328 c Taxable amount. Subtract line 25b from line 25a. If more than zero, also include this amount on 2021 Form 1040, 1040-SR, **or** 1040-NR, line 4b 201,898 Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and Sign Here Only if You belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. **Are Filing This Form** b Υ

by Itself and Not With Your Tax Return		Your signature			Date		
Paid	Print/Type prep	parer's name	Preparer's signature	Date	Check if self-employed PTIN		
Preparer Use Only	Firm's name ▶			Firm's EIN ▶			
Use Only	Firm's address ▶				Phone no.		

Form **8606** (2021)

Form 86	606 (2021)							Page 2
Part	I 20	021 Conv	ersions From Traditi	onal, SEP, or SIMPLE IR	As to Roth IRAs			
	С	omplete th	is part if you converted p	part or all of your traditional,	SEP, and SIMPLE IR	As to a Roth	IRA in	2021.
16	If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2021				16	23,996,509		
17	If you completed Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on line 16 (see instructions)				17	3,926,180		
18	Taxable amount. Subtract line 17 from line 16. If more than zero, also include this amount on 2021 Form 1040, 1040-SR, or 1040-NR, line 4b				18	20,070,329		
Part			ns From Roth IRAs					
	Complete this part only if you took a distribution from a Roth IRA in 2021. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2021 Forms 8915-D and 8915-F)), qualified charitable distribution, one-time distribution to fund an HSA, recharacterization, or return of certain contributions (see instructions).							915-F)), qualified
19	Enter your total nonqualified distributions from Roth IRAs in 2021, including any qualified first-time homebuyer distributions, and any qualified disaster distributions (see instructions). Also, see 2021 Forms 8915-D and 8915-F				19	3,686,960		
20	Qualified first-time homebuyer expenses (see instructions). Do not enter more than \$10,000 reduced by the total of all your prior qualified first-time homebuyer distributions				20	136,043		
21	Subtra	ct line 20 fr	rom line 19. If zero or les	s, enter -0			21	3,557,337
22	Enter your basis in Roth IRA contributions (see instructions). If line 21 is zero, stop here				22	4,566,218		
23	Subtract line 22 from line 21. If zero or less, enter -0- and skip lines 24 and 25. If more than zero, you may be subject to an additional tax (see instructions)				23	1,736,674		
24	-			litional, SEP, and SIMPLE IF ctions		•	24	1,541,944
25a	Subtra	ct line 24 fr	rom line 23. If zero or les	s, enter -0- and skip lines 25	b and 25c		25a	1,271,564
b	b Enter the amount on line 25a attributable to qualified disaster distributions from 2021 Forms 8915-D and 8915-F (see instructions). Also, enter this amount on 2021 Form 8915-D, line 24; or 2021 Form							
							25b	7,043
С				line 25a. If more than zero, a				
							25c	1,264,521
Are Fi	iling Thi	Not With	belief, it is true, correct, and con	eclare that I have examined this form, mplete. Declaration of preparer (other the	including accompanying att an taxpayer) is based on all	achments, and to information of wh	the bes	it of my knowledge and arer has any knowledge.
Your	Your Tax Return Your signature Date			Date				
Paid	0404	Print/Type p	reparer's name	Preparer's signature	Date	Check self-em		PTIN
Prep Use		Firm's name	· •		1	Firm's I	EIN ►	
	Cilly	Firm's address ► Phone no				no.		
								Form 8606 (2021)

Form **8615**

Department of the Treasury Internal Revenue Service (99)

Tax for Certain Children Who Have Unearned Income

► Attach only to the child's Form 1040 or Form 1040-NR.

► Go to www.irs.gov/Form8615 for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment Sequence No. 33

Child's social security number Child's name shown on return Total Forms Filed = 406,867 Before you begin: If the child, the parent, or any of the parent's other children for whom Form 8615 must be filed must use the Schedule D Tax Worksheet or has income from farming or fishing, see Pub. 929, Tax Rules for Children and Dependents. It explains how to figure the child's tax using the Schedule D Tax Worksheet or Schedule J (Form 1040). A Parent's name (first, initial, and last). Caution: See instructions before completing. B Parent's social security number **C** Parent's filing status (check one): Single Married filing jointly Married filing separately Head of household Qualifying widow(er) **Child's Net Unearned Income** Part I 406,867 If the child did not itemize deductions on Schedule A (Form 1040) or Schedule A (Form 1040-NR), 406,867 Subtract line 2 from line 1. If zero or less, stop; do not complete the rest of this form but do attach it 405,859 Enter the child's taxable income from Form 1040 or 1040-NR, line 15. If the child files Form 2555, 4 383,609 Enter the **smaller** of line 3 or line 4. If zero, **stop**; do not complete the rest of this form but **do** attach it 383.609 Part II **Tentative Tax Based on the Tax Rate of the Parent** Enter the parent's taxable income from Form 1040 or 1040-NR, line 15. If zero or less, enter -0-. If 6 321,308 7 Enter the total, if any, from Forms 8615, line 5, of all other children of the parent named above. Do 7 123,139 8 386,736 Enter the tax on the amount on line 8 based on the parent's filing status above. See instructions. If 9 the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J 376,648 Enter the parent's tax from Form 1040 or 1040-NR, line 16, minus any alternative minimum tax. Do 10 not include any tax from Form 4972, 8814, or 8885 or any tax from recapture of an education credit. If the parent files Form 2555, see the instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040) was used to figure the tax, check 319,286 10 Subtract line 10 from line 9 and enter the result. If line 7 is blank, also enter this amount on line 13 and 11 359.344 11 Divide line 5 by line 12a. Enter the result as a decimal (rounded to at least three places) 12b 13 359,344 Child's Tax-If lines 4 and 5 above are the same, enter -0- on line 15 and go to line 16. Part III 14 Enter the tax on the amount on line 14 based on the child's filing status. See instructions. If the 15 Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J 171,364 15 363,375 16 16 Enter the tax on the amount on line 4 based on the child's filing status. See instructions. If the 17 Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J 17 259,648 Enter the larger of line 16 or line 17 here and on the child's Form 1040 or 1040-NR, line 16. If the 18 364,366

8615

Department of the Treasury Internal Revenue Service (99)

Tax for Certain Children Who **Have Unearned Income**

► Attach only to the child's Form 1040 or Form 1040-NR. ▶ Go to www.irs.gov/Form8615 for instructions and the latest information. OMB No. 1545-0074 Attachment Sequence No. 33

Child's name shown on return Child's social security number 406,867 Total Forms Filed = Before you begin: If the child, the parent, or any of the parent's other children for whom Form 8615 must be filed must use the Schedule D Tax Worksheet or has income from farming or fishing, see Pub. 929, Tax Rules for Children and Dependents. It explains how to figure the child's tax using the Schedule D Tax Worksheet or Schedule J (Form 1040). A Parent's name (first, initial, and last). Caution: See instructions before completing. B Parent's social security number **C** Parent's filing status (check one): Married filing separately Qualifying widow(er) Sinale Married filing jointly Head of household **Child's Net Unearned Income** Part I 7,438,007 2 If the child did not itemize deductions on Schedule A (Form 1040) or Schedule A (Form 1040-NR), 2 899,599 Subtract line 2 from line 1. If zero or less, stop; do not complete the rest of this form but do attach it 6,538,493 3 Enter the child's taxable income from Form 1040 or 1040-NR, line 15. If the child files Form 2555, 6.800.786 4 Enter the smaller of line 3 or line 4. If zero, stop; do not complete the rest of this form but do attach it 5 6,101,235 Part II **Tentative Tax Based on the Tax Rate of the Parent** Enter the parent's taxable income from Form 1040 or 1040-NR, line 15. If zero or less, enter -0-. If 856.336.570 Enter the total, if any, from Forms 8615, line 5, of all other children of the parent named above. Do 7 7 4.857.316 8 867.295.120 Enter the tax on the amount on line 8 based on the parent's filing status above. See instructions. If 9 the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J 240,671,457 Enter the parent's tax from Form 1040 or 1040-NR, line 16, minus any alternative minimum tax. Do 10 not include any tax from Form 4972, 8814, or 8885 or any tax from recapture of an education credit. If the parent files Form 2555, see the instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040) was used to figure the tax, check 238,317,296 10 Subtract line 10 from line 9 and enter the result. If line 7 is blank, also enter this amount on line 13 and 11 2,354,162 11 12a Divide line 5 by line 12a. Enter the result as a decimal (rounded to at least three places) 12b 13 1,269,907 Child's Tax-If lines 4 and 5 above are the same, enter -0- on line 15 and go to line 16. Part III 14 Enter the tax on the amount on line 14 based on the child's filing status. See instructions. If the 15 Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J 40,982 15 1,310,890 16 Enter the tax on the amount on line 4 based on the child's filing status. See instructions. If the 17 Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J 17 786,220 Enter the larger of line 16 or line 17 here and on the child's Form 1040 or 1040-NR, line 16. If the 18 1,319,541 For Paperwork Reduction Act Notice, see your tax return instructions. Form **8615** (2021)

Cat. No. 64113U

Department of the Treasury Internal Revenue Service (99)

Credit for Prior Year Minimum Tax— Individuals, Estates, and Trusts

► Go to www.irs.gov/Form8801 for instructions and the latest information. ► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

OMB No. 1545-1073 Attachment Sequence No. **801**

Name(s) shown on return

Total Forms Filed = 244,604

Identifying number

Par	Net Minimum Tax on Exclusion Items			
1	Combine lines 1 and 2e of your 2020 Form 6251. Estates and trusts, see instructions	[1	199,553
2	Enter adjustments and preferences treated as exclusion items (see instructions)		2	196,521
3	Minimum tax credit net operating loss deduction (see instructions)		3 ((4,552)
4	Combine lines 1, 2, and 3. If zero or less, enter -0- here and on line 15 and go to Part II. If more \$745,200 and you were married filing separately for 2020, see instructions		4	179,050
5	Enter: \$113,400 if married filing jointly or qualifying widow(er) for 2020; \$72,900 if single or her household for 2020; or \$56,700 if married filing separately for 2020. Estates and trusts, enter \$25,		5	244,601
6	Enter: \$1,036,800 if married filing jointly or qualifying widow(er) for 2020; \$518,400 if single, head household, or married filing separately for 2020. Estates and trusts, enter \$84,800		6	244,601
7	Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9		7	32,918
8	Multiply line 7 by 25% (0.25)		8	32,918
9	Subtract line 8 from line 5. If zero or less, enter -0		9	220,986
10	Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15 and go to Part II. 1040-NR filers, see instructions	Form	10	126,350
11	• If for 2020 you filed Form 2555, see instructions for the amount to enter.	,		
	• If for 2020 you reported capital gain distributions directly on Form 1040, 1040-SR, or 1040-NR, line 7; you reported qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a (Form 1041, line 2b(2)); or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (lines 18a and 19, column (2), of Schedule D (Form 1041)), complete Part III of Form 8801 and enter the amount from line 55 here.	}	11	124,806
	• All others: If line 10 is \$197,900 or less (\$98,950 or less if married filing separately for 2020), multiply line 10 by 26% (0.26). Otherwise, multiply line 10 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately for 2020) from the result.			
12	Minimum tax foreign tax credit on exclusion items (see instructions)		12	47,473
13	Tentative minimum tax on exclusion items. Subtract line 12 from line 11		13	121,836
14	Enter the amount from your 2020 Form 6251, line 10, or 2020 Form 1041, Schedule I, line 53 .		14	125,516
15	Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0		15	30,740
For Pa	perwork Reduction Act Notice, see instructions. Cat. No. 10002S			Form 8801 (2021)

Form **8801**

Department of the Treasury Internal Revenue Service (99)

Credit for Prior Year Minimum Tax—Individuals, Estates, and Trusts

Individuals, Estates, and Trusts

► Go to www.irs.gov/Form8801 for instructions and the latest information.

► Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

OMB No. 1545-1073

2021

Attachment Sequence No. 801

Name(s) shown on return

Total Forms Filed = 244,604

Identifying number

Part	Net Minimum Tax on Exclusion Items	_	Τ
1	Combine lines 1 and 2e of your 2020 Form 6251. Estates and trusts, see instructions	1	161,460,402
2	Enter adjustments and preferences treated as exclusion items (see instructions)	2	3,847,197
3	Minimum tax credit net operating loss deduction (see instructions)	3	(1,914,101)
4	Combine lines 1, 2, and 3. If zero or less, enter -0- here and on line 15 and go to Part II. If more than \$745,200 and you were married filing separately for 2020, see instructions	4	173,649,714
5	Enter: \$113,400 if married filing jointly or qualifying widow(er) for 2020; \$72,900 if single or head of household for 2020; or \$56,700 if married filing separately for 2020. Estates and trusts, enter \$25,400	5	24,473,866
6	Enter: \$1,036,800 if married filing jointly or qualifying widow(er) for 2020; \$518,400 if single, head of household, or married filing separately for 2020. Estates and trusts, enter \$84,800	6	213,160,029
7	Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9	7	111,520,536
8	Multiply line 7 by 25% (0.25)	8	27,880,139
9	Subtract line 8 from line 5. If zero or less, enter -0	9	21,685,003
10	Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15 and go to Part II. Form 1040-NR filers, see instructions	10	160,981,529
11	• If for 2020 you filed Form 2555, see instructions for the amount to enter.		
	• If for 2020 you reported capital gain distributions directly on Form 1040, 1040-SR, or 1040-NR, line 7; you reported qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a (Form 1041, line 2b(2)); or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (lines 18a and 19, column (2), of Schedule D (Form 1041)), complete Part III of Form 8801 and enter the amount from line 55 here. • All others: If line 10 is \$197,900 or less (\$98,950 or less if married filing separately for 2020), multiply line 10 by 26% (0.26). Otherwise, multiply line 10 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately for 2020) from the result.	11	34,513,915
12	Minimum tax foreign tax credit on exclusion items (see instructions)	12	1,619,501
13	Tentative minimum tax on exclusion items. Subtract line 12 from line 11	13	32,928,387
14	Enter the amount from your 2020 Form 6251, line 10, or 2020 Form 1041, Schedule I, line 53	14	33,878,978
15	Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0	15	927,495 Form 8801 (2021)
For Pa	perwork Reduction Act Notice, see instructions. Cat. No. 10002S		rorm 600 i (2021)

Form 8801 (2021) Page **2**

Par	Minimum Tax Credit and Carryforward to 2022		
16	Enter the amount from your 2020 Form 6251, line 11, or 2020 Form 1041, Schedule I, line 54	16	61,129
17	Enter the amount from line 15	17	
18	Subtract line 17 from line 16. If less than zero, enter as a negative amount	18	60,793
19	2020 credit carryforward. Enter the amount from your 2020 Form 8801, line 26	19	156,874
20	Enter your 2020 unallowed qualified electric vehicle credit (see instructions)	20	*
21	Combine lines 18 through 20. If zero or less, stop here and see the instructions	21	194,161
22	Enter your 2021 regular income tax liability minus allowable credits (see instructions)	22	165,140
23	Enter the amount from your 2021 Form 6251, line 9, or 2021 Form 1041, Schedule I, line 52	23	136,984
24	Subtract line 23 from line 22. If zero or less, enter -0	24	130,611
25	Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2021 Schedule 3 (Form 1040), line 6b; or Form 1041, Schedule G, line 2c	25	123,940
26	Credit carryforward to 2022. Subtract line 25 from line 21. Keep a record of this amount because you may use it in future years	26	124,984

Form **8801** (2021)

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 8801 (2021) Page 2 Minimum Tax Credit and Carryforward to 2022 Part II 16 Enter the amount from your 2020 Form 6251, line 11, or 2020 Form 1041, Schedule I, line 54 . . . 16 2,045,531 17 17 1,118,036 18 Subtract line 17 from line 16. If less than zero, enter as a negative amount 18 19 2020 credit carryforward. Enter the amount from your 2020 Form 8801, line 26 19 7,402,150 20 Enter your 2020 unallowed qualified electric vehicle credit (see instructions) . . . 20 21 Combine lines 18 through 20. If zero or less, stop here and see the instructions 21 8,907,380 22 22 Enter your 2021 regular income tax liability minus allowable credits (see instructions) 50,727,372 23 Enter the amount from your 2021 Form 6251, line 9, or 2021 Form 1041, Schedule I, line 52. . . . 23 48,917,895 Subtract line 23 from line 22. If zero or less, enter -0-24 3,797,373 24 25 Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2021 Schedule 3 (Form 1040), line 6b; or Form 1041, Schedule G, line 2c. 25 1,487,552 26 Credit carryforward to 2022. Subtract line 25 from line 21. Keep a record of this amount because 7,419,828 26

Form **8801** (2021)

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 8801 (2021) Page **3**

Part	Tax Computation Using Maximum Capital Gains Rates Complete Part III only if you are required to do so by line 11 or by the Foreign Earned Income Tax Work	sheet	in the instructions.
	Caution: If you didn't complete the 2020 Qualified Dividends and Capital Gain Tax Worksheet, the 2020 Schedule D Tax Worksheet, or Part V of the 2020 Schedule D (Form 1041), see the instructions before completing this part.*		
27	Enter the amount from Form 8801, line 10. If you filed Form 2555 for 2020, enter the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions	27	
	Caution: If for 2020 you filed Form 1041 or 2555, see the instructions before completing lines 28, 29, and 30.		
28	Enter the amount from line 4 of your 2020 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2020 Schedule D Tax Worksheet, or the amount from line 26 of the 2020 Schedule D (Form 1041), whichever applies (as refigured for the AMT, if necessary)*	28	
	If you figured your 2020 tax using the 2020 Qualified Dividends and Capital Gain Tax Worksheet, skip line 29 and enter the amount from line 28 on line 30. Otherwise, go to line 29.		
29	Enter the amount from line 19 of your 2020 Schedule D (Form 1040), or line 18b, column (2), of the 2020 Schedule D (Form 1041)	29	
30	Add lines 28 and 29, and enter the smaller of that result or the amount from line 10 of your 2020 Schedule D Tax Worksheet	30	
31 32	Enter the smaller of line 27 or line 30	31 32	
33	If line 32 is \$197,900 or less (\$98,950 or less if married filing separately for 2020), multiply line 32 by	32	
	26% (0.26). Otherwise, multiply line 32 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately for 2020) from the result	33	
34	Enter: • \$80,000 if married filing jointly or qualifying widow(er) for 2020, • \$40,000 if single or married filing separately for 2020, • \$53,600 if head of household for 2020, or • \$2,650 for an estate or trust.	34	
35	Enter the amount from line 5 of your 2020 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2020 Schedule D Tax Worksheet, or the amount from line 27 of the 2020 Schedule D (Form 1041), whichever applies. If you didn't complete either worksheet or Part V of the 2020 Schedule D (Form 1041), enter the amount from your 2020 Form 1040, 1040-SR, or 1040-NR, line 15, or 2020 Form 1041, line 23, whichever applies; if zero or less, enter -0	35	
36	Subtract line 35 from line 34. If zero or less, enter -0	36	
37	Enter the smaller of line 27 or line 28	37 38	
38 39	Subtract line 38 from line 37	39	
40	Enter: • \$441,450 if single for 2020, • \$248,300 if married filing separately for 2020, • \$496,600 if married filing jointly or qualifying widow(er) for 2020,	40	
	• \$469,050 if head of household for 2020, or	70	
	• \$13,150 for an estate or trust.		
41	Enter the amount from line 36	41	
42	Form 1040, 1040-SR, or 1040-NR filers, enter the amount from line 5 of your 2020 Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of your 2020 Schedule D Tax Worksheet, whichever applies. If you didn't complete either worksheet, see instructions. Form 1041 filers, enter the amount from line 27 of your 2020 Schedule D (Form 1041) or line 18 of your 2020 Schedule D Tax Worksheet, whichever applies. If you didn't complete either the worksheet or Part V of the 2020 Schedule D (Form 1041), enter the amount from your 2020 Form 1041, line 23; if zero or less, enter -0	42	

^{*} The 2020 Qualified Dividends and Capital Gain Tax Worksheet is in the 2020 Instructions for Forms 1040 and 1040-SR. The 2020 Schedule D Tax Worksheet is in the 2020 Instructions for Schedule D (Form 1040) (or the 2020 Instructions for Schedule D (Form 1041)).

Form 8801 (2021) Page **3**

Part			
	Complete Part III only if you are required to do so by line 11 or by the Foreign Earned Income Tax Works	sheet	in the instructions.
	Caution: If you didn't complete the 2020 Qualified Dividends and Capital Gain Tax Worksheet, the 2020 Schedule D Tax Worksheet, or Part V of the 2020 Schedule D (Form 1041), see the instructions before completing this part.*		
27	Enter the amount from Form 8801, line 10. If you filed Form 2555 for 2020, enter the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions	27	
	Caution: If for 2020 you filed Form 1041 or 2555, see the instructions before completing lines 28, 29, and 30.		
28	Enter the amount from line 4 of your 2020 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2020 Schedule D Tax Worksheet, or the amount from line 26 of the 2020 Schedule D (Form 1041), whichever applies (as refigured for the AMT, if necessary)*	28	
	If you figured your 2020 tax using the 2020 Qualified Dividends and Capital Gain Tax Worksheet, skip line 29 and enter the amount from line 28 on line 30. Otherwise, go to line 29.		
29	Enter the amount from line 19 of your 2020 Schedule D (Form 1040), or line 18b, column (2), of the 2020 Schedule D (Form 1041)	29	
30	Add lines 28 and 29, and enter the smaller of that result or the amount from line 10 of your 2020 Schedule D Tax Worksheet	30	
31	Enter the smaller of line 27 or line 30	31	
32	Subtract line 31 from line 27	32	
33	If line 32 is \$197,900 or less (\$98,950 or less if married filing separately for 2020), multiply line 32 by 26% (0.26). Otherwise, multiply line 32 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately for 2020) from the result	33	
34	 \$80,000 if married filing jointly or qualifying widow(er) for 2020, \$40,000 if single or married filing separately for 2020, \$53,600 if head of household for 2020, or \$2,650 for an estate or trust. 	34	
35	Enter the amount from line 5 of your 2020 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2020 Schedule D Tax Worksheet, or the amount from line 27 of the 2020 Schedule D (Form 1041), whichever applies. If you didn't complete either worksheet or Part V of the 2020 Schedule D (Form 1041), enter the amount from your 2020 Form 1040, 1040-SR, or 1040-NR, line 15, or 2020 Form 1041, line 23, whichever applies; if zero or less, enter -0	35	
36	Subtract line 35 from line 34. If zero or less, enter -0	36	_
37	Enter the smaller of line 27 or line 28	37	_
38	Enter the smaller of line 36 or line 37	38	
39	Subtract line 38 from line 37	39	
40	 \$441,450 if single for 2020, \$248,300 if married filing separately for 2020, \$496,600 if married filing jointly or qualifying widow(er) for 2020, \$469,050 if head of household for 2020, or \$13,150 for an estate or trust. 	40	
41	Enter the amount from line 36	41	
42	Form 1040, 1040-SR, or 1040-NR filers, enter the amount from line 5 of your 2020 Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of your 2020 Schedule D Tax Worksheet, whichever applies. If you didn't complete either worksheet, see instructions. Form 1041 filers, enter the amount from line 27 of your 2020 Schedule D (Form 1041) or line 18 of your 2020 Schedule D Tax Worksheet, whichever applies. If you didn't complete either the worksheet or Part V of the 2020 Schedule D (Form 1041), enter the amount from your 2020 Form 1041, line 23; if zero or less, enter -0	42	

^{*} The 2020 Qualified Dividends and Capital Gain Tax Worksheet is in the 2020 Instructions for Forms 1040 and 1040-SR. The 2020 Schedule D Tax Worksheet is in the 2020 Instructions for Schedule D (Form 1040) (or the 2020 Instructions for Schedule D (Form 1041)).

Form 8801 (2021) Page **4**

Part	Tax Computation Using Maximum Capital Gains Rates (continued)		
43	Add lines 41 and 42	43	
44	Subtract line 43 from line 40. If zero or less, enter -0	44	
45	Enter the smaller of line 39 or line 44	45	
46	Multiply line 45 by 15% (0.15)	46	
47	Add lines 38 and 45	47	
	If lines 47 and 27 are the same, skip lines 48 through 52 and go to line 53. Otherwise, go to line		
	48.		
48	Subtract line 47 from line 37	48	
49	Multiply line 48 by 20% (0.20) · · · · · · · · · · · · · · · · ▶	49	
	If line 29 is zero or blank, skip lines 50 through 52 and go to line 53. Otherwise, go to line 50.		
50	Add lines 32, 47, and 48	50	
51	Subtract line 50 from line 27	51	
52	Multiply line 51 by 25% (0.25) · · · · · · · · · · · · · · · · ▶	52	
53	Add lines 33, 46, 49, and 52	53	
54	If line 27 is \$197,900 or less (\$98,950 or less if married filing separately for 2020), multiply line 27 by 26% (0.26). Otherwise, multiply line 27 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing		
	separately for 2020) from the result	54	
55	Enter the smaller of line 53 or line 54 here and on line 11. If you filed Form 2555 for 2020, don't enter		
	this amount on line 11. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet in the		
	instructions for line 11	55	

Form **8801** (2021)

Form 8	Form 8801 (2021)			
Part	Tax Computation Using Maximum Capital Gains Rates (continued)			
43	Add lines 41 and 42	43		
44	Subtract line 43 from line 40. If zero or less, enter -0	44		
45	Enter the smaller of line 39 or line 44	45		
46	Multiply line 45 by 15% (0.15)	46		
47	Add lines 38 and 45	47		
	If lines 47 and 27 are the same, skip lines 48 through 52 and go to line 53. Otherwise, go to line 48.			
48	Subtract line 47 from line 37	48		
49	Multiply line 48 by 20% (0.20) · · · · · · · · · · · · · · · · ▶	49		
	If line 29 is zero or blank, skip lines 50 through 52 and go to line 53. Otherwise, go to line 50.		_	
50	Add lines 32, 47, and 48	50		
51	Subtract line 50 from line 27	51	_	
52	Multiply line 51 by 25% (0.25) · · · · · · · · · · · · · · · · ▶	52		
53	Add lines 33, 46, 49, and 52	53		
54	If line 27 is \$197,900 or less (\$98,950 or less if married filing separately for 2020), multiply line 27 by 26% (0.26). Otherwise, multiply line 27 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing			
	separately for 2020) from the result	54		
55	Enter the smaller of line 53 or line 54 here and on line 11. If you filed Form 2555 for 2020, don't enter this amount on line 11. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet in the			
	instructions for line 11	55		
			Form 8801 (2021)	

Form **8814**

Department of the Treasury Internal Revenue Service (99)

Parents' Election To Report Child's Interest and Dividends

► Go to www.irs.gov/Form8814 for the latest information.
► Attach to parents' Form 1040, 1040-SR, or 1040-NR.

Caution: The federal income tax on your child's income, including qualified dividends and capital gain distributions, may be less if you

OMB No. 1545-0074

2021

Attachment
Sequence No. 40

Form **8814** (2021)

Cat. No. 10750J

Name(s) shown on your return

Total Forms Filed = 95,770

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

	a separate tax return for the child instead of making this election. This is because you cannot tak I could take on his or her own return. For details, see <i>Tax benefits you cannot take</i> in the instruction		ax b	enefits that you
Α	Child's name (first, initial, and last)	B Child's	ild's social security nur	
С	If more than one Form 8814 is attached, check here			▶
Pa	rt I Child's Interest and Dividends To Report on Your Return			
	Enter your child's taxable interest. If this amount is different from the amounts shown on the common statement of the stat		а	8,695
2	received any ordinary dividends as a nominee, see the instructions	2	2a	50,041
3	Enter your child's qualified dividends included on line 2a. See the instructions [2b] [25, 19] Enter your child's capital gain distributions. If your child received any capital gain distributions nominee, see the instructions	s as a	3	24,012
4	Add lines 1a, 2a, and 3. If the total is \$2,200 or less, skip lines 5 through 12 and go to line 13. total is \$11,000 or more, do not file this form. Your child must file his or her own return to repoincome	ort the	4	53,433
5 6	Base amount. Enter 2,200	-	5 6	21,120
7	If both lines 2b and 3 are zero or blank, skip lines 7 through 10, enter -0- on line 11, and line 12. Otherwise, go to line 7. Divide line 2b by line 4. Enter the result as a decimal (rounded to at least three places)	go to		
8	Divide line 3 by line 4. Enter the result as a decimal (rounded to at least three places)			
9	Multiply line 6 by line 7. Enter the result here. See the instructions for where to report this amount on your return	81		
10	Multiply line 6 by line 8. Enter the result here. See the instructions for where to report this amount on your return			00.400
11 12	Add lines 9 and 10	In the	1	20,496
	above, see the instructions. Go to line 13 below		2	16,089
Pa	Tax on the First \$2,200 of Child's Interest and Dividends			
13	Amount not taxed. Enter 1,100	1	3	
14	Subtract line 13 from line 4. If the result is zero or less, enter -0	[1	4	53,101
15	Tax. Is the amount on line 14 less than \$1,100? No. Enter \$110 here and see the Note below. You Multiply line 14 by 10% (0.10). Enter the result here and see the Note below.	1	5	53,101
	Yes. Multiply line 14 by 10% (0.10). Enter the result here and see the Note below. Jet If you checked the box on line C above, see the instructions. Otherwise, include the amount from 1040,1040-SR, or 1040-NR, line 16. Be sure to check box 1 on Form 1040, 1040-SR, or 1040-NR, line 16.		the	tax you enter or

Form **8814**

Department of the Treasury Internal Revenue Service (99)

Parents' Election To Report Child's Interest and Dividends

► Go to www.irs.gov/Form8814 for the latest information.
► Attach to parents' Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074

2021

Attachment Sequence No. 40

Name(s) shown on your return

Total Forms Filed = 95,770

file a	ion: The federal income tax on your child's income, including qualified dividends as separate tax return for the child instead of making this election. This is because could take on his or her own return. For details, see Tax benefits you cannot take in	you cannot ta	ke certai			
Α	Child's name (first, initial, and last)		B Child	Child's social security number		
	If more than one Form 8814 is attached, check here				▶	
Par	<u> </u>					
1a	Enter your child's taxable interest. If this amount is different from the amounts Forms 1099-INT and 1099-OID, see the instructions	shown on the		1a	4,356	
b 2a		vidends. If you		2a	121,956	
b	Enter your child's qualified dividends included on line 2a. See the instructions	2b 51,9	58			
3	Enter your child's capital gain distributions. If your child received any capital g nominee, see the instructions			3	93,573	
4	Add lines 1a, 2a, and 3. If the total is \$2,200 or less, skip lines 5 through 12 an total is \$11,000 or more, do not file this form. Your child must file his or her ow income			4	219,885	
5	Base amount. Enter 2,200			5		
6	Subtract line 5 from line 4			6	71,579	
	If both lines 2b and 3 are zero or blank, skip lines 7 through 10, enter -0- of line 12. Otherwise, go to line 7.	on line 11, and	d go to			
7	Divide line 2b by line 4. Enter the result as a decimal (rounded to at least three places)	7				
8	Divide line 3 by line 4. Enter the result as a decimal (rounded to at least three places)	8				
9	Multiply line 6 by line 7. Enter the result here. See the instructions for where to report this amount on your return	9 19,8	300			
10	Multiply line 6 by line 8. Enter the result here. See the instructions for where to report this amount on your return	10 42,	240		60.040	
11	Add lines 9 and 10			11	62,040	
12	Subtract line 11 from line 6. Include this amount in the total on Schedule 1 (Form space next to that line, enter "Form 8814" and show the amount. If you check above, see the instructions. Go to line 13 below	ed the box or		12	9,596	
Par	Tax on the First \$2,200 of Child's Interest and Dividends					
13	Amount not taxed. Enter 1,100			13		
14	Subtract line 13 from line 4. If the result is zero or less, enter -0			14	44,567	
15	Tax. Is the amount on line 14 less than \$1,100?				4 442	
	No. Enter \$110 here and see the Note below.	}		15	4,443	
Note	 ☐ Yes. Multiply line 14 by 10% (0.10). Enter the result here and see the Note be If you checked the box on line C above, see the instructions. Otherwise, include t 		m line 15	in the	tax vou enter on	
	1040,1040-SR, or 1040-NR, line 16. Be sure to check box 1 on Form 1040, 1040-SF				Lax you office off	
For P	aperwork Reduction Act Notice, see your tax return instructions.	at. No. 10750J			Form 8814 (2021)	

Form **8824**

Department of the Treasury Internal Revenue Service

Like-Kind Exchanges

(and section 1043 conflict-of-interest sales)

► Attach to your tax return.

▶ Go to www.irs.gov/Form8824 for instructions and the latest information.

Note: Generally, only real property should be described on lines 1 and 2. However, you may describe personal property transferred

OMB No. 1545-1190

2021

Attachment
Sequence No. 109

Name(s) shown on tax return

Total Forms Filed = 89,215

Information on the Like-Kind Exchange

Identifying number

eal po carty	o January 1, 2018, as part of an exchange subject to the like-kind exchange transition rule described in operty on lines 1 and 2, if you are filing this form to report the disposition of property exchanged in a prolike-kind exchange. If the property described on line 1 or line 2 is real or personal property located oute the country.	evious	sly reporte	ed related
1	Description of like-kind property given up:			
2	Description of like-kind property received:			
3	Date like-kind property given up was originally acquired (month, day, year)	3	MM/DI	D/YYYY
4	Date you actually transferred your property to the other party (month, day, year)	4	MM/DI	D/YYYY
5	Date like-kind property you received was identified by written notice to another party (month, day, year). See instructions for 45-day written identification requirement	5	MM/DI	D/YYYY
6	Date you actually received the like-kind property from other party (month, day, year). See instructions	6	MM/DI	D/YYYY
7	Was the exchange of the property given up or received made with a related party, either directly or indir (such as through an intermediary)? See instructions. If "Yes," complete Part II. If "No," go to Part III.		☐ Yes	☐ No
orope	, ,	ad, re	port the d	isposition
0		u party	3 Identifying	number
9	Address (no., street, and apt., room, or suite no.; city or town; state; and ZIP code) During this tax year (and before the date that is 2 years after the last transfer of property that was pathe exchange), did the related party sell or dispose of any part of the like-kind property received from (or an intermediary) in the exchange?	you	☐ Yes	☐ No
10	During this tax year (and before the date that is 2 years after the last transfer of property that was pathe exchange), did you sell or dispose of any part of the like-kind property you received?		☐ Yes	□ No
	If both lines 9 and 10 are "No" and this is the year of the exchange, go to Part III. If both lines 9 and 10 the year of the exchange, stop here. If either line 9 or line 10 is "Yes," complete Part III and report on deferred gain or (loss) from line 24 unless one of the exceptions on line 11 applies.			
11	If one of the exceptions below applies to the disposition, check the applicable box.			
а	☐ The disposition was after the death of either of the related parties.			
b	☐ The disposition was an involuntary conversion, and the threat of conversion occurred after the exch	ange.		
С	You can establish to the satisfaction of the IRS that neither the exchange nor the disposition had its principal purposes. If this box is checked, attach an explanation. See instructions	tax av	oidance	as one of

Form **8824**

Department of the Treasury Internal Revenue Service

Like-Kind Exchanges

(and section 1043 conflict-of-interest sales)

► Attach to your tax return.

► Go to www.irs.gov/Form8824 for instructions and the latest information.

OMB No. 1545-1190

2021
Attachment
Sequence No. 109

Name(s) shown on tax return

Total Forms Filed = 89,215

Information on the Like-Kind Exchange

Identifying number

prior t real p party	Generally, only real property should be described on lines 1 and 2. However, you may describe to January 1, 2018, as part of an exchange subject to the like-kind exchange transition rule describeroperty on lines 1 and 2, if you are filing this form to report the disposition of property exchanged like-kind exchange. If the property described on line 1 or line 2 is real or personal property locate the country.	ribed in in a pre	the in	struction ly reporte	ns, and/or ed related
1	Description of like-kind property given up:				
2	Description of like-kind property received:				
3	Date like-kind property given up was originally acquired (month, day, year)		3	MM/DI	D/YYYY
4	Date you actually transferred your property to the other party (month, day, year)		4	MM/DI	D/YYYY
5	Date like-kind property you received was identified by written notice to another party (mont year). See instructions for 45-day written identification requirement		5	MM/DI	D/YYYY
6	Date you actually received the like-kind property from other party (month, day, year). See instru	ctions	6	MM/DI	D/YYYY
7	Was the exchange of the property given up or received made with a related party, either directly (such as through an intermediary)? See instructions. If "Yes," complete Part II. If "No," go to Par			☐ Yes	☐ No
prope	Do not file this form if a related party sold property into the exchange, directly or indirectly (such betty became your replacement property; and none of the exceptions on line 11 applies to the exchange property as if the exchange had been a sale. If one of the exceptions on line 11 applies to the exchange Related Party Exchange Information	je. Instea	ad, rep	ort the d	
8	Name of related party Relationship to you	Related	l party's	identifying	number
	Address (no., street, and apt., room, or suite no.; city or town; state; and ZIP code)				
9	During this tax year (and before the date that is 2 years after the last transfer of property that the exchange), did the related party sell or dispose of any part of the like-kind property receiv (or an intermediary) in the exchange?	ed from	you	☐ Yes	□ No
10	During this tax year (and before the date that is 2 years after the last transfer of property that the exchange), did you sell or dispose of any part of the like-kind property you received?	was pa		☐ Yes	□ No
	If both lines 9 and 10 are "No" and this is the year of the exchange, go to Part III. If both lines 9 the year of the exchange, stop here. If either line 9 or line 10 is "Yes," complete Part III and red deferred gain or (loss) from line 24 unless one of the exceptions on line 11 applies.				
11	If one of the exceptions below applies to the disposition, check the applicable box.				
а	☐ The disposition was after the death of either of the related parties.				
b	$\hfill\square$ The disposition was an involuntary conversion, and the threat of conversion occurred after t	ne exch	ange.		
С	☐ You can establish to the satisfaction of the IRS that neither the exchange nor the dispositi its principal purposes. If this box is checked, attach an explanation. See instructions.	on had t	ax av	oidance	as one of

Form 8824 (2021)

Name(s) shown on tax return. Do not enter name and social security number if shown on other side.

Your social security number

Name(s) shown on tax return. Do not enter name and social security number if shown on other side. Realized Gain or (Loss), Recognized Gain, and Basis of Like-Kind Property Received Caution: If you transferred and received (a) more than one group of like-kind properties, or (b) cash or other (not like-kind) property, see Reporting of multi-asset exchanges in the instructions. Note: Complete lines 12 through 14 only if you gave up property that was not like-kind. Otherwise, go to line 15. Fair market value (FMV) of other property given up. See instructions . . . 5.067 13 13 2.072 14 Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain or 5,142 14 Caution: If the property given up was used previously or partly as a home, see Property used as home in the instructions. 15 Cash received, FMV of other property received, plus net liabilities assumed by other party, reduced 26.784 (but not below zero) by any exchange expenses you incurred. See instructions 15 86,684 16 16 87,930 17 17 Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange 18 18 88,498 19 19 88,426 Enter the smaller of line 15 or line 19, but not less than zero 24.485 20 20 2,398 21 Ordinary income under recapture rules. Enter here and on Form 4797, line 16. See instructions 21 22 Subtract line 21 from line 20. If zero or less, enter -0-. If more than zero, enter here and on Schedule D 23,908 22 23 25,085 23 24 Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions . . . 24 86,045 Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23. See instructions 25 25 88,339 **Deferral of Gain From Section 1043 Conflict-of-Interest Sales** Note: This part is to be used only by officers or employees of the executive branch of the federal government or judicial officers of the federal government (including certain spouses, minor or dependent children, and trustees as described in section 1043) for reporting nonrecognition of gain under section 1043 on the sale of property to comply with the conflict-of-interest requirements. This part can be used **only** if the cost of the replacement property is more than the basis of the divested property. Enter the number from the upper right corner of your certificate of divestiture. (Do not attach a copy of your certificate. Keep the certificate with your records.) Description of divested property ► 27 28 Description of replacement property ► ______ 29 Date divested property was sold (month, day, year) . . . 29 30 Sales price of divested property. See instructions 30 Basis of divested property 31 Realized gain. Subtract line 31 from line 30 32 32 33 Cost of replacement property purchased within 60 days after date of sale 33 34 34 35 Ordinary income under recapture rules. Enter here and on Form 4797, line 10. See instructions . . . 35 36 Subtract line 35 from line 34. If zero or less, enter -0-. If more than zero, enter here and on Schedule D 36 37 37 38 Basis of replacement property. Subtract line 37 from line 33 38

Form 88	324 (2021)		Page 2
Name(s	shown on tax return. Do not enter name and social security number if shown on other side.	Your soci	ial security number
Part	Realized Gain or (Loss), Recognized Gain, and Basis of Like-Kind Property Receiv	/ed	
	on: If you transferred and received (a) more than one group of like-kind properties, or (b) cash or othe eporting of multi-asset exchanges in the instructions.	er (not I	ike-kind) property,
Note:	Complete lines 12 through 14 only if you gave up property that was not like-kind. Otherwise, go to line	15.	
12	Fair market value (FMV) of other property given up. See instructions 12 2.587.613		
13	Adjusted basis of other property given up		
14	Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain o (loss) in the same manner as if the exchange had been a sale		1,790,047
	Caution: If the property given up was used previously or partly as a home, see <i>Property used as home</i> in the instructions.		1,100,1011
15	Cash received, FMV of other property received, plus net liabilities assumed by other party, reduced (but not below zero) by any exchange expenses you incurred. See instructions		6.085.404
16	FMV of like-kind property you received	16	105,034,970
17	Add lines 15 and 16	17	111,120,374
18	Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange expenses not used on line 15. See instructions		59,105,662
19	Realized gain or (loss). Subtract line 18 from line 17		52,014,713
20	Enter the smaller of line 15 or line 19, but not less than zero		4.688.673
21	Ordinary income under recapture rules. Enter here and on Form 4797, line 16. See instructions		149,284
22	Subtract line 21 from line 20. If zero or less, enter -0 If more than zero, enter here and on Schedule I		4.582.376
22	or Form 4797, unless the installment method applies. See instructions		4.731.660
23 24	Recognized gain. Add lines 21 and 22	24	47.283.053
25	Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23. See instructions		57.751.917
Part			116,101,10
26	ed only if the cost of the replacement property is more than the basis of the divested property. Enter the number from the upper right corner of your certificate of divestiture. (Do not attach a copy of your certificate. Keep the certificate with your records.)		
27	Description of divested property ►		
28	Description of replacement property ▶		
29	Date divested property was sold (month, day, year)	29	MM/DD/YYYY
30	Sales price of divested property. See instructions	4	
31 32	Basis of divested property	32	
33 34	Cost of replacement property purchased within 60 days after date of sale . Subtract line 33 from line 30. If zero or less, enter -0	34	
35	Ordinary income under recapture rules. Enter here and on Form 4797, line 10. See instructions	35	
36	Subtract line 35 from line 34. If zero or less, enter -0 If more than zero, enter here and on Schedule I or Form 4797. See instructions	36	
37	Deferred gain. Subtract the sum of lines 35 and 36 from line 32	37	
38	Basis of replacement property. Subtract line 37 from line 33	38	
		, ,,,,	Form 8824 (2021)

Form **8829**

Expenses for Business Use of Your Home

8829 for each 20**21**

Department of the Treasury Internal Revenue Service (99) ▶ File only with Schedule C (Form 1040). Use a separate Form 8829 for each home you used for business during the year.
 ▶ Go to www.irs.gov/Form8829 for instructions and the latest information.

Attachment Sequence No. **176**

OMB No. 1545-0074

Name(s) of proprietor(s)

Total Forms Filed = 3,336,126

Part	Part of Your Home Used for Bus	sines	 S					
1	Area used regularly and exclusively for business, re			or for	storage of inventory			
-	or product samples (see instructions)					1	3,092,858	
2	Total area of home					2	3,095,313	
3	Divide line 1 by line 2. Enter the result as a percenta	ige .				3		%
	For daycare facilities not used exclusively for but	-						
4	Multiply days used for daycare during year by hours		-	4	hr.			
5	If you started or stopped using your home for days		-					
	see instructions; otherwise, enter 8,760			5	hr.			
6	Divide line 4 by line 5. Enter the result as a decimal	amour	nt	6				
7	Business percentage. For daycare facilities not us	ed ex	clusively for bu	sines	s, multiply line 6 by			
	line 3 (enter the result as a percentage). All others, e	enter th	ne amount from	line 3		7		%
Part	II Figure Your Allowable Deductio	n						
8	Enter the amount from Schedule C, line 29, plus any	gain de	erived from the l	ousines	ss use of your home,			
	minus any loss from the trade or business not derived fro					8	3,156,577	
	See instructions for columns (a) and (b) before completing lines	9–22.	(a) Direct exper	ses	(b) Indirect expenses			
9	Casualty losses (see instructions)	9	9,809		9,782			
10	Deductible mortgage interest (see instructions) .	10	54.950		987.039			
11	Real estate taxes (see instructions)	11	57,596		238,555			
12	Add lines 9, 10, and 11		103,846		1,016,248			
13	Multiply line 12, column (b), by line 7			13	1.010.726			
14	Add line 12, column (a), and line 13					14	1,056,128	
15	Subtract line 14 from line 8. If zero or less, enter -0-					15	2.294.050	
16	Excess mortgage interest (see instructions)	16	23,785		630,392		-,,	
17	Excess real estate taxes (see instructions)	17	139,812		1,035,746			
18	Insurance	18	92,711		1,909,947			
19	Rent	19	67,094		636,963			
20	Repairs and maintenance	20	157,016		909,443			
21	Utilities	21	209,548		2,345,275			
22	Other expenses (see instructions)	22	68,611		799,821			
23	Add lines 16 through 22	23	485,415		2,633,265			
24	Multiply line 23, column (b), by line 7			24	2,622,705			
25	Carryover of prior year operating expenses (see inst	ructio	ns)	25	732,491			
26	Add line 23, column (a), line 24, and line 25					26	2,886,767	
27	Allowable operating expenses. Enter the smaller of	line 15	5 or line 26 .			27	2,111,814	
28	Limit on excess casualty losses and depreciation. S	ubtrac	ct line 27 from li	ne 15		28	2,056,639	
29	Excess casualty losses (see instructions)			29	7,929			
30	Depreciation of your home from line 42 below			30				
31	Carryover of prior year excess casualty losses and depreci	iation (s	see instructions)	31	352,993			
32	Add lines 29 through 31					32	1,216,706	
33	Allowable excess casualty losses and depreciation.	Enter	the smaller of	ine 28	3 or line 32	33	782,262	
34	Add lines 14, 27, and 33					34	2,489,627	
35	Casualty loss portion, if any, from lines 14 and 33. C	Carry a	mount to Form	4684	. See instructions .	35	12,645	
36	Allowable expenses for business use of your ho	ome. S	Subtract line 35	from	line 34. Enter here			
	and on Schedule C, line 30. If your home was used to	for mo	re than one bus	iness,	see instructions. ▶	36	2,485,927	
Part	III Depreciation of Your Home							
37	Enter the smaller of your home's adjusted basis or	its fair	market value.	See in	structions	37	1,144,451	
38	Value of land included on line 37					38	643,789	
39	Basis of building. Subtract line 38 from line 37 .					39	1,136,302	
40	Business basis of building. Multiply line 39 by line 7					40	1,131,545	
41	Depreciation percentage (see instructions)					41		%
42	Depreciation allowable (see instructions). Multiply lin					42	1,188,635	264,9
Part	V Carryover of Unallowed Expens	es to	2022					
43	Operating expenses. Subtract line 27 from line 26. I	f less t	than zero, enter	-0-		43	1,035,554	
44	Excess casualty losses and depreciation. Subtract I	<u>ine 33</u>	from line 32. If	less tl	nan zero, enter -0	44	474,682	
	perwork Reduction Act Notice, see your tax return instr				Cat. No. 13232M		Form 882 9	(2021)

Form **8829**

Expenses for Business Use of Your Home

► File only with Schedule C (Form 1040). Use a separate Form 8829 for each home you used for business during the year.

► Go to www.irs.gov/Form8829 for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment Sequence No. 176

Internal Revenue Service (99)
Name(s) of proprietor(s)

Department of the Treasury

Total Forms Filed = 3,336,126

	Total Forms Filed = 3,	336,12	ь					
Par	Part of Your Home Used for Bu	sines	S					
1	Area used regularly and exclusively for business, re							
	or product samples (see instructions)						1,111,896	
2	Total area of home						6,603,929	
3	Divide line 1 by line 2. Enter the result as a percentage	•				3		%
	For daycare facilities not used exclusively for bu		-	II oth	ers, go to line 7.			
4	Multiply days used for daycare during year by hours			4	h	r.		
5	If you started or stopped using your home for days							
_	see instructions; otherwise, enter 8,760			5	h	r.		
6	Divide line 4 by line 5. Enter the result as a decimal			6				
7	Business percentage. For daycare facilities not us		•				4	0/
Part	line 3 (enter the result as a percentage). All others, a Figure Your Allowable Deduction		le amount from	iiile 3		7		<u>%</u>
			and an all forms and the solid				1	
8	Enter the amount from Schedule C, line 29, plus any minus any loss from the trade or business not derived from						101,236,564	
	See instructions for columns (a) and (b) before completing lines		(a) Direct expen		(b) Indirect expenses	_	, , , , , , , ,	
9	Casualty losses (see instructions)	9		303		_		
10	Deductible mortgage interest (see instructions)	10	54,838 235,756		103,302			
11	Real estate taxes (see instructions)		<u>235,756</u> 95,061		10,025,815 1,302,710			
12	Add lines 9, 10, and 11	-	385,655		11,431,827			
13	Multiply line 12, column (b), by line 7			13	1,617,192			
14	Add line 12, column (a), and line 13					14	2,002,847	
15	Subtract line 14 from line 8. If zero or less, enter -0-					15	112,014,387	
16	Excess mortgage interest (see instructions)	16	96,234		4,429,506		112,014,007	
17	Excess real estate taxes (see instructions)	17	259,023		4,814,953			
18	Insurance	18	99,072		3,366,155			
19	Rent	19	538,058		11,637,206			
20	Repairs and maintenance	20	369,915		4,927,606			
21	Utilities	21	434,808		9,402,501			
22	Other expenses (see instructions)		98,102		2,531,948			
23	Add lines 16 through 22		1,895,212		41,109,875			
24	Multiply line 23, column (b), by line 7			24	7,361,287			
25	Carryover of prior year operating expenses (see ins		•	25	5,214,800		4	
26	Add line 23, column (a), line 24, and line 25					26	14,471,299	
27	Allowable operating expenses. Enter the smaller of						6,867,704	
28	Limit on excess casualty losses and depreciation. S					28	105,146,684	
29	Excess casualty losses (see instructions)			29	39,484	-		
30 31	Depreciation of your home from line 42 below			30	1,368,402	-		
31 32	Carryover of prior year excess casualty losses and deprec Add lines 29 through 31		•	31	1,544,660	32	2,952,546	
33	Allowable excess casualty losses and depreciation.						956,755	
34	Add lines 14, 27, and 33						9,827,306	
35	Casualty loss portion, if any, from lines 14 and 33.						85,060	
36	Allowable expenses for business use of your h	-						
	and on Schedule C, line 30. If your home was used						9,742,246	
Part								
37	Enter the smaller of your home's adjusted basis or	its fair	market value. S	See ins	structions	37	407,658,795	
38	Value of land included on line 37						66,366,470	
39	Basis of building. Subtract line 38 from line 37 .					39	341,292,326	
40	Business basis of building. Multiply line 39 by line 7	·					49,975,616	
41	Depreciation percentage (see instructions)							%
42	Depreciation allowable (see instructions). Multiply lin		•	nere a	nd on line 30 above	42	1,368,402	26
Part	·							
43	Operating expenses. Subtract line 27 from line 26. I						7,603,595	
44	Excess casualty losses and depreciation. Subtract		•	ess th	nan zero, enter -0-	44	1,995,790	
For Pa	perwork Reduction Act Notice, see your tax return instr	ruction	S.	(Cat. No. 13232M		Form 8829	(2021)

Qualified Adoption Expenses

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

Sequence No. 38

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

84,183

Total Forms Filed =

▶ Go to www.irs.gov/Form8839 for instructions and the latest information.

Child First Last Child's year Dorn before Child Part Child's year Child Chil	Par	Information	About Your Eligible	Child or C	hildrer	1— You	ı mus t	t complet	e this	part.			
Child's name First Last Child's year of birth Child's year of birth Child's year of birth Child year of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors of birth colors o		See instructi	ions for details, includ	ling what to	do if y	ou ne	ed mo	re space.					
Child First Last Child's year Dorn Before Child's year Dorn Before Child					Check i	f child wa	ıs—					(g)	
Child 3 Caution: If the child was a foreign child, see Special rules in the instructions for line 1, column (e), before you complete Part III. If you received employer-provided adoption benefits, complete Part III on the back next. Part III Adoption Credit Child 1 Child 2 Child 3 Maximum adoption credit per child. Enter \$14,440 (see instructions) Did you file Form 8839 for a prior year for the same child? No. Enter -0- Yes. See instructions for the amount to enter. Qualified adoption expenses (see instructions) Caution: Your qualified adoption expenses may not be equal to the adoption expenses you paid in 2021. Enter the smaller of line 4 or line 5 No. Skip lines 8 and 9, and enter -0- on line 10. Yes. Subtract \$216,660? No. Skip lines 8 and 9, and enter -0- on line 10. Yes. Subtract \$216,660 from line 7 Multiply each amount on line 6 by line 9 Multiply each amount on line 6 by line 9 Multiply each amount on line 6 by line 9 Multiply each amount on line 6 by line 9 Multiply each amount on line 6 lil 44,736 Multiply each amount on line 6 lil 44,736 Add lines 12 and 13 Credit carryforward, if any, from prior years. See your Adoption Credit Carryforward Worksheet in the 2020 Form 8839 instructions 13 49,780 Enter the amount from line 5 of the Credit Limit Worksheet in the instructions 14 Add lines 12 and 13 Enter the amount from line 5 of the Credit Limit Worksheet in the instructions 15 Time the instructions or line 11 lines from the instructions 16 Time the smaller of line 4 or line 5 or line 10 lines from the instructions 17 Add lines 12 and 13 Enter the amount from line 5 of the Credit Limit Worksheet in the instructions 18 Enter the amount from line 5 of the Credit Limit Worksheet in the instructions	1		d's name	Child's year	born bef 2004 ar	nd with	child special	a foreign		Child's	mber		Check if adoption became final in 2021 or earlier
Caution: If the child was a foreign child, see Special rules in the instructions for line 1, column (e), before you complete Part Part III. If you received employer-provided adoption benefits, complete Part III on the back next. Part II Adoption Credit 2 Maximum adoption credit per child. Enter \$14,440 (see instructions) 3 Did you file Form 8839 for a prior year for the same child? No. Enter -0. Yes. See instructions for the amount to enter. 4 Subtract line 3 from line 2 4 Subtract line 3 from line 2 5 Qualified adoption expenses (see instructions) Caution: Your qualified adoption expenses may not be equal to the adoption expenses you paid in 2021. 6 Enter the smaller of line 4 or line 5 1 Is line 7 more than \$216,660 from line 7 No. Skip lines 8 and 9, and enter -0- on line 10. Yes. Subtract \$216,660 from line 7 Do not enter more than 1.000 Multiply each amount on line 6 by line 9 Multiply each amount on line 6 Multiply each amount on line 6 Multiply each amount on line 6 Multiply each amount on line 6 11 41,736 13,249 6,032 Add the amounts on line 11 Credit carryforward, if any, from prior years. See your Adoption Credit Carryforward Worksheet in the 2020 Form 8839 instructions 14 80,332 15 Enter the amount from line 5 of the Credit Limit Worksheet in the linstructions 15 71,702													
Caution: If the child was a foreign child, see Special rules in the instructions for line 1, column (e), before you complete Part Part III on the back next.													
Part III. If you received employer-provided adoption benefits, complete Part III on the back next. Part III Adoption Credit Adoption Credit Child 1 Child 2 Child 3													
Adoption Credit										(e), before	you co	omple	te Part II o
Child 1 Child 2 Child 3				ption benefit	ts, com	plete P	art III o	n the back	next.				
2 Maximum adoption credit per child. Enter \$14,440 (see instructions) 2 3 Did you file Form 8839 for a prior year for the same child?	Part	Adoption C	redit										
See instructions 2						Chi	ld 1	Child 2	2	Child 3			
child? ☐ No. Enter -0 ☐ Yes. See instructions for the amount to enter. 4 Subtract line 3 from line 2	2	•											
enter.	3	- <u>-</u>		for the same									
enter.		☐ Yes. S	ee instructions for the	amount to									
5 Qualified adoption expenses (see instructions)				J	3	37,6	898	17,09	0	9,800			
Caution: Your qualified adoption expenses may not be equal to the adoption expenses you paid in 2021. 6 Enter the smaller of line 4 or line 5 6 42,087 13,252 6,033 7 Enter modified adjusted gross income (see instructions) 7 7 8 Is line 7 more than \$216,660? 7 No. Skip lines 8 and 9, and enter -0- on line 10. 8 9 Divide line 8 by \$40,000. Enter the result as a decimal (rounded to at least three places). Do not enter more than 1.000 9 10 Multiply each amount on line 6 by line 9 10 11 41,736 13,249 6,032 12 42,785 13 Credit carryforward, if any, from prior years. See your Adoption Credit Carryforward Worksheet in the 2020 Form 8839 instructions 13 49,780 14 Add lines 12 and 13 14 80,332 15 Enter the amount from line 5 of the Credit Limit Worksheet in the instructions 15 71,702	4	Subtract line 3 fro	om line 2		4								
be equal to the adoption expenses you paid in 2021. 6	5	Qualified adoption	on expenses (see instru	ctions)	5	42,1	30	13,25	2	6,033			
7 Enter modified adjusted gross income (see instructions)		•		-									
8 Is line 7 more than \$216,660? ■ No. Skip lines 8 and 9, and enter -0- on line 10. ■ Yes. Subtract \$216,660 from line 7 ■ 8 9 Divide line 8 by \$40,000. Enter the result as a decimal (rounded to at least three places). Do not enter more than 1.000 9 x 10 Multiply each amount on line 6 by line 9 10 10 10 10 10 10 10 10 10 10 10 10 10 1	6	Enter the smaller	of line 4 or line 5		6	42,0	87	13.25	2	6,033			
No. Skip lines 8 and 9, and enter -0- on line 10. 8 Yes. Subtract \$216,660 from line 7 8 9 Divide line 8 by \$40,000. Enter the result as a decimal (rounded to at least three places). 9 x 10 Multiply each amount on line 6 by line 9 10 11 Subtract line 10 from line 6 11 41,736 13,249 6,032 12 Add the amounts on line 11 12 42,785 13 Credit carryforward, if any, from prior years. See your Adoption Credit Carryforward Worksheet in the 2020 Form 8839 instructions 13 49,780 14 Add lines 12 and 13 14 80,332 15 Enter the amount from line 5 of the Credit Limit Worksheet in the instructions 15 71,702	7	Enter modified adj	justed gross income (se	e instructions	s)				7				
☐ Yes. Subtract \$216,660 from line 7 8 9 Divide line 8 by \$40,000. Enter the result as a decimal (rounded to at least three places). Do not enter more than 1.000 9 x 10 Multiply each amount on line 6 by line 9 10 10 10 10 10 10 10 10	8	Is line 7 more than	n \$216,660?										
Divide line 8 by \$40,000. Enter the result as a decimal (rounded to at least three places). Do not enter more than 1.000		No. Skip lines	s 8 and 9, and enter -0-	on line 10.									
Do not enter more than 1.000 9 x 10 Multiply each amount on line 6 by line 9 10 10 10 10 10 10 10 10													
11 Subtract line 10 from line 6 11 41,736 13,249 6,032 12 Add the amounts on line 11 12 42,785 13 Credit carryforward, if any, from prior years. See your Adoption Credit Carryforward Worksheet in the 2020 Form 8839 instructions 13 49,780 14 Add lines 12 and 13 14 80,332 15 Enter the amount from line 5 of the Credit Limit Worksheet in the instructions 15 71,702	9									es).	9	×	
12 Add the amounts on line 11	10	Multiply each amo	ount on line 6 by line 9 .		10								
Credit carryforward, if any, from prior years. See your Adoption Credit Carryforward Worksheet in the 2020 Form 8839 instructions	11	Subtract line 10 fr	rom line 6		11	41	736	13,249)	6,032			
2020 Form 8839 instructions 13 49,780 14 Add lines 12 and 13 14 80,332 15 Enter the amount from line 5 of the Credit Limit Worksheet in the instructions 15 71,702	12	Add the amounts	on line 11								12	42	2,785
15 Enter the amount from line 5 of the Credit Limit Worksheet in the instructions	13	-		-	-	on Cre	dit Car	ryforward '	Worksl	heet in the	13	49	9,780
	14	Add lines 12 and	13								14	80	0,332
Adoption Credit. Enter the smaller of line 14 or line 15 here and on Schedule 3 (Form 1040), line 6c. If	15	Enter the amount	from line 5 of the Credi	t Limit Works	heet in	the ins	tructior	ns			15	7	1,702
line 15 is smaller than line 14, you may have a credit carryforward (see instructions)	16								,		16	7	1 702
For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 22843L Form 8839 (For Pa												

Department of the Treasury Internal Revenue Service (99)

Qualified Adoption Expenses

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form8839 for instructions and the latest information. OMB No. 1545-0074 Attachment Sequence No. **38**

Name(s) shown on return

Your social security number

		Total Forms Fileu –	04,103								
Par	Information	About Your Eligible	Child or C	hildrer	n—You mus	t complete	this part.				_
		ions for details, includ									
					Check if child wa	as-				(g)	_
	Chile	(a) d's name	(b)	(c)	(d)	(e)	(f)			Check if	
1	O Time	a o namo	Child's year of birth	born bef 2004 a		a foreign	Child's identifying nu	mber	ŀ	adoptior secame fina	
İ	First	Last		disable		child	, ,		1	2021 or ear	lier
Child										$\overline{}$	_
1											
Child 2											
Child 3											
	en If the shild was	a a faraign abild aga C	racial mulac	in the	inate rations for		Jump (a) bafara		amala	to Dort I	
		s a foreign child, see S mployer-provided ado						you c	ompie	te Part II	or
	= = =		puon benem	15, COIII	piete Fart III C	il tile back i	iext.				
Part	Adoption C	realt			Obited 4	Ol-il-I O	01-11-1-0				
_					Child 1	Child 2	Child 3				
2		on credit per child. E		2							
3		8839 for a prior year		_							
3	child? No. E										
	_	ee instructions for the	amount to								
	enter.	ce mandenona for the	amount to j	3	463,763	209,592	2 121,442				
4	Subtract line 3 fro	m line 2		4							
5	Qualified adoption	on expenses (see instru	ictions)	5	404,083	150,652	73,202				
		ualified adoption expen			10 1,000	,	,				
		doption expenses you p									
6	Enter the smaller			6	317,971	122.354	58,806				
7	Enter modified adj	justed gross income (se	e instructions				7				
8	Is line 7 more than	n \$216,660?									
	■ No. Skip lines	s 8 and 9, and enter -0-	on line 10.								
	☐ Yes. Subtract	\$216,660 from line 7				:	8				
9	Divide line 8 by 9	\$40,000. Enter the res	sult as a dec	imal (r	ounded to at	least three	places).				
	Do not enter more	e than 1.000						9	×		
10		ount on line 6 by line 9									
11	Subtract line 10 fr	om line 6		11	312,453	122,288	58.764				
12	Add the amounts	on line 11						12	55	2,793	
13		rd, if any, from prior year							0.4	E 70E	_
4.4	2020 Form 8839 instructions						13	_	5,735		
14	Add lines 12 and							14		98,528	
15		from line 5 of the Credi						15	33	35,203	—
16	•	Enter the smaller of line				•	* *	4.6		NE 000	
F		than line 14, you may ha			ward (see insti			16		35,203 n 8839 (2)	004
ror Pa	iberwork Reduction	Act Notice, see your tax	return instruc	uons.		Cat. No. 2	2843L		rorm	10003 (2)	JZ I)

Form 8839 (2021) Page **2**

Par	Employer-Provided Adoption Benefits		Child	11	Child	2	Child 3		
17	Maximum exclusion per child. Enter \$14,440 (see instructions)	17	Office	<u> </u>	Omia		Offina 0		
18	Did you receive employer-provided adoption benefits for a prior year for the same child? No. Enter -0	10							
19	☐ Yes. See instructions for the amount to enter. Subtract line 18 from line 17	18 19							
20	Employer-provided adoption benefits you received in 2021. This amount should be shown in box 12 of your 2021 Form(s) W-2 with code T	20							0.700
21	Add the amounts on line 20							21	3,736
22	was a child with special needs and the adoption became final in 2021, enter the amount from line 19.	22							
23	Enter modified adjusted gross income (from the works) the instructions)	heet	in . 23						
24	Is line 23 more than \$216,660? No. Skip lines 24 and 25, and enter -0- on line 26. Yes. Subtract \$216,660 from line 23		. 24						
25	Divide line 24 by \$40,000. Enter the result as a decimal places). Do not enter more than 1.000					25	× .		
26	Multiply each amount on line 22 by line 25	26							
27	Excluded benefits. Subtract line 26 from line 22								*
28 29	Add the amounts on line 27	•						28	
	No. Subtract line 28 from line 21. Also, include this line 1 of Form 1040 or 1040-SR or line 1a of F line next to line 1 of Form 1040 or 1040-SR enter "AB."	orm	1040-NF	R. On	the dotte	ed			
	Yes. Subtract line 21 from line 28. Enter the result at the total you would enter on line 1 of Form 1 Form 1040-NR by the amount on Form 8839, I 1 of Form 1040 or 1040-SR or line 1a of Form dotted line next to the entry line.	040 ine 2	or 1040- 9. Enter	SR or	r line 1a o sult on lir	of ne		29	1,734

You may be able to claim the adoption credit in Part II on the front of this form if any of the following apply.



- You paid adoption expenses in 2020, those expenses were not fully reimbursed by your employer or otherwise, and the adoption was not final by the end of 2020.
- The total adoption expenses you paid in 2021 were not fully reimbursed by your employer or otherwise, and the adoption became final in 2021 or earlier.
- You adopted a child with special needs and the adoption became final in 2021.

Form **8839** (2021)

* Data not shown because of the small number of sample returns on which they are based.

Page 2

Form 8839 (2021)

Part III Employer-Provided Adoption Benefits

,			Child	11	Child	2	Child 3		
17	Maximum exclusion per child. Enter \$14,440 (see instructions)	17							
18	Did you receive employer-provided adoption benefits for a prior year for the same child? No. Enter -0 Yes. See instructions for the amount to enter.	18							
19	Subtract line 18 from line 17	19							
20	Employer-provided adoption benefits you received in 2021. This amount should be shown in box 12 of your 2021 Form(s) W-2 with code T	20							
21	Add the amounts on line 20							21	13,734
22	Enter the smaller of line 19 or line 20. But if the child was a child with special needs and the adoption became final in 2021, enter the amount from line 19.	22							
23	Enter modified adjusted gross income (from the works) the instructions)	heet	in . 23						
24	Is line 23 more than \$216,660? ☐ No. Skip lines 24 and 25, and enter -0- on line 26. ☐ Yes. Subtract \$216,660 from line 23								
25	Divide line 24 by \$40,000. Enter the result as a decimal places). Do not enter more than 1.000				st three	25	× .		
26	Multiply each amount on line 22 by line 25	26							
27	Excluded benefits. Subtract line 26 from line 22	27							*
28	Add the amounts on line 27							28	
29	Taxable benefits. Is line 28 more than line 21? No. Subtract line 28 from line 21. Also, include this amount, if more than zero, on line 1 of Form 1040 or 1040-SR or line 1a of Form 1040-NR. On the dotted line next to line 1 of Form 1040 or 1040-SR or line 1a of Form 1040-NR, enter "AB."								
	Yes. Subtract line 21 from line 28. Enter the result as a negative number. Reduce the total you would enter on line 1 of Form 1040-SR or line 1a of Form 1040-NR by the amount on Form 8839, line 29. Enter the result on line 1 of Form 1040 or 1040-SR or line 1a of Form 1040-NR. Enter "SNE" on the dotted line next to the entry line.								
	You may be able to claim the adoption credit in Pa	art II	on the fro	ont of	this form	if any	of the followi	ng ap	ply.
Ţ	• You paid adoption expenses in 2020, those expenses were not fully reimbursed by your employer or otherwise, and the adoption was not final by the end of 2020.								
7	 The total adoption expenses you paid in 2021 adoption became final in 2021 or earlier. 	wer	e not ful	ly reir	nbursed	by yo	our employer	or oth	erwise, and the

Form **8839** (2021)

* Data not shown because of the small number of sample returns on which they are based.

• You adopted a child with special needs and the adoption became final in 2021.

Form **8846**

Department of the Treasury Internal Revenue Service

Credit for Employer Social Security and Medicare Taxes Paid on Certain Employee Tips

Note: Claim this credit only for employer social security and Medicare taxes paid by a food or beverage employer where

► Attach to your tax return.

► Go to www.irs.gov/Form8846 for the latest information.

OMB No. 1545-0123

2021

Attachment
Sequence No. 846

Name(s) shown on return

Total Forms Filed =

21,858

Add lines 4 and 5. Partnerships and S corporations, report this amount on Schedule K. All

Identifying number

6

ippir	oing is customary for providing food or beverages. See the instructions for line 1.				
1	Tips received by employees for services on which you paid or incurred employer social security and Medicare taxes during the tax year (see instructions)	1	11,094		
2	Tips not subject to the credit provisions (see instructions)	2	3,122		
3	Creditable tips. Subtract line 2 from line 1	3	11,094		
4	Multiply line 3 by 7.65% (0.0765). If you had any tipped employees whose wages (including tips) exceeded \$142,800, see instructions and check here	4	11,094		
5	Credit for employer social security and Medicare taxes paid on certain employee tips from partnerships and S corporations	5	12,075		

For Paperwork Reduction Act Notice, see instructions.

others, report this amount on Form 3800, Part III, line 4f

Cat. No. 16148Z

Form **8846** (2021)

21,858

8846

Department of the Treasury Internal Revenue Service

Credit for Employer Social Security and Medicare Taxes Paid on Certain Employee Tips

► Attach to your tax return. ► Go to www.irs.gov/Form8846 for the latest information. OMB No. 1545-0123 Attachment Sequence No. 846

6

187,132 Form **8846** (2021)

Identifying number Name(s) shown on return Total Forms Filed = 21,858

Note: Claim this credit only for employer social security and Medicare taxes paid by a food or beverage employer where tipping is customary for providing food or beverages. See the instructions for line 1. Tips received by employees for services on which you paid or incurred employer social security and Medicare taxes during the tax year (see instructions) 1 1,106,372 Tips not subject to the credit provisions (see instructions) 2 2 57,354 3 Creditable tips. Subtract line 2 from line 1 3 1,049,018 Multiply line 3 by 7.65% (0.0765). If you had any tipped employees whose wages (including tips) exceeded \$142,800, see instructions and check here ▶ □ 4 80,249 5 Credit for employer social security and Medicare taxes paid on certain employee tips from 5 106,883 Add lines 4 and 5. Partnerships and S corporations, report this amount on Schedule K. All

Cat. No. 16148Z

others, report this amount on Form 3800, Part III, line 4f

For Paperwork Reduction Act Notice, see instructions.

Department of the Treasury Internal Revenue Service (99)

Archer MSAs and Long-Term Care Insurance Contracts ► Go to www.irs.gov/Form8853 for instructions and the latest information.

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

OMB No. 1545-0074 Attachment Sequence No. **39**

Name(s) shown on return

Total Forms Filed =

148,393

Social security number of MSA account holder. If both spouses have MSAs, see instructions ▶

Secti	on A. Archer MSAs. If you have only a Medicare Advantage MSA, skip Section A and comple	te Se	ction B.
Part	Archer MSA Contributions and Deductions. See instructions before completing this	part.	If you are filing
	jointly and both you and your spouse have high deductible health plans with self-only of	over	age, complete a
	separate Part I for each spouse.		
1	Total employer contributions to your Archer MSA(s) for 2021		
2	Archer MSA contributions you made for 2021, including those made from January 1, 2022, through		
	April 18, 2022, that were for 2021. Don't include rollovers. See instructions	2	8,167
3	Limitation from the Line 3 Limitation Chart and Worksheet in the instructions	3	3,008
4	Compensation (see instructions) from the employer maintaining the high deductible health plan. (If		
	self-employed, enter your earned income from the trade or business under which the high deductible		
	health plan was established.)	4	3,999
5	Archer MSA deduction. Enter the smallest of line 2, 3, or 4 here. Also include this amount on		
	Schedule 1 (Form 1040), line 23	5	*
	Caution: If line 2 is more than line 5, you may have to pay an additional tax. See instructions.		
Part			
6a	Total distributions you and your spouse received in 2021 from all Archer MSAs (see instructions)	6a	19,096
b	Distributions included on line 6a that you rolled over to another Archer MSA or a health savings		
	account. Also include any excess contributions (and the earnings on those excess contributions)		
	included on line 6a that were withdrawn by the due date of your return. See instructions	6b	*
С	Subtract line 6b from line 6a	6с	19,092
7	Unreimbursed qualified medical expenses (see instructions)	7	10,065
8	Taxable Archer MSA distributions. Subtract line 7 from line 6c. If zero or less, enter -0 Also include		
	this amount in the total on Schedule 1 (Form 1040), line 8z. On the dotted line next to Schedule 1		
	(Form 1040), line 8z, enter "MSA" and the amount	8	9,029
9a	If any of the distributions included on line 8 meet any of the Exceptions to the Additional 20% Tax		
	(see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 8 that are		
	subject to the additional 20% tax. Also include this amount in the total on Schedule 2 (Form 1040), line 17e	0.	9.020
		9b	8,029
Secti	on B. Medicare Advantage MSA Distributions. If you are filing jointly and both you and y		
	distributions in 2021 from a Medicare Advantage MSA, complete a separate Section See instructions.	ГРК	or each spouse
10	Total distributions you received in 2021 from all Medicare Advantage MSAs (see instructions)	10	6,123
11	Unreimbursed qualified medical expenses (see instructions)	11	5,122
12	Taxable Medicare Advantage MSA distributions. Subtract line 11 from line 10. If zero or less, enter	- 1 1	5,122
12	-0 Also include this amount in the total on Schedule 1 (Form 1040), line 8z. On the dotted line next to		
	Schedule 1 (Form 1040), line 8z, enter "Med MSA" and the amount	12	*
120	If any of the distributions included on line 12 meet any of the Exceptions to the Additional 50% Tax	12	
13a	(see instructions), check here		
h	Additional 50% tax. Enter 50% (0.50) of the distributions included on line 12 that are subject to the		
D	additional 50% tax. See instructions for the amount to enter if you had a Medicare Advantage MSA		
	at the end of 2020. Also include this amount in the total on Schedule 2 (Form 1040), line 17f	13b	*
		130	

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

Cat. No. 24091H

Form **8853** (2021)

^{*} Data not shown because of the small number of sample returns on which they are based.

Department of the Treasury Internal Revenue Service (99)

Archer MSAs and Long-Term Care Insurance Contracts ► Go to www.irs.gov/Form8853 for instructions and the latest information.

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

OMB No. 1545-0074 Attachment Sequence No. **39**

Name(s) shown on return

Social security number of MSA

	Total Forms Filed = 148,393 account holder. If both spouses have MSAs, see instructions ▶		
Section	on A. Archer MSAs. If you have only a Medicare Advantage MSA, skip Section A and comple	te Sed	ction B.
Part	<u> </u>	part.	If you are filing
1	Total employer contributions to your Archer MSA(s) for 2021		
2	Archer MSA contributions you made for 2021, including those made from January 1, 2022, through April 18, 2022, that were for 2021. Don't include rollovers. See instructions	2	11,484
3	Limitation from the Line 3 Limitation Chart and Worksheet in the instructions	3	7,754
4	Compensation (see instructions) from the employer maintaining the high deductible health plan. (If self-employed, enter your earned income from the trade or business under which the high deductible health plan was established.)	4	274,462
5	Archer MSA deduction. Enter the smallest of line 2, 3, or 4 here. Also include this amount on Schedule 1 (Form 1040), line 23	5	*
Dout	Caution: If line 2 is more than line 5, you may have to pay an additional tax. See instructions.		
Part	Archer MSA Distributions Total distributions you and your spouse received in 2021 from all Archer MSAs (see instructions)	6a	34,623
6a b	Distributions included on line 6a that you rolled over to another Archer MSA or a health savings	oa	34,023
Б	account. Also include any excess contributions (and the earnings on those excess contributions) included on line 6a that were withdrawn by the due date of your return. See instructions	6b	*
С	Subtract line 6b from line 6a	6c	34,573
7	Unreimbursed qualified medical expenses (see instructions)	7	19,549
8	Taxable Archer MSA distributions. Subtract line 7 from line 6c. If zero or less, enter -0 Also include this amount in the total on Schedule 1 (Form 1040), line 8z. On the dotted line next to Schedule 1 (Form 1040), line 8z, enter "MSA" and the amount	8	15,212
	If any of the distributions included on line 8 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 8 that are subject to the additional 20% tax. Also include this amount in the total on Schedule 2 (Form 1040), line 17e	9b	2,428
Section	on B. Medicare Advantage MSA Distributions. If you are filing jointly and both you and y distributions in 2021 from a Medicare Advantage MSA, complete a separate Section See instructions.		
10	Total distributions you received in 2021 from all Medicare Advantage MSAs (see instructions)	10	10,843
11	Unreimbursed qualified medical expenses (see instructions)	11	8,767
12	Taxable Medicare Advantage MSA distributions. Subtract line 11 from line 10. If zero or less, enter -0 Also include this amount in the total on Schedule 1 (Form 1040), line 8z. On the dotted line next to Schedule 1 (Form 1040), line 8z, enter "Med MSA" and the amount	12	*
13a	If any of the distributions included on line 12 meet any of the Exceptions to the Additional 50% Tax (see instructions), check here		
b	Additional 50% tax. Enter 50% (0.50) of the distributions included on line 12 that are subject to the additional 50% tax. See instructions for the amount to enter if you had a Medicare Advantage MSA at the end of 2020. Also include this amount in the total on Schedule 2 (Form 1040), line 17f	13b	*
For Pa	perwork Reduction Act Notice, see your tax return instructions. Cat. No. 24091H		Form 8853 (2021)
* Data	not shown because of the small number of sample returns on which they are based.		

Form 88	353 (2021)	Attachment Sequ	ence No	o. 39	Page 2
Name c	f policyholder (as shown on return)	Social security number of policyholder ▶			
Secti	on C. Long-Term Care (LTC) Insurance Contracts. See Filing R before completing this section.	equirements for Section	C in	the inst	ructions
	If more than one Section C is attached, check here				. ▶ 🗌
14a	Name of insured ▶ b Social	security number of insured	-		
15	In 2021, did anyone other than you receive payments on a per diem qualified LTC insurance contract covering the insured or receive acceler insurance policy covering the insured?	ated death benefits under a	life	☐ Yes	□ No
16	Was the insured a terminally ill individual?			☐ Yes	☐ No
	Note: If "Yes" and the only payments you received in 2021 were accelerat paid to you because the insured was terminally ill, skip lines 17 through 25				
17	Gross LTC payments received on a per diem or other periodic basis. Ent from box 1 of all Forms 1099-LTC you received with respect to the insure box in box 3 is checked	ed on which the "Per diem"	17	52,2	214
	Caution: Don't use lines 18 through 26 to figure the taxable amount of binsurance contract that isn't a qualified LTC insurance contract. Insteadudable from your income (for example, if the benefits aren't paid for p through accident or health insurance), report the amount not excludable (Form 1040), line 8z or, for taxpayers filing Form 1040-NR, on Schedule NE	ead, if the benefits aren't personal injuries or sickness as income on Schedule 1		,	
18	Enter the part of the amount on line 17 that is from qualified LTC insurance	e contracts	18	33.6	657
19	Accelerated death benefits received on a per diem or other periodic basis.	Don't include any amounts			
	you received because the insured was terminally ill. See instructions		19	*	
20	Add lines 18 and 19		20	33,9	958
	Note: If you checked "Yes" on line 15 above, see <i>Multiple Payees</i> in instructions before completing lines 21 through 25.	the			
21	Multiply \$400 by the number of days in the LTC period	. 21 51,773			
22	Costs incurred for qualified LTC services provided for the insured during	- 1			
	LTC period (see instructions)				
23	Enter the larger of line 21 or line 22				
24	Reimbursements for qualified LTC services provided for the insured during				
	LTC period	,	-		
	Caution: If you received any reimbursements from LTC contracts iss before August 1, 1996, see instructions.	suea			
25	Per diem limitation. Subtract line 24 from line 23		25	73.10)4 +/-
26	Taxable payments. Subtract line 25 from line 20. If zero or less, enter -0	Also include this amount in			· ·
20	the total on Schedule 1 (Form 1040), line 8z or, for taxpayers filing Form 10 Schedule NEC, line 12. On the dotted line next to Schedule 1 (Form 104	040-NR, on Form 1040-NR, 0), line 8z or, for taxpayers		_	
	filing Form 1040-NR, on Schedule NEC (Form 1040-NR), line 12, enter "LTC	and the amount	26	2,3	375

Form **8853** (2021)

^{*} Data not shown because of the small number of sample returns on which they are based.

	353 (2021)	Attachment Sequence No. 39 Page 2
	of policyholder (as shown on return)	Social security number of policyholder ►
Secti	on C. Long-Term Care (LTC) Insurance Contracts. See before completing this section.	•
	If more than one Section C is attached, check here	▶ □
14a	Name of insured ▶ k	Social security number of insured ▶
15	In 2021, did anyone other than you receive payments on a p qualified LTC insurance contract covering the insured or receive insurance policy covering the insured?	e accelerated death benefits under a life
16	Was the insured a terminally ill individual?	accelerated death benefits that were
17	Gross LTC payments received on a per diem or other periodic to from box 1 of all Forms 1099-LTC you received with respect to box in box 3 is checked	he insured on which the "Per diem"
	Caution: Don't use lines 18 through 26 to figure the taxable an insurance contract that isn't a qualified LTC insurance cont excludable from your income (for example, if the benefits aren't through accident or health insurance), report the amount not e (Form 1040), line 8z or, for taxpayers filing Form 1040-NR, on Sch	act. Instead, if the benefits aren't paid for personal injuries or sickness acludable as income on Schedule 1
18	Enter the part of the amount on line 17 that is from qualified LTC	insurance contracts 18 1,415,674
19 20	Accelerated death benefits received on a per diem or other period you received because the insured was terminally ill. See instruction Add lines 18 and 19	ns
20	Note: If you checked "Yes" on line 15 above, see <i>Multiple F</i> instructions before completing lines 21 through 25.	
21	Multiply \$400 by the number of days in the LTC period	
22	Costs incurred for qualified LTC services provided for the insur- LTC period (see instructions)	
23	Enter the larger of line 21 or line 22	
24	Reimbursements for qualified LTC services provided for the insur LTC period	24 2,284,292
25	Per diem limitation. Subtract line 24 from line 23	. 25 6,319,579+/-
26	Taxable payments. Subtract line 25 from line 20. If zero or less, the total on Schedule 1 (Form 1040), line 8z or, for taxpayers filin Schedule NEC, line 12. On the dotted line next to Schedule 1 (I filing Form 1040-NR, on Schedule NEC (Form 1040-NR), line 12, or schedule NEC (For	enter -0 Also include this amount in g Form 1040-NR, on Form 1040-NR, form 1040), line 8z or, for taxpayers
	ming rotti 1040-NR, on Schedule NEC (Forth 1040-NR), line 12, (nter "LTC" and the amount 26 128,644 Form 8853 (2021

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Total Forms Filed =

Education Credits (American Opportunity and Lifetime Learning Credits)

9,206,360

► Attach to Form 1040 or 1040-SR.

▶ Go to www.irs.gov/Form8863 for instructions and the latest information.

OMB No. 1545-0074 Attachment Sequence No. **50**

Your social security number

	1	
	I	V
CA	UTI	ON

Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

CAUT	ON ,				
Par	Refundable American Opportunity Credit				
1	After completing Part III for each student, enter the total of all amounts from all P	arts I	II, line 30	1	6,162,783
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household,				
	or qualifying widow(er)	2	6,162,783		
3	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form				
	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for				
	the amount to enter	3	6,101,304		
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education				
	credit	4	6,158,946		
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or				
_	qualifying widow(er)	5	6,158,946		
6	If line 4 is:		,		
	• Equal to or more than line 5, enter 1.000 on line 6				0.450.040
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (ro		d to \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	6	6,158,946
	at least three places)		. ,		
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the	-			
	conditions described in the instructions, you can't take the refundable America			-	6 150 046
_	skip line 8, enter the amount from line 7 on line 9, and check this box			7	6,158,946
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter on Form 1040 or 1040-SR, line 29. Then go to line 9 below.			8	6 027 056
Par	· · ·			0	6,027,056
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	(000	instructions)	9	6,158,946
10	After completing Part III for each student, enter the total of all amounts from a	9	0,130,940		
10	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19			10	3,190,705
11	Enter the smaller of line 10 or \$10,000			11	3,190,705
12	Multiply line 11 by 20% (0.20)			12	3,190,705
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or	Ι΄.			0,100,100
.0	qualifying widow(er)	13	3,190,705		
14	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form		0,100,700		
17	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for				
	the amount to enter	14	3,189,697		
15	Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	line 18, and go to line 19	15	3,190,705		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	qualifying widow(er)	16	3,190,091		
17	If line 15 is:				
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18				
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rou	nded	to at least three		
	places)			17	3,190,091
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet	(see	instructions) ▶	18	3,190,091
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit				
	instructions) here and on Schedule 3 (Form 1040), line 3			19	8,122,952
For Pa	aperwork Reduction Act Notice, see your tax return instructions.	t. No. 2	25379M		Form 8863 (2021)

Form **8863**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Total Forms Filed =

Education Credits (American Opportunity and Lifetime Learning Credits)

9,206,360

► Attach to Form 1040 or 1040-SR.

► Go to www.irs.gov/Form8863 for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment Sequence No. 50

Your social security number

CAUTION

Complete a separate Part III on page 2 for each student for whom you're claiming either credit before you complete Parts I and II.

Refundable American Opportunity Credit After completing Part III for each student, enter the total of all amounts from all Parts Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)		1	13,540,713
Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)		1	13,540,713
or qualifying widow(er)	761,438,995		
2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter	332,698,442		
Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit	429,078,946		
Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	84,528,985		
If line 4 is:			
• Equal to or more than line 5, enter 1.000 on line 6			
• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (round	ded to	6	6,023,798
at least three places))		
Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the you conditions described in the instructions, you can't take the refundable American of	opportunity credit;		
skip line 8, enter the amount from line 7 on line 9, and check this box	▶ □	7	13,175,533
Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the			
on Form 1040 or 1040-SR, line 29. Then go to line 9 below		8	5,170,213
II Nonrefundable Education Credits			
Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (se	•	9	8,005,320
After completing Part III for each student, enter the total of all amounts from all F			05 000 500
zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19		10	25,030,506
Enter the smaller of line 10 or \$10,000		11	16,150,943
Multiply line 11 by 20% (0.20)		12	3,230,198
Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	3 406,051,705		
Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for			
the amount to enter	4 208,636,806	_	
Subtract line 14 from line 13. If zero or less, skip lines 16 and 17, enter -0- on	_		
line 18, and go to line 19	5 197,414,899	_	
Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or			
qualifying widow(er)	6 45,204,202	_	
If line 15 is:			
• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18			
• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rounder)			04.000.405
places)		17	31,033,436
Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see	•	18	3,144,393
Nonrefundable education credits. Enter the amount from line 7 of the Credit Lim			0.070.000
instructions) here and on Schedule 3 (Form 1040), line 3	o. 25379M	19	8,279,606 Form 8863 (202

Form 8863 (2021)				Pag	ge 2
Name(s) shown on return			Your social	security number	
		you're claiming either the Ai Use additional copies of pag			_
Part III Student and Educational Inst	itution Information	See instructions.			
20 Student name (as shown on page 1 of yo	ur tax return)	21 Student social security number your tax return)	(as showr	on page 1 of	
22 Educational institution information (see in	nstructions)				
a. Name of first educational institution	·	b. Name of second educational in	stitution (if	fany)	
(1) Address. Number and street (or P.O. be post office, state, and ZIP code. If a foinstructions.		(1) Address. Number and street (post office, state, and ZIP coninstructions.			
(2) Did the student receive Form 1098-T from this institution for 2021?	☐ Yes ☐ No	(2) Did the student receive Form from this institution for 2021?	1098-T [☐ Yes ☐ N	 No
(3) Did the student receive Form 1098-T from this institution for 2020 with box 7 checked?	☐ Yes ☐ No	(3) Did the student receive Form from this institution for 2020 v 7 checked?		☐ Yes ☐ N	No
(4) Enter the institution's employer identification if you're claiming the American opportunity checked "Yes" in (2) or (3). You can gard 1098-T or from the institution.	tunity credit or if you	(4) Enter the institution's emp (EIN) if you're claiming the Ar if you checked "Yes" in (2) from Form 1098-T or from the	nerican op or (3). Yo	portunity credi u can get the l	t or
23 Has the Hope Scholarship Credit or A credit been claimed for this student before 2021?		Yes — Stop! Go to line 31 for this student.	No — Go	o to line 24.	_
24 Was the student enrolled at least half- academic period that began or is treate 2021 at an eligible educational instit leading towards a postsecondary de other recognized postsecondary edu See instructions.	d as having begun in cution in a program egree, certificate, or	Yes — Go to line 25.	No — St ofor this st	op! Go to line 3 tudent.	1
Did the student complete the first 4 year education before 2021? See instructions		Yes — Stop! Go to line 31 for this student.	No — Go	to line 26.	
Was the student convicted, before the felony for possession or distribution substance?		Yes — Stop! Go to line 31 for this student.		omplete lines 27 30 for this stude	
you complete lines 27 through 30 fo	=	etime learning credit for the same stu omplete line 31.	dent in th	-	
American Opportunity Credit		- •	T -	1	<u>3,9</u> 80
Adjusted qualified education expenses (see Subtract \$2,000 from line 27. If zero or leading Multiply line 28 by 25% (0.25)			. 27 . 28 . 29	313,654	<u>*</u>
30 If line 28 is zero, enter the amount from enter the result. Skip line 31. Include the	line 27. Otherwise, a		and	6,162,783 13 313,654	,980 *
Lifetime Learning Credit 31 Adjusted qualified education expenses (III, line 31, on Part II, line 10	see instructions). Inclu		arts . 31	3,190,705 67,266	*

Form **8863** (2021)

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 8863 (2021)		Page 2
Name(s) shown on return	Yours	ocial security number
Complete Part III for each student for who opportunity credit or lifetime learning credit each student.		
Part III Student and Educational Institution Informati	on. See instructions.	
20 Student name (as shown on page 1 of your tax return)	21 Student social security number (as sl your tax return)	nown on page 1 of
22 Educational institution information (see instructions)		
a. Name of first educational institution	b. Name of second educational institution	on (if any)
(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.	(1) Address. Number and street (or P.C post office, state, and ZIP code. If a instructions.	
(2) Did the student receive Form 1098-T ☐ Yes ☐ No from this institution for 2021?	(2) Did the student receive Form 1098-from this institution for 2021?	-T ☐ Yes ☐ No
(3) Did the student receive Form 1098-T from this institution for 2020 with box Yes No 7 checked?	(3) Did the student receive Form 1098- from this institution for 2020 with b 7 checked?	
(4) Enter the institution's employer identification number (Ell if you're claiming the American opportunity credit or if yo checked "Yes" in (2) or (3). You can get the EIN from For 1098-T or from the institution.	ou (EIN) if you're claiming the America	an opportunity credit or . You can get the EIN
23 Has the Hope Scholarship Credit or American opportuni credit been claimed for this student for any 4 tax yea before 2021?	i res – Stop:	– Go to line 24.
Was the student enrolled at least half-time for at least or academic period that began or is treated as having begun 2021 at an eligible educational institution in a progra leading towards a postsecondary degree, certificate, other recognized postsecondary educational credentia See instructions.	in m or Yes — Go to line 25. No - for the	– Stop! Go to line 31 his student.
25 Did the student complete the first 4 years of postseconda education before 2021? See instructions.		– Go to line 26.
Was the student convicted, before the end of 2021, of felony for possession or distribution of a controlle substance?	NO -	- Complete lines 27 ugh 30 for this student.
You can't take the American opportunity credit and the you complete lines 27 through 30 for this student, don't		in the same year. If
American Opportunity Credit		18,885,942 48,297
27 Adjusted qualified education expenses (see instructions). D		27 997,623 *
Subtract \$2,000 from line 27. If zero or less, enter -0Multiply line 28 by 25% (0.25)		28 29
30 If line 28 is zero, enter the amount from line 27. Otherwise enter the result. Skip line 31. Include the total of all amounts	, add \$2,000 to the amount on line 29 and	12,838,365 31,646 30 670,699 *
Lifetime Learning Credit		
Adjusted qualified education expenses (see instructions). In III, line 31, on Part II, line 10		24,401,591 * 612,758 0
* Data not shown because of the small number of cample retu		Form 8863 (2021)

Form **8880**

Department of the Treasury Internal Revenue Service

Credit for Qualified Retirement Savings Contributions

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

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

OMB No. 1545-0074

2021

Attachment Sequence No. 54

(b) Your spouse

Name(s) shown on return

Total Forms Filed = 9,297,000

Your social security number

(a) You



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

Traditional and Roth IRA contributions, and ABLE account contributions by the

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$33,000 (\$49,500 if head of household; \$66,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2004; (b) is claimed as a dependent on someone else's 2021 tax return; or (c) was a **student** (see instructions).

		(D) plan contributions	•	ctions)	2	8,111,0		990,683
					3	8,555,6	43	1,134,662
		ed after 2018 and		, ,				
•	•	return (see instruction	,	•		200 70		445.000
•		oth columns. See inst	·		4	298,73		115,302
		zero or less, enter -0-			5	8,542,7		1,120,971
	•	naller of line 5 or \$2,0			6	8,546,7		1,120,971
		f zero, stop; you can't		1			7	9,287,654
		1040, 1040-SR, or 10	•	8	3,	287,653	-	
Enter the appl	icable decimal	amount from the tabl	e below.					
If line	8 is-	<u> </u>	and your filing statu	s is—				
	Dut not	Married	Head of	Single, Marr	ied filir	ng		
Over-	But not over—	filing jointly	household	separate	ly, or			
	0.00	Enter on	line 9—	Qualifying w	vidow(e	er)		
	\$19,750	0.5	0.5	0.5				
1	404 500	0.5	0.5	0.2				
\$19,750	\$21,500	0.0						l
\$19,750 \$21,500	\$21,500 \$29,625	0.5	0.5	0.1			9	x 0 .
1	1		0.5 0.2	0.1 0.1			9	x 0 . 9,255,873
\$21,500	\$29,625	0.5					9	
\$21,500 \$29,625	\$29,625 \$32,250	0.5 0.5	0.2	0.1			9	
\$21,500 \$29,625 \$32,250	\$29,625 \$32,250 \$33,000	0.5 0.5 0.5	0.2 0.1	0.1 0.1			9	
\$21,500 \$29,625 \$32,250 \$33,000	\$29,625 \$32,250 \$33,000 \$39,500	0.5 0.5 0.5 0.5	0.2 0.1 0.1	0.1 0.1 0.0			9	
\$21,500 \$29,625 \$32,250 \$33,000 \$39,500	\$29,625 \$32,250 \$33,000 \$39,500 \$43,000	0.5 0.5 0.5 0.5 0.2	0.2 0.1 0.1 0.1	0.1 0.1 0.0 0.0			9	
\$21,500 \$29,625 \$32,250 \$33,000 \$39,500 \$43,000	\$29,625 \$32,250 \$33,000 \$39,500 \$43,000 \$49,500	0.5 0.5 0.5 0.5 0.2 0.1	0.2 0.1 0.1 0.1 0.1	0.1 0.1 0.0 0.0 0.0			9	
\$21,500 \$29,625 \$32,250 \$33,000 \$39,500 \$43,000 \$49,500	\$29,625 \$32,250 \$33,000 \$39,500 \$43,000 \$49,500 \$66,000	0.5 0.5 0.5 0.5 0.2 0.1 0.1	0.2 0.1 0.1 0.1 0.1 0.0 0.0	0.1 0.1 0.0 0.0 0.0 0.0			9	
\$21,500 \$29,625 \$32,250 \$33,000 \$39,500 \$43,000 \$49,500	\$29,625 \$32,250 \$33,000 \$39,500 \$43,000 \$49,500 \$66,000	0.5 0.5 0.5 0.5 0.2 0.1 0.1	0.2 0.1 0.1 0.1 0.1 0.0 0.0 you can't take this cr	0.1 0.1 0.0 0.0 0.0 0.0 0.0			9	

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

Credit for Qualified Retirement Savings Contributions

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

► Attach to Form 1040, 1040-SR, or 1040-NR. ► Go to www.irs.gov/Form8880 for the latest information.

Sequence No. **54**

(b) Your spouse

856,592

Name(s) shown on return

Total Forms Filed = 9,297,000 Your social security number

(a) You

2,697,387

1



11

You **cannot** take this credit if **either** of the following applies.

Traditional and Roth IRA contributions, and ABLE account contributions by the designated beneficiary for 2021. Do not include rollover contributions

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$33,000 (\$49,500 if head of household; \$66,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2004; (b) is claimed as a dependent on someone else's 2021 tax return; or (c) was a student (see instructions).

	•					2,031,30	31	030,332
	` '	or other qualified er D) plan contributions	1 7 1 /	, , ,	2	14,166,7	'41	2,302,769
Add lines 1 an	d2		·		3	16,864,1		3,159,361
extensions) of both spouses	your 2021 tax ' amounts in bo	ed after 2018 and return (see instruction oth columns. See inst	ns). If married filing jo ructions for an excep	ointly, include tion	4	511,34	11	300,144 3,049,487
		zero or less, enter -0-			5	16,506,6		
	•	aller of line 5 or \$2,0			6	10,066,8	_	1,505,630
		zero, stop ; you can't 1040, 1040-SR, or 10				,422,513	7	11,572,469
Enter the appl	icable decimal	amount from the table	e below.					
	8 is-			ia				
II line	o is—		and your filing status	is –				
Over—	But not over—	Married filing jointly	Head of household	Single, Marr separate	ly, or			
		Enter on	line 9—	Qualifying w	ridow(e	r)		
	\$19,750	0.5	0.5	0.5				
\$19,750	\$21,500	0.5	0.5	0.2				
\$21,500	\$29,625	0.5	0.5	0.1			9	хO.
\$29,625	\$32,250	0.5	0.2	0.1				
\$32,250	\$33,000	0.5	0.1	0.1				
\$32,250 \$33,000	\$33,000 \$39,500	0.5	0.1 0.1	0.1 0.0				
\$33,000 \$39,500	\$39,500 \$43,000	0.5 0.2	0.1 0.1	0.0 0.0				
\$33,000 \$39,500 \$43,000	\$39,500 \$43,000 \$49,500	0.5 0.2 0.1	0.1 0.1 0.1	0.0 0.0 0.0				
\$33,000 \$39,500 \$43,000 \$49,500	\$39,500 \$43,000	0.5 0.2 0.1 0.1	0.1 0.1 0.1 0.0	0.0 0.0 0.0 0.0				
\$33,000 \$39,500 \$43,000	\$39,500 \$43,000 \$49,500 \$66,000	0.5 0.2 0.1 0.1 0.0	0.1 0.1 0.1 0.0 0.0	0.0 0.0 0.0 0.0 0.0				
\$33,000 \$39,500 \$43,000 \$49,500	\$39,500 \$43,000 \$49,500 \$66,000	0.5 0.2 0.1 0.1	0.1 0.1 0.1 0.0 0.0	0.0 0.0 0.0 0.0 0.0				

Limitation based on tax liability. Enter the amount from the Credit Limit Worksheet in the instructions

Credit for qualified retirement savings contributions. Enter the smaller of line 10 or line 11 here

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

and on Schedule 3 (Form 1040), line 4

Cat. No. 33394D

Form **8880** (2021)

16,237,063

1,759,140

11

12

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

Form **8889**

Health Savings Accounts (HSAs)

OMB No. 1545-0074

2021

Attachment
Sequence No. 52

Department of the Treasury Internal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form8889 for instructions and the latest information.

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

Total Forms Filed = 15,511,487

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions ▶

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part	and both you and your spouse each have separate HSAs, complete a separate Part I for		
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021. See instructions	□Sel	f-only 🗌 Family
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from January 1, 2022, through April 15, 2022, that were for 2021. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	2,004,408
3	If you were under age 55 at the end of 2021 and, on the first day of every month during 2021, you were, or were considered, an eligible individual with the same coverage, enter \$3,600 (\$7,200 for family coverage). All others, see the instructions for the amount to enter	3	13,503,047
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also include any amount contributed to your spouse's Archer MSAs	4	18,513
5	Subtract line 4 from line 3. If zero or less, enter -0	5	13,502,749
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2021, see the instructions for the amount to enter	6	13,257,533
7	If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage under an HDHP at any time during 2021, enter your additional contribution amount. See instructions	7	1,604,254
8	Add lines 6 and 7	8	13,261,021
9	Employer contributions made to your HSAs for 2021		
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	12,145,174
12	Subtract line 11 from line 8. If zero or less, enter -0	12	11,801,185
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	1,933,557
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		
Part	HSA Distributions. If you are filing jointly and both you and your spouse each have sepa a separate Part II for each spouse.	rate l	HSAs, complete
14a	Total distributions you received in 2021 from all HSAs (see instructions)	14a	8,875,873
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were		
	withdrawn by the due date of your return. See instructions	14b	77,537
С	Subtract line 14b from line 14a	14c	8,839,869
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	8,562,732
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8e	16	388,853
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	241,784
Part			
18	Last-month rule	18	16,490
19	Qualified HSA funding distribution	19	*
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8z, and enter "HSA" and the amount on the dotted line	20	22,108
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21	22,108

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

Cat. No. 37621P

Form **8889** (2021)

^{*} Data not shown because of the small number of sample returns on which they are based.

Form **8889**

Department of the Treasury

Internal Revenue Service

Health Savings Accounts (HSAs)

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

► Go to www.irs.gov/Form8889 for instructions and the latest information.

2021
Attachment
Sequence No. 52

OMB No. 1545-0074

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

Total Forms Filed =

15.511.487

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions ▶

	have HSAs, see instructions		
Befor	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if	requ	ired.
Part	HSA Contributions and Deduction. See the instructions before completing this part. If y and both you and your spouse each have separate HSAs, complete a separate Part I for		
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021.		_
	See instructions	Sel	f-only \square Family
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from		
	January 1, 2022, through April 15, 2022, that were for 2021. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	6,503,721
3	If you were under age 55 at the end of 2021 and, on the first day of every month during 2021, you		
	were, or were considered, an eligible individual with the same coverage, enter \$3,600 (\$7,200 for		
	family coverage). All others, see the instructions for the amount to enter	3	78,578,014
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853,		
	lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also		
_	include any amount contributed to your spouse's Archer MSAs	4	23,837
5	Subtract line 4 from line 3. If zero or less, enter -0	5	78,560,229
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family	6	74 074 054
7	coverage under an HDHP at any time during 2021, see the instructions for the amount to enter If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage	6	74,371,951
7	under an HDHP at any time during 2021, enter your additional contribution amount. See instructions	7	1,666,726
8	Add lines 6 and 7	8	76,038,678
9	Employer contributions made to your HSAs for 2021		,,
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	32,852,152
12	Subtract line 11 from line 8. If zero or less, enter -0	12	44,602,124
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	5.888.886
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		
Part	III HSA Distributions. If you are filing jointly and both you and your spouse each have sepa a separate Part II for each spouse.	rate l	HSAs, complete
14a	Total distributions you received in 2021 from all HSAs (see instructions)	14a	23,118,910
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess		
	contributions (and the earnings on those excess contributions) included on line 14a that were		
	withdrawn by the due date of your return. See instructions	14b	195,083
C	Subtract line 14b from line 14a	14c	22,923,827
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	22,387,867
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8e	16	535,961
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional		
	20% Tax (see instructions), check here		
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that		
	are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form	471	71,907
Part	1040), Part II, line 17c	17b	
rait	completing this part. If you are filing jointly and both you and your spouse each have separate the mistraction of the mistract		
	complete a separate Part III for each spouse.	arato	110/10,
18	Last-month rule	18	19,190
19	Qualified HSA funding distribution	19	*
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8z,		
	and enter "HSA" and the amount on the dotted line	20	30,040
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form		
	1040), Part II, line 17d	21	3,003
For Pa	perwork Reduction Act Notice, see your tax return instructions. Cat. No. 37621P		Form 8889 (2021

* Data not shown because of the small number of sample returns on which they are based.

Alternative Motor Vehicle Credit

OMB No. 1545-1998

(Rev. January 2022)

Department of the Treasury Internal Revenue Service ► Attach to your tax return.

► Go to www.irs.gov/Form8910 for instructions and the latest information.

Attachment Sequence No. **68**

Name(s) shown on return

Total Forms Filed = 27,642

Note:

- Use this form to claim the credit for certain alternative motor vehicles.
- Claim the credit for certain plug-in electric vehicles on Form 8936.

|--|

Use a separate column for each vehicle. If you need more columns, use additional Forms 8910 and include the totals on lines 7 and 11.			(a) Vehicle 1	(b) Vehicle 2
1	Year, make, and model of vehicle	1		
2	Vehicle identification number (see instructions)	2		
3	Enter date vehicle was placed in service (MM/DD/YYYY)	3		
4	Tentative credit (see instructions for amount to enter)	4	27,565	*

Next: If you did NOT use your vehicle for business or investment purposes and did not have a credit from a partnership or S corporation, skip Part II and go to Part III. All others, go to Part II.

Part II	Credit for B	usiness/Investment	Use Part of Vehicle
---------	--------------	--------------------	----------------------------

5	Business/investment use percentage (see instructions)	5		%		%
6	Multiply line 4 by line 5	6				
7	Add columns (a) and (b) on line 6			7	6,125	
8	Alternative motor vehicle credit from partnerships and S corporations (see instructions) .			8	*	
9	Business/investment use part of credit. Add lines 7 and 8. Partn stop here and report this amount on Schedule K. All others, report Part III, line 1r	this a	mount on Form 3800,	9	6,138	

Part III Credit for Personal Use Part of Vehicle

10	If you skipped Part II, enter the amount from line 4. If you completed Part II, subtract line 6 from line 4		
11	Add columns (a) and (b) on line 10	11	23,505
12	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18	12	
13	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)	13	5,701
14	Subtract line 13 from line 12. If zero or less, enter -0- and stop here. You cannot claim the personal use part of the credit	14	26.649
15	Personal use part of credit. Enter the smaller of line 11 or line 14 here and on Schedule 3 (Form 1040), line 6e. If line 14 is smaller than line 11, see instructions	15	22,513

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 37720F

Form **8910** (Rev. 1-2022)

^{*} Data not shown because of the small number of sample returns on which they are based.

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Alternative Motor Vehicle Credit

► Attach to your tax return.

► Go to www.irs.gov/Form8910 for instructions and the latest information.

OMB No. 1545-1998

Attachment Sequence No. **68**

Identifying number

Name(s) shown on return

Total Forms Filed = 27,642

N	oto.

Part II

- Use this form to claim the credit for certain alternative motor vehicles.
- Claim the credit for certain plug-in electric vehicles on Form 8936.

Part I Ten	tative Credit
------------	---------------

Use a separate column for each vehicle. If you need more columns, use additional Forms 8910 and include the totals on lines 7 and 11.			(a) Vehicle 1	(b) Vehicle 2
1	Year, make, and model of vehicle	1		
2	Vehicle identification number (see instructions)	2		
3	Enter date vehicle was placed in service (MM/DD/YYYY)	3		
4	Tentative credit (see instructions for amount to enter)	4	168,405	*

Next: If you did NOT use your vehicle for business or investment purposes and did not have a credit from a partnership or S corporation, skip Part II and go to Part III. All others, go to Part II.

Credit for Business/Investment Use Part of Vehicle

5	Business/investment use percentage (see instructions)	5		%		%
6	Multiply line 4 by line 5	6				
7	Add columns (a) and (b) on line 6			7	19,117	
8	Alternative motor vehicle credit from partnerships and S corporations (see instructions) .				*	
9	Business/investment use part of credit. Add lines 7 and 8. Partner stop here and report this amount on Schedule K. All others, report the Part III, line 1r	his a	mount on Form 3800,	a	10 130	

Part III Credit for Personal Use Part of Vehicle

10	If you skipped Part II, enter the amount from line 4. If you completed Part II, subtract line 6 from line 4		
11	Add columns (a) and (b) on line 10	11	149,493
12	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18	12	
13	Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)	13	28,495
14	Subtract line 13 from line 12. If zero or less, enter -0- and stop here. You cannot claim the personal use part of the credit	14	1,004,724
15	Personal use part of credit. Enter the smaller of line 11 or line 14 here and on Schedule 3 (Form 1040), line 6e. If line 14 is smaller than line 11, see instructions	15	103,380

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 37720F

Form **8910** (Rev. 1-2022)

^{*} Data not shown because of the small number of sample returns on which they are based.

Department of the Treasury

Alternative Fuel Vehicle Refueling Property Credit

► Attach to your tax return.

▶ Go to www.irs.gov/Form8911 for instructions and the latest information.

OMB No. 1545-0123

Attachment Sequence No. 151

Internal Revenue Service Name(s) shown on return Identifying number Total Forms Filed = 89.700 Part I **Total Cost of Refueling Property** Total cost of qualified alternative fuel vehicle refueling property placed in service during the tax 89.698 Credit for Business/Investment Use Part of Refueling Property Part II 2 Business/investment use part (see instructions) 4.867 3 Section 179 expense deduction (see instructions) 3 4 4 5 5 6 Maximum business/investment use part of credit (see instructions) . . . 6 10.085 7 4,556 8 Alternative fuel vehicle refueling property credit from partnerships and S corporations (see Business/investment use part of credit. Add lines 7 and 8. Partnerships and S corporations. 9 stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part 4,567 **Credit for Personal Use Part of Refueling Property** Part III 10 Subtract line 2 from line 1. If zero, stop here; do not file this form unless you are claiming a credit 10 11 11 12 12 Maximum personal use part of credit (see instructions) 88,072 13 Enter the **smaller** of line 11 or line 12 13 14 Regular tax before credits: • Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. 14 • Other filers. Enter the regular tax before credits from your return. 15 Credits that reduce regular tax before the alternative fuel vehicle refueling property credit: 15a Certain allowable credits (see instructions) 15b 15c C 53,177 Net regular tax. Subtract line 15c from line 14. If zero or less, enter -0- and stop here; do not file 16 16 87,828 17 Tentative minimum tax (see instructions): • Individuals. Enter the amount from Form 6251, line 9. Other filers. Enter the tentative minimum tax from your alternative minimum tax 17 73,254 form or schedule. Subtract line 17 from line 16. If zero or less, stop here; do not file this form unless you are 18 18 87,508 19 Personal use part of credit. Enter the smaller of line 13 or line 18 here and on Schedule 3 (Form

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 37721Q

Form **8911** (Rev. 1-2022)

87.508

19

1040), line 6j; or the appropriate line of your return. If line 18 is smaller than line 13, see

^{*} Data not shown because of the small number of sample returns on which they are based.

Form **8911**(Rev. January 2022)

Department of the Treasury

Internal Revenue Service

Alternative Fuel Vehicle Refueling Property Credit

► Attach to your tax return.

► Go to www.irs.gov/Form8911 for instructions and the latest information.

OMB No. 1545-0123

Attachment Sequence No. **151**

Name(s) shown on return Identifying number Total Forms Filed = 89.700 **Total Cost of Refueling Property** Part I Total cost of qualified alternative fuel vehicle refueling property placed in service during the tax 242.352 Credit for Business/Investment Use Part of Refueling Property 2 Business/investment use part (see instructions) 45,990 Section 179 expense deduction (see instructions) 4 4 5 6 Maximum business/investment use part of credit (see instructions) . . . <u>276,487</u> 7 Enter the **smaller** of line 5 or line 6 10,213 8 Alternative fuel vehicle refueling property credit from partnerships and S corporations (see Business/investment use part of credit. Add lines 7 and 8. Partnerships and S corporations, 9 stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part 10,348 **Credit for Personal Use Part of Refueling Property** Part III 10 Subtract line 2 from line 1. If zero, stop here; do not file this form unless you are claiming a credit 10 11 11 12 12 Maximum personal use part of credit (see instructions) . . . 13 Enter the **smaller** of line 11 or line 12 13 44.861 14 Regular tax before credits: • Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. 14 • Other filers. Enter the regular tax before credits from your return. Credits that reduce regular tax before the alternative fuel vehicle refueling property credit: 15 15a Certain allowable credits (see instructions) 15b 15c 212,398 Net regular tax. Subtract line 15c from line 14. If zero or less, enter -0- and stop here; do not file 16 16 5.356.552 17 Tentative minimum tax (see instructions): • Individuals. Enter the amount from Form 6251, line 9. 17 4.385.298 Other filers. Enter the tentative minimum tax from your alternative minimum tax form or schedule. Subtract line 17 from line 16. If zero or less, stop here; do not file this form unless you are 18 976,692 19 Personal use part of credit. Enter the smaller of line 13 or line 18 here and on Schedule 3 (Form 1040), line 6j; or the appropriate line of your return. If line 18 is smaller than line 13, see 42.683 19 Form **8911** (Rev. 1-2022) For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 37721Q

* Data not shown because of the small number of sample returns on which they are based.

2021 Line Item Estimates—All figures are estimates based on samples.

Number of returns filed for selected lines

Form **8936**(Rev. January 2021)
Department of the Treasury
Internal Revenue Service

Qualified Plug-in Electric Drive Motor Vehicle Credit

(Including Qualified Two-Wheeled Plug-in Electric Vehicles)

► Attach to your tax return.

▶ Go to www.irs.gov/Form8936 for instructions and the latest information.

(a) Vehicle 1

OMB No. 1545-2137

Attachment Sequence No. **69**

(b) Vehicle 2

Name(s) shown on return

Total Forms Filed = 168,942

Identifying number

	_
NI	

12

13

- Use this form to claim the credit for certain plug-in electric vehicles.
- Claim the credit for certain alternative motor vehicles on Form 8910.

Use a separate column for each vehicle. If you need more columns,

use additional Forms 8936 and include the totals on lines 12 and 19.

Tentative Credit

Year, make, and model of vehicle .

2	Vehicle identification number (see instructions)	2		
_	(
3	Enter date vehicle was placed in service (MM/DD/YYYY)	3		
4a	If the vehicle is a two-wheeled vehicle, enter the cost of the vehicle. If the vehicle has at least four wheels, see instructions	4a		
b	Phase-out percentage (see instructions)	4b	%	%
с	Tentative credit. Multiply line 4a by line 4b	4c		
	If you did NOT use your vehicle for business or investment Part II and go to Part III. All others, go to Part II.	purpo	oses and did not have a credit from	m a partnership or S corporation,
Part	Credit for Business/Investment Use Part of	Vehi	cle	
5	Business/investment use percentage (see instructions)	5	%	%
6	Multiply line 4c by line 5. If the vehicle has at least four wheels, leave lines 7 through 10 blank and go to line 11	6		
7	Section 179 expense deduction (see instructions) .	7		
8	Subtract line 7 from line 6	8		
9	Multiply line 8 by 10% (0.10)	9		
10	Maximum credit per vehicle	10	2,500	2,500
11	For vehicles with four or more wheels, enter the amount from line 6. If the vehicle is a two-wheeled vehicle, enter the smaller of line 9 or line 10	11		

Note: Complete Part III to figure any credit for the personal use part of the vehicle.

Qualified plug-in electric drive motor vehicle credit from partnerships and S corporations

Business/investment use part of credit. Add lines 12 and 13. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1y

Add columns (a) and (b) on line 11

(see instructions)

12

13

6,616

931

7,544

2021 Line Item Estimates—All figures are estimates based on samples.

Amounts of selected lines filed (in thousands of dollars)

Form **8936**(Rev. January 2021)
Department of the Treasury
Internal Revenue Service

Qualified Plug-in Electric Drive Motor Vehicle Credit

(Including Qualified Two-Wheeled Plug-in Electric Vehicles)

► Attach to your tax return.

▶ Go to www.irs.gov/Form8936 for instructions and the latest information.

(a) Vehicle 1

OMB No. 1545-2137

Attachment Sequence No. **69**

Name(s) shown on return

Total Forms Filed = 168,942

Identifying number

(b) Vehicle 2

- Use this form to claim the credit for certain plug-in electric vehicles.
- Claim the credit for certain alternative motor vehicles on Form 8910.

Use a separate column for each vehicle. If you need more columns,

use additional Forms 8936 and include the totals on lines 12 and 19.

Year, make, and model of vehicle

Tentative Credit

2	Vehicle identification number (see instructions)	2			
3	Enter date vehicle was placed in service (MM/DD/YYYY)	3			
4a	If the vehicle is a two-wheeled vehicle, enter the cost of the vehicle. If the vehicle has at least four wheels, see instructions	4a			
b	Phase-out percentage (see instructions)	4b		%	%
c	Tentative credit. Multiply line 4a by line 4b	4c			
	If you did NOT use your vehicle for business or investment Part II and go to Part III. All others, go to Part II.	purpo	oses and did not have a credi	t fror	m a partnership or S corporation,
Part	II Credit for Business/Investment Use Part of	Vehi	cle		
5	Business/investment use percentage (see instructions)	5		%	%_
6	Multiply line 4c by line 5. If the vehicle has at least four wheels, leave lines 7 through 10 blank and go to line 11	6			
7	Section 179 expense deduction (see instructions) .	7			
8	Subtract line 7 from line 6	8			
9	Multiply line 8 by 10% (0.10)	9			
10	Maximum credit per vehicle	10	2,	500	2,500
11	For vehicles with four or more wheels, enter the amount from line 6. If the vehicle is a two-wheeled vehicle, enter the smaller of line 9 or line 10	11			
12	Add columns (a) and (b) on line 11			12	21,683
13	Qualified plug-in electric drive motor vehicle credit from p			12	9 269

Note: Complete Part III to figure any credit for the personal use part of the vehicle.

Business/investment use part of credit. Add lines 12 and 13. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 1y

30,951

Form 8936 (Rev. 1-2021)

Part	Credit for Personal Use Part of Vehicle					
			(a)	Vehicle 1		(b) Vehicle 2
15	If you skipped Part II, enter the amount from line 4c. If you completed Part II, subtract line 6 from line 4c. If the vehicle has at least four wheels, leave lines 16 and 17 blank and go to line 18	15				
16	Multiply line 15 by 10% (0.10)	16				
17	Maximum credit per vehicle. If you skipped Part II, enter \$2,500. If you completed Part II, subtract line 11 from line 10	17				
18	For vehicles with four or more wheels, enter the amount from line 15. If the vehicle is a two-wheeled vehicle, enter the smaller of line 16 or line 17	18				
19	Add columns (a) and (b) on line 18				19	166,460
20	Enter the amount from Form 1040, 1040-SR, or 1040-NR	, line	18		20	
21	Personal credits from Form 1040, 1040-SR, or 1040-NR (see ir	structions)		21	55,178
22	Subtract line 21 from line 20				22	168,599
23	Personal use part of credit. Enter the smaller of lin Schedule 3 (Form 1040), line 6. Check box c on that line next to that box. If line 22 is smaller than line 19, see instr	and e	enter "8936" i	in the space	23	166,244

Form **8936** (Rev. 1-2021)

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8936 (Rev. 1-2021)

Part	Credit for Personal Use Part of Vehicle				
			(a) Vehicle 1		(b) Vehicle 2
15	If you skipped Part II, enter the amount from line 4c. If you completed Part II, subtract line 6 from line 4c. If the vehicle has at least four wheels, leave lines 16 and 17 blank and go to line 18	15			
16	Multiply line 15 by 10% (0.10)	16			
17	Maximum credit per vehicle. If you skipped Part II, enter \$2,500. If you completed Part II, subtract line 11 from line 10	17			
18	For vehicles with four or more wheels, enter the amount from line 15. If the vehicle is a two-wheeled vehicle, enter the smaller of line 16 or line 17	18			
19	Add columns (a) and (b) on line 18			19	1,136,569
20	Enter the amount from Form 1040, 1040-SR, or 1040-NR,	line	18	20	
21	Personal credits from Form 1040, 1040-SR, or 1040-NR (s	see ir	structions)	21	196,930
22	Subtract line 21 from line 20			22	13,667,775
23	Personal use part of credit. Enter the smaller of line Schedule 3 (Form 1040), line 6. Check box c on that line a next to that box. If line 22 is smaller than line 19, see instru	and e	enter "8936" in the space	23	1,037,358
					Form 8936 (Rev. 1-2021)

Form **8938**(Rev. November 2021)
Department of the Treasury

Statement of Specified Foreign Financial Assets

► Go to www.irs.gov/Form8938 for instructions and the latest information.

► Attach to your tax return.

Attachment
Seguence No. 039
Sequence No. 938

Form **8938** (Rev. 11-2021)

Cat. No. 37753A

OMB No. 1545-2195

Internal Revenue Service For calendar year 20 or tax year beginning , and ending , 20 If you have attached additional statements, check here **Number of additional statements** Name(s) shown on return 2 Taxpayer identification number (TIN) 528,551 Total Forms Filed = 3 Type of filer **a** Specified individual **b** Partnership **c** Corporation **d** Trust If you checked box 3a, skip this line 4. If you checked box 3b or 3c, enter the name and TIN of the specified individual who closely holds the partnership or corporation. If you checked box 3d, enter the name and TIN of the specified person who is a current beneficiary of the trust. (See instructions for definitions and what to do if you have more than one specified individual or specified person to list.) **b** TIN **Foreign Deposit and Custodial Accounts Summary** Part I \$ 459.893 6 7 \$ 113,125 8 9 Were any foreign deposit or custodial accounts closed during the tax year? ☐ No Part II Other Foreign Assets Summary 10 \$ 162.494 11 ☐ Yes 12 Were any foreign assets acquired or sold during the tax year? . . . Summary of Tax Items Attributable to Specified Foreign Financial Assets (see instructions) Part III (c) Amount reported on Where reported (a) Asset category (b) Tax item form or schedule (e) Schedule and line (d) Form and line 13 Foreign deposit and \$ 211,158 a Interest custodial accounts **b** Dividends \$ 76,565 c Royalties \$ 163 d Other income 11,951 e Gains (losses) \$ 33.187 **Deductions** 1.914 \$ 9,756 g Credits 14 Other foreign assets a Interest \$ 25,764 **b** Dividends 34,103 2.704 **c** Royalties d Other income 38,540 e Gains (losses) \$ 28.287 f Deductions \$ 9,799 g Credits \$ 5,697 **Excepted Specified Foreign Financial Assets** (see instructions) If you reported specified foreign financial assets on one or more of the following forms, enter the number of such forms filed. You do not need to include these assets on Form 8938 for the tax year. 16 Number of Forms 3520-A **15** Number of Forms 3520 17 Number of Forms 5471 **18** Number of Forms 8621 19 Number of Forms 8865

For Paperwork Reduction Act Notice, see the separate instructions.

OMB No. 1545-2195

Form **8938** (Rev. 11-2021)

Cat. No. 37753A

Statement of Specified Foreign Financial Assets

▶ Go to www.irs.gov/Form8938 for instructions and the latest information. Attach to your tax return.

Attachment Department of the Treasury Sequence No. 938 Internal Revenue Service For calendar year 20 or tax year beginning , 20 , and ending , 20 If you have attached additional statements, check here Number of additional statements Name(s) shown on return 2 Taxpayer identification number (TIN) 528,551 Total Forms Filed = 3 Type of filer **c** Corporation **a** Specified individual **b** Partnership **d** Trust If you checked box 3a, skip this line 4. If you checked box 3b or 3c, enter the name and TIN of the specified individual who closely holds the partnership or corporation. If you checked box 3d, enter the name and TIN of the specified person who is a current beneficiary of the trust. (See instructions for definitions and what to do if you have more than one specified individual or specified person to list.) **b** TIN Foreign Deposit and Custodial Accounts Summary Part I 5 \$ 342,951,530 6 7 8 \$ 112.242.361 9 Were any foreign deposit or custodial accounts closed during the tax year? ☐ Yes Part II Other Foreign Assets Summary 10 \$ 327,950,435 11 ☐ Yes 12 Summary of Tax Items Attributable to Specified Foreign Financial Assets (see instructions) Part III (c) Amount reported on Where reported (a) Asset category (b) Tax item form or schedule (e) Schedule and line (d) Form and line \$ 1,129,357 13 Foreign deposit and a Interest custodial accounts **b** Dividends \$ 8,036,524 c Royalties \$ 6,302 d Other income \$ 494,714 e Gains (losses) \$ 2.945.115 **Deductions** \$ 189,445 g Credits \$ 102,154 14 Other foreign assets a Interest \$ 761,146 **b** Dividends \$ 4,230,219 \$ 57,263 **c** Royalties d Other income \$ 4,298,302 e Gains (losses) \$ 21.278.077 f Deductions \$ 496,824 **g** Credits \$ 216,618 **Excepted Specified Foreign Financial Assets** (see instructions) If you reported specified foreign financial assets on one or more of the following forms, enter the number of such forms filed. You do not need to include these assets on Form 8938 for the tax year. **15** Number of Forms 3520 16 Number of Forms 3520-A **17** Number of Forms 5471 18 Number of Forms 8621 19 Number of Forms 8865

For Paperwork Reduction Act Notice, see the separate instructions.

Department of the Treasury Internal Revenue Service

Additional Medicare Tax

▶ If any line does not apply to you, leave it blank. See separate instructions. ► Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.

Attachment Sequence No. 71

Your social security number

OMB No. 1545-0074

▶ Go to www.irs.gov/Form8959 for instructions and the latest information. Name(s) shown on return

Total Forms Filed = 6.838.587 Part I Additional Medicare Tax on Medicare Wages Medicare wages and tips from Form W-2, box 5. If you have more than one 6,576,164 Form W-2, enter the total of the amounts from box 5 1 2 2 2,181 3 3 1,991 4 6,576,326 5 Enter the following amount for your filing status: 6.822.705 Single, Head of household, or Qualifying widow(er) \$200,000 5,400,433 6 6 7 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to 7 5.399.388 **Additional Medicare Tax on Self-Employment Income** Part II Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you 1,584,658 had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) . . 8 9 Enter the following amount for your filing status: Married filing separately \$125,000 6.672.789 Single, Head of household, or Qualifying widow(er) \$200,000 9 10 10 6,576,326 1,417,899 11 1,433,215 12 12 13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and 1.431.786 13 Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation 14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 3,082 14 15 Enter the following amount for your filing status: 6,609,358 Single, Head of household, or Qualifying widow(er) \$200,000 15 806 16 16 17 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). 806 17 **Total Additional Medicare Tax** Part IV Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR 6,028,804 18 Part V Withholding Reconciliation Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6 6,567,475 19 20 20 6,576,164 Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax 21 21 6,574,638 22 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax 22 4,898,866 23 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 1.124 23 24 Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR or 4.899.818 24

Department of the Treasury Internal Revenue Service

Additional Medicare Tax

▶ If any line does not apply to you, leave it blank. See separate instructions.

► Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS. ▶ Go to www.irs.gov/Form8959 for instructions and the latest information. OMB No. 1545-0074 Attachment Sequence No. **71**

Name(s) shown on return

Your social security number

1441110(3	s) shown on return Total Forms Filed = 6,838,587		Your soc	ial secu	rity number
Par	Additional Medicare Tax on Medicare Wages				
1	Medicare wages and tips from Form W-2, box 5. If you have more than one				
	Form W-2, enter the total of the amounts from box 5	1	2,775,068,948		
2	Unreported tips from Form 4137, line 6	2	1,174		
3	Wages from Form 8919, line 6	3	153,609		
4	Add lines 1 through 3	4	2,775,223,731		
5	Enter the following amount for your filing status:				
	Married filing jointly				
	Married filing separately	_	4 604 200 605		
_	Single, Head of household, or Qualifying widow(er) \$200,000	5	1,604,299,695		4 007 000 740
6	Subtract line 5 from line 4. If zero or less, enter -0			6	1,327,939,743
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009).			l _ l	44.054.440
Dor	Part II			7	11,951,449
Pari					
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a less enter 0. (Form 1040 PR or 1040 SS filers, and instructions.)	8	391,963,787		
9	had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)	0			
9	Enter the following amount for your filing status: Married filing jointly				
	Married filing separately				
	Single, Head of household, or Qualifying widow(er) \$200,000	9	1,569,371,854		
10	Enter the amount from line 4	10	2,775,223,731	-	
11	Subtract line 10 from line 9. If zero or less, enter -0	11	159,560,713	-	
12	Subtract line 11 from line 8. If zero or less, enter -0		<u> </u>	12	293,016,100
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0				
	go to Part III	,		13	2,637,144
Part					
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14		•		_
	(see instructions)	14	787,316		
15	Enter the following amount for your filing status:				
	Married filing jointly				
	Married filing separately				
	Cinals Head of boundhold or Qualifying widow(or) \$200,000	15	1,554,321,340		
	Single, Head of household, or Qualifying widow(er) \$200,000				
16	Subtract line 15 from line 14. If zero or less, enter -0-			16	236,516
16 17	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 l	oy 0.9% (0.009).	16	<u> </u>
17	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 l	oy 0.9% (0.009).	16 17	236,516
17	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 l	oy 0.9% (0.009). 		<u> </u>
17	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 l ne 11	oy 0.9% (0.009). (Form 1040-PR	17	2,129
17 Part 18	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 l ne 11	oy 0.9% (0.009). (Form 1040-PR		
Part 18	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 l ne 11	oy 0.9% (0.009). (Form 1040-PR	17	2,129
17 Part 18	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 l	(Form 1040-PR	17	2,129
Part 18 Part 19	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 l	oy 0.9% (0.009). (Form 1040-PR 	17	2,129
17 Part 18 Part 19 20	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 l	(Form 1040-PR	17	2,129
Part 18 Part 19	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 l	(Form 1040-PR 	17	2,129
Part 18 Part 19 20 21	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 l	51,069,566 2,775,068,948	17	2,129
17 Part 18 Part 19 20 21	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 k	51,069,566 2,775,068,948 40,238,463 I Medicare Tax	17	2,129
Part 18 Part 19 20 21	Subtract line 15 from line 14. If zero or less, enter -0	ne 16 k ne 11 19 20 21 litiona	51,069,566 2,775,068,948 40,238,463 I Medicare Tax	17	2,129
17 Part 18 Part 19 20 21	Subtract line 15 from line 14. If zero or less, enter -0- Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line Enter here and go to Part IV. IV Total Additional Medicare Tax Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), ling or 1040-SS filers, see instructions), and go to Part V. Withholding Reconciliation Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6. Enter the amount from line 1. Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages. Subtract line 21 from line 19. If zero or less, enter -0 This is your Add withholding on Medicare wages. Additional Medicare Tax withholding on railroad retirement (RRTA) compensation 14 (see instructions).	ne 16 k ne 11 19 20 21 litiona	51,069,566 2,775,068,948 40,238,463 I Medicare Tax	17	2,129 14,590,722
17 Part 18 Part 19 20 21 22 23	Subtract line 15 from line 14. If zero or less, enter -0- Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line Enter here and go to Part IV. Total Additional Medicare Tax Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), ling or 1040-SS filers, see instructions), and go to Part V. Withholding Reconciliation Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6. Enter the amount from line 1. Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages. Subtract line 21 from line 19. If zero or less, enter -0 This is your Add withholding on Medicare wages. Additional Medicare Tax withholding on railroad retirement (RRTA) compensation 14 (see instructions). Total Additional Medicare Tax withholding. Add lines 22 and 23. Also included and income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25.	19 20 21 litiona	51,069,566 2,775,068,948 40,238,463 I Medicare Tax I Form W-2, box	17	2,129 14,590,722 10,899,909 2,371
17 Part 18 Part 19 20 21 22 23 24	Subtract line 15 from line 14. If zero or less, enter -0- Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line Enter here and go to Part IV. IV Total Additional Medicare Tax Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), ling or 1040-SS filers, see instructions), and go to Part V. Withholding Reconciliation Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6. Enter the amount from line 1. Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages. Subtract line 21 from line 19. If zero or less, enter -0 This is your Add withholding on Medicare wages. Additional Medicare Tax withholding on railroad retirement (RRTA) compensation 14 (see instructions).	19 20 21 litiona	51,069,566 2,775,068,948 40,238,463 I Medicare Tax I Form W-2, box	17	2,129 14,590,722

Form **8960**Department of the Treasury

Internal Revenue Service (99)

Net Investment Income Tax— Individuals, Estates, and Trusts

► Attach to your tax return.

► Go to www.irs.gov/Form8960 for instructions and the latest information.

OMB No. 1545-2227

2021

Attachment Sequence No. 72

Name(s) shown on your tax return Your social security number or EIN Total Forms Filed = 8,555,824 **Investment Income** Section 6013(g) election (see instructions) Boxes checked = 2,006 ☐ Section 6013(h) election (see instructions) Boxes checked = 576 Regulations section 1.1411-10(g) election (see instructions)

Boxes checked = 16,782 1 6,760,394 2 2 6,140,132 3 3 175,676 4a Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see 4a 3,647,372 Adjustment for net income or loss derived in the ordinary course of a nonb section 1411 trade or business (see instructions) 4b 2,365,899 2,254,918 6,460,249 **5a** Net gain or loss from disposition of property (see instructions) 5a Net gain or loss from disposition of property that is not subject to net 596,952 5b Adjustment from disposition of partnership interest or S corporation stock (see 23,628 5d 6,346,223 Adjustments to investment income for certain CFCs and PFICs (see instructions) . 6 6 16,068 7 Other modifications to investment income (see instructions) 7 599,913 8 7,928,123 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7. . . . 8 Part II Investment Expenses Allocable to Investment Income and Modifications 552,119 b State, local, and foreign income tax (see instructions) 9b 2,491,606 Miscellaneous investment expenses (see instructions) 9с 199,633 С 9d 2,693,317 10 10 85,632 Total deductions and modifications. Add lines 9d and 10 11 11 2,732,167 Part III Tax Computation Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. 7.334.484 Estates and trusts, complete lines 18a-21. If zero or less, enter -0- 12 Individuals: 13 8,554,337 14 8,555,824 15 Subtract line 14 from line 13. If zero or less, enter -0-7,311,780 16 16 17 Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include 7,211,136 17 **Estates and Trusts:** 18a 18a Deductions for distributions of net investment income and deductions under 18b c Undistributed net investment income. Subtract line 18b from line 18a (see 18c 19a Highest tax bracket for estates and trusts for the year (see instructions) . . 19b Subtract line 19b from line 19a. If zero or less, enter -0- 19c С 20 20 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and 21 21

Department of the Treasury

Net Investment Income Tax— Individuals, Estates, and Trusts

► Attach to your tax return.

▶ Go to www.irs.gov/Form8960 for instructions and the latest information. Internal Revenue Service (99)

OMB No. 1545-2227 Attachment Sequence No. **72**

Name(s)	shown on your tax return Total Forms Filed = 8,555,824		,	Your so	cial se	curity number or EIN
Part			l.			
	☐ Section 6013(h) election (see instructions)	_4	.; \			
	Regulations section 1.1411-10(g) election (see in				4	
1	Taxable interest (see instructions)				1	68,824,903
2	Ordinary dividends (see instructions)				2	278,791,103
3	Annuities (see instructions)	 I I		.	3	6,210,556
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a	1,013,184	809		
b	Adjustment for net income or loss derived in the ordinary course of a non-		1,010,104	,000		
~	section 1411 trade or business (see instructions)	4b	-931,724,	970		
С	Combine lines 4a and 4b	·			4c	81,459,838
5a	Net gain or loss from disposition of property (see instructions)	5a	1,852,382	,977		
b	Net gain or loss from disposition of property that is not subject to net					
	investment income tax (see instructions)	5b	-406,288,	916		
С	Adjustment from disposition of partnership interest or S corporation stock (see		-98,089,9)5E		
_	instructions)	5c				
d	Combine lines 5a through 5c			F	5d	1,348,004,106
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)			F	6	1,779,131
7	Other modifications to investment income (see instructions)			-	7	-2,261,817
8 Down	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7				8	1,782,807,820
Part				2		
9a	Investment interest expenses (see instructions)	9a	18,649,58			
b	State, local, and foreign income tax (see instructions)	9b 9c	7,435,990 1,653,294			
C C	· · · · · · · · · · · · · · · · · · ·				04	07 700 074
d 10	Add lines 9a, 9b, and 9c				9d	27,738,874
10 11	Additional modifications (see instructions)				10 11	748,669 28,487,543
Part		· ·		•		20,401,343
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, o	compl	oto linos 13	_17		
12	Estates and trusts, complete lines 18a–21. If zero or less, enter -0				12	1,772,884,759
	Individuals:			· t		
13	Modified adjusted gross income (see instructions)	13	6,334,164	.310		
14	Threshold based on filing status (see instructions)	14	1,999,478			
15	Subtract line 14 from line 13. If zero or less, enter -0	15	4,339,741			
16	Enter the smaller of line 12 or line 15				16	1,570,989,306
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Ent	ter he	re and incl	lude		
	on your tax return (see instructions)				17	59,697,612
	Estates and Trusts:					
18a	Net investment income (line 12 above)	18a				
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b				
С	Undistributed net investment income. Subtract line 18b from line 18a (see	100				
	instructions). If zero or less, enter -0	18c				
19a	Adjusted gross income (see instructions)	19a				
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b				
С	Subtract line 19b from line 19a. If zero or less, enter -0	19c				
20	Enter the smaller of line 18c or line 19c			H	20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.0)					
	include on your tax return (see instructions)				21	
For Par	perwork Reduction Act Notice, see your tax return instructions.	t. No. 5	9474M			Form 8960 (2021)

Premium Tax Credit (PTC)

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

OMB No. 1545-0074

2021

Attachment
Sequence No. 73

Department of the Treasury Internal Revenue Service Name shown on your return

► Go to www.irs.gov/Form8962 for instructions and the latest information.

		Tota	al Forms Filed =	8,315,026				
A.	-	r spouse (if filing a joir k. See instructions .	nt return), received, or we	ere approved to receive,	unemployment compe	nsation for any week	beginr	ning during 2021, ▶ □
B.	You cannot ta	ke the PTC if your filing	g status is married filing s	eparately unless you qua	lify for an exception. Se	e instructions. If you q	ualify,	check the box ▶
Part	Annu	ual and Monthly	Contribution Am	nount				
1	Tax family s	ize. Enter your tax fa	mily size. See instructi	ons			1	8,315,026
2a	Modified AG	al. Enter your modifie	ed AGI. See instruction	ns	2a	8,276,697		
b	Enter the tot	tal of your depender	nts' modified AGI. See	instructions	2b	69,795		
3	Household is		3	8,156,354				
4			ederal poverty line amo			uctions. Check the 48 states and DC	4	8,315,026
5	Household in		5	%				
6	Reserved fo							
7	Applicable fi	gure. Using your line	5 percentage, locate ye	our "applicable figure"	on the table in the ins	structions	7	4,612,645
8a	line 7. Round t	ution amount. Multiply li o nearest whole dollar a	mount 8a 4,6	03,367 by 12	hly contribution amo 2. Round to nearest w	hole dollar amount	8b	4,602,359
Part	Prem	nium Tax Credit	Claim and Reco	nciliation of Adva	ance Payment o	of Premium Tax	Cre	edit
9	_ '	•	s with another taxpaye	•				-
			of Policy Amounts, or Part		-	No. Continue to	line	10.
10			e if you can use line 11	•	~	□		
	_	ntinue to line 11. Co tinue to line 24.	ompute your annual P	TC. Then skip lines 12		_		les 12–23. Compute d continue to line 24.
	Annual Calculation (a) Annual enrollment premiums (Form(s) 1095-A, line 33A) (b) Annual applicable SLCSP premium (Form(s) 1095-A, line 33B) (c) Annual (d) Annual maximum premium assistance (subtract (c) from (b); if zero or less, enter -0-) (e) Annual premium credit allowed (smaller of (a) or (contribution amount premium assistance)						ı	(f) Annual advance payment of PTC (Form(s) 1095-A, line 33C)
11	Annual Totals	2,593,138	2,499,806	1,552,405	2,353,675	2,352,666		2,458,261
	Monthly alculation	(a) Monthly enrollment premiums (Form(s) 1095-A, lines 21–32, column A)	(b) Monthly applicable SLCSP premium (Form(s) 1095-A, lines 21–32, column B)	(c) Monthly contribution amount (amount from line 8b or alternative marriage monthly calculation)	(d) Monthly maximum premium assistance (subtract (c) from (b); zero or less, enter -0-	credit allowed	Į,	(f) Monthly advance payment of PTC (Form(s) 1095-A, lines 21-32, column C)
12	January					3,304,773		3,436,780
13	February					3,208,378		3,337,604
14	March					3,224,256	_	3,361,335
15	April					3,265,338		3,397,848
16	May					3,409,773		3,589,583
17	June					3,513,764		3,712,895
18	July					3,604,594		3,793,923
19	August					3,711,810		3,897,484
20	September					3,841,550		4,041,591
21	October					3,831,760		4,031,452
22	November					3,853,357		4,048,782
23	December					3,798,362		4,003,142
24	•		he amount from line 1	` ,	• • • •		24	7,417,680 7,796,800
25	Advance pag	yment of PTC. Enter	the amount from line	11(f) or add lines 12(f)	through 23(f) and en	ter the total here	25	7,790,000
26	on Schedule	e 3 (Form 1040), line	4 is greater than line 25 9. If line 24 equals lir e to line 27	ne 25, enter -0 Stop	here. If line 25 is gr	eater than line 24,	26	4,343,215
Part			ss Advance Payn				,	-,,
27			If line 25 is greater than			he difference here	27	2,632,105
28		limitation (see instru	-				28	1,873,278
29		,	·					,,
	Excess advance premium tax credit repayment. Enter the smaller of line 27 or line 28 here and on Schedule 2 (Form 1040), line 2							2.632.104

Cat. No. 37784Z

Premium Tax Credit (PTC)

1 20

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service ► Attach to Form 1040, 1040-SR, or 1040-NR.

► Go to www.irs.gov/Form8962 for instructions and the latest information.

Attachment Sequence No. **73**

Name	shown on your re		al Forms Filed =	8,315,026	You	ur social security number		
Α.		r spouse (if filing a joir	nt return), received, or we	* *		empensation for any week	-	
В.	You cannot ta	ake the PTC if your filing	g status is married filing s	eparately unless you qua	lify for an exception	n. See instructions. If you q	ualify,	check the box ▶
Pai	tl Annu	ual and Monthly	Contribution Am	nount				-
1			mily size. See instructi				1	16,294
2a	Modified AG	al. Enter your modifie	ed AGI. See instruction	ns	:	2a 400,382,904		,
b	Enter the tot	tal of your depender	nts' modified AGI. See	instructions		2b 529,624		
3	Household is	ncome. Add the amo	ounts on lines 2a and 2	2b. See instructions .			3	412,047,423
4			ederal poverty line amo			nstructions. Check the ther 48 states and DC	4	141,944,712
5	Household in	ncome as a percenta	ige of federal poverty li	ne (see instructions) .			5	%
6	Reserved fo	r future use						
7	Applicable fi	gure. Using your line	5 percentage, locate ye	our "applicable figure"	on the table in th	e instructions	7	2,304,106
8a Annual contribution amount. Multiply line 3 by line 7. Round to nearest whole dollar amount 8a 19,400,820 b Monthly contribution amount. Divide line by 12. Round to nearest whole dollar amount Part II Premium Tax Credit Claim and Reconciliation of Advance Payment of Premium								1,616,934
Par	t II Prem	nium Tax Credit	Claim and Reco	nciliation of Adva	ance Payme	nt of Premium Tax	: Cre	edit
9						calculation for year of m		-
			•		3	ge. 🔲 No. Continue to	line '	10.
10			e if you can use line 11	•	J	_		
		ontinue to line 11. Co tinue to line 24.	ompute your annual P	TC. Then skip lines 12		your monthly P		nes 12–23. Compute ad continue to line 24.
C	Annual Calculation (a) Annual enrollment premiums (Form(s) 1095-A, line 33A) (b) Annual applicable SLCSP premium (Form(s) 1095-A, line 33B) (c) Annual contribution amount (line 8a) (d) Annual maximum premium assistance (subtract (c) from (b); if zero or less, enter -0-) (e) Annual premium contribution amount (smaller of (a) or (c) annual premium premium assistance (subtract (c) from (b); if zero or less, enter -0-)					F	payment of PTC (Form(s)	
11	Annual Totals	24,667,128	25,440,768	6,476,740	21,450,34	19,970,889	•	20,289,167
	Monthly alculation	(a) Monthly enrollment premiums (Form(s) 1095-A, lines 21–32, column A)	(b) Monthly applicable SLCSP premium (Form(s) 1095-A, lines 21–32, column B)	(c) Monthly contribution amount (amount from line 8b or alternative marriage monthly calculation)	(d) Monthly maxi premium assista (subtract (c) from zero or less, ente	ance (e) Monthly premiur credit allowed (smaller of (a) or (F	(f) Monthly advance payment of PTC (Form(s) 1095-A, lines 21–32, column C)
12	January					2,538,438		2,498,998
13	February					2,476,200		2,428,201
14	March					2,498,256		2,456,746
15	April					2,516,635		2,470,930
16	May					2,603,195		2,689,592
_17	June					2,687,650		2,819,245
_18	July					2,741,832		2,871,011
19	August					2,804,089		2,953,526
20	September					2,896,707		3,142,513
21	October					2,876,620		3,122,127
_22	November					2,879,714		3,131,153
23	December		ha ana ana l	4/3 1112 15/3	lless and SS()	2,871,342		3,132,994
24	•		the amount from line 1	.,	• ,		24	52,347,181
25	Advance pa	yment of PTC. Enter	the amount from line	11(f) or add lines 12(f)	through 23(t) and	d enter the total here	25	54,006,202
26	on Schedule	e 3 (Form 1040), line		ne 25, enter -0 Stop	here. If line 25 i	he difference here and s greater than line 24,	26	3,625,006
Par			ss Advance Payn					0,020,000
27		-	If line 25 is greater than				27	5,285,570
28		limitation (see instru					28	2,470,206
29	. ,	•	•			re and on Schedule 2		
	(Form 1040)	•					29	3,862,542
For P	aperwork Rec		see your tax return ir			lo. 37784Z		Form 8962 (2021)

Form 8962 (2021) Page **2**

Comp		t Policy Amoun ation for up to four p		s. See instructi	ons for allocation details			
	ation 1	<u> </u>					_	
30	(a) Policy Number (Fo	orm 1095-A, line 2)	(b) SSN of other taxp	ayer	(c) Allocation start n	nonth	(d) Allocation stop month	
	Allocation percentag applied to monthly amounts	(e) Pre	mium Percentage	(f) SL	CSP Percentage	(g) A	dvance Payment of the PTC Percentage	
Alloc	ation 2							
31	(a) Policy Number (Fo	orm 1095-A, line 2)	(b) SSN of other taxp	ayer	(c) Allocation start n	nonth	(d) Allocation stop month	
	Allocation percentag applied to monthly amounts	(e) Pre	mium Percentage	(f) SL	CSP Percentage	(g) A	dvance Payment of the PTC Percentage	
Alloc	ation 3							
32	(a) Policy Number (Fo	orm 1095-A, line 2)	(b) SSN of other taxp	ayer	(c) Allocation start n	nonth	(d) Allocation stop month	
	Allocation percentag applied to monthly amounts	(e) Pre	mium Percentage	(f) SL	CSP Percentage	(g) Advance Payment of the PTC Percentage		
Alloc	ation 4							
33	(a) Policy Number (Fo	orm 1095-A, line 2)	(b) SSN of other taxp	ayer	(c) Allocation start n	nonth	(d) Allocation stop month	
	Allocation percentag applied to monthly amounts	(e) Pre	mium Percentage	(f) SL(CSP Percentage	(g) Advance Payment of the PTC Percentage		
34	allocated policy amou lines 12–23, columns (amounts on Form 1 nts from Forms 109 (a), (b), and (f). Comp	095-A by the allocation 5-A, if any, to compute a	combined tot s 12–23, colur		the con	ated policy amounts and non- nbined total for each month on 24.	
Dov	Altornativa (Calculation for 1	Voor of Marriaga					
		to elect the alternat				election,	see the instructions for line 9.	
35	Alternative entries for your SSN		(b) Alternative contribution are	e monthly (c) Alternative start mon	th (d) Alternative stop month	
36	Alternative entries for your spouse's SSN	(a) Alternative fan	nily size (b) Alternative contribution ar	-	c) Alternative start mon	th (d) Alternative stop month	
							5 0060 (2224)	

Form **8962** (2021)

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8	3962 (2021)								Page 2	
Part	IV Allocation of	f Policy Amoun	ts						· · · · · · · · · · · · · · · · · · ·	
Comp	lete the following inform	ation for up to four p	oolicy am	nount allocations	s. See instruc	ctions	for allocation details			
Alloc	ation 1									
30	(a) Policy Number (Fo	orm 1095-A, line 2)	(b) SS	SN of other taxpa	ayer		(c) Allocation start n	nonth	(d) Allocation stop month	
	Allocation percentag applied to monthly amounts	(e) Pre	mium Pe	ercentage	(f) S	LCSF	Percentage	(g) A	dvance Payment of the PTC Percentage	
Alloc	ation 2									
31	(a) Policy Number (Fo	orm 1095-A, line 2)	(b) SS	SN of other taxpa	ayer	1	(c) Allocation start n	nonth	(d) Allocation stop month	
	Allocation percentag applied to monthly amounts	e (e) Pre	mium Pe	ercentage	(f) S	LCSF	Percentage	(g) A	dvance Payment of the PTC Percentage	
ΔΙΙος	ation 3									
32	(a) Policy Number (Fo	orm 1095-A, line 2)	(b) SS	SN of other taxpa	ayer	((c) Allocation start n	nonth	(d) Allocation stop month	
	Allocation percentag applied to monthly amounts	(e) Pre	mium Pe	ercentage	(f) S	LCSF	Percentage	(g) A	dvance Payment of the PTC Percentage	
Alloc	ation 4									
33	(a) Policy Number (Fo	orm 1095-A, line 2)	(b) SS	SN of other taxpa	ayer	((c) Allocation start n	nonth	(d) Allocation stop month	
	Allocation percentag applied to monthly amounts	(e) Pre	(e) Premium Percentage		(f) SLCSP Percentage			(g) Advance Payment of the PTC Percentage		
34	allocated policy amou	amounts on Form 1	095-A b 5-A, if ar oute the	by the allocation by, to compute a amounts for line	s 12–23, col	otal fo	or each month. Enter	the cor	ated policy amounts and non- nbined total for each month on 24.	
			ive calcu	ulation for year c	-			election	, see the instructions for line 9.	
35	Alternative entries for your SSN	(a) Alternative fan	nily size	(b) Alternative contribution an	•	(c)	Alternative start mon	th	(d) Alternative stop month	
36	Alternative entries for your spouse's SSN	(a) Alternative fan	nily size	(b) Alternative contribution an		(c)	Alternative start mon	th	(d) Alternative stop month	
									Form 8962 (2021)	

(Rev. May 2020) Department of the Treasury Internal Revenue Service

Limitation on Business Interest Expense Under Section 163(j)

► Attach to your tax return.

▶ Go to www.irs.gov/Form8990 for instructions and the latest information.

OMB No. 1545-0123

Taxpay	Total Forms Filed = 140,564		Ident	ification nu	imber
If For	m 8990 relates to an information return for a foreign entity (for example, Form 5471), enter:			
Name	e of foreign entity ►				
	oyer identification number, if any ▶				
	ence ID number >				
Par	· · ·				
	I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B new ayer is a partner or shareholder of a pass-through entity subject to section 163(j).	ed to be	completed be	ore Part I	when the
Sect	ion I—Business Interest Expense				
1	Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation	1	61,090		
2	Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership)	2	4,152		
3	Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h))	3	17,097		
4	Floor plan financing interest expense. See instructions	4	29		
5	Total business interest expense. Add lines 1 through 4		🕨	5	77,449
Sect	ion II—Adjusted Taxable Income				
	Taxable Income				
6	Taxable income. See instructions			6	85,401
	Additions (adjustments to be made if amounts are taken into	o accou	nt on line 6)		
7	Any item of loss or deduction that is not properly allocable to a trade or business of the taxpayer. See instructions	7	858		
8	Any business interest expense not from a pass-through entity. See instructions	8	<u>656</u> 56,991		
9	Amount of any net operating loss deduction under section 172	9	2,206		
10	Amount of any qualified business income deduction allowed under section		2,200		
	199A	10	39,776		
11	Deduction allowable for depreciation, amortization, or depletion attributable to a trade or business. See instructions	11	9,856		
12	Amount of any loss or deduction items from a pass-through entity. See instructions	12	22,094		
13	Other additions. See instructions	13	1,451		
14	Total current year partner's excess taxable income (Schedule A, line 44, column (f))	14	49,832		
15	Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c))	15	7,423		
16	Total. Add lines 7 through 15		<u> ▶</u>	16	137,821
	Reductions (adjustments to be made if amounts are taken in	to acco	unt on line 6)		
17	Any item of income or gain that is not properly allocable to a trade or business of the taxpayer. See instructions	17 (1,157)	
18	Any business interest income not from a pass-through entity. See instructions	18 (199	'	
19	Amount of any income or gain items from a pass-through entity. See instructions	19 (21,430		
20	Other reductions. See instructions	20 (96)	
21	Total. Combine lines 17 through 20			21 (21,624
22	Adjusted taxable income. Combine lines 6, 16, and 21. (If zero or less, enter -0-			22	135,471
For Pa	aperwork Reduction Act Notice, see the instructions. Cat. No. 378			Form	8990 (Rev. 5-202

(Rev. May 2020)

Department of the Treasury

Limitation on Business Interest Expense Under Section 163(j)

► Attach to your tax return.

▶ Go to www.irs.gov/Form8990 for instructions and the latest information.

OMB No. 1545-0123

memai	nevertue Service	COL IIII	ormanom.		
Taxpay	Total Forms Filed = 140,564		Į,	dentification	number
If Form	m 8990 relates to an information return for a foreign entity (for example, Form 5471	I), ente	er:		
	e of foreign entity ►				
	oyer identification number, if any ►				
	ence ID number				
Par	•	! +- !-		1 / f D	-t 1 ! t !
	I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B new ayer is a partner or shareholder of a pass-through entity subject to section 163(j).	ea to t	oe completed	Defore Pai	T I when the
Secti	ion I—Business Interest Expense				
1	Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation	1	3,914,44	3	
2	Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership)	2	412,524		
3	Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h))	3	958,475		
4	Floor plan financing interest expense. See instructions	4	5,527		
5	Total business interest expense. Add lines 1 through 4	$\overline{}$		▶ 5	5,290,970
Secti	ion II – Adjusted Taxable Income			·	
	Taxable Income				
6	Taxable income. See instructions			. 6	228,886,238
	Additions (adjustments to be made if amounts are taken into	o acco	ount on line (6)	
7	Any item of loss or deduction that is not properly allocable to a trade or business of the taxpayer. See instructions	7	3,750,271	1	
8	Any business interest expense not from a pass-through entity. See instructions	8	1,675,78		
9	Amount of any net operating loss deduction under section 172	9	11,776,10		
10	Amount of any qualified business income deduction allowed under section 199A	10	9,354,89		
11	Deduction allowable for depreciation, amortization, or depletion attributable to a trade or business. See instructions	11	4,482,52	8	
12	Amount of any loss or deduction items from a pass-through entity. See instructions	12	45,512,8	55	
13	Other additions. See instructions	13	2,322,57	5	
14	Total current year partner's excess taxable income (Schedule A, line 44, column (f))	14	84,426,23	32	
15	Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c))	15	68,461,99	91	
16	Total. Add lines 7 through 15			▶ 16	231,763,244
	Reductions (adjustments to be made if amounts are taken in	to acc	count on line	6)	
17	Any item of income or gain that is not properly allocable to a trade or business of the taxpayer. See instructions	17	(17 700 3	24	
18	Any business interest income not from a pass-through entity. See instructions	18	<u>(</u>		
19	Amount of any income or gain items from a pass-through entity. See	13	1 311,130	,)	
13	instructions	19	(99,010,78	38)	
20	Other reductions. See instructions	20	(776,712		
21	Total. Combine lines 17 through 20	-		-	(117,813,560
22	Adjusted taxable income. Combine lines 6, 16, and 21. (If zero or less, enter -0-			▶ 22	343,597,530
For Pa	aperwork Reduction Act Notice, see the instructions. Cat. No. 378	14C		For	m 8990 (Rev. 5-2020

2021 Line Item Estimates—All figures are estimates based on samples.

Number of returns filed for selected lines Form 8990 (Rev. 5-2020) Page 2 Section III—Business Interest Income Current year business interest income. See instructions 720 24 Excess business interest income from pass-through entities (total of Schedule A, line 44, column (g), and Schedule B, line 46, column (d)) 24 11.712 12,109 25 25 Section IV – 163(j) Limitation Calculations **Limitation on Business Interest Expense** 26 Multiply adjusted taxable income (line 22) by the applicable percentage. See 26 135,204 27 27 Floor plan financing interest expense (line 4) 28 28 29 **Total.** Add lines 26, 27, and 28 29 135,439 **Allowable Business Interest Expense** 30 72,645 Carryforward Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0-.) 31 8.244 Part II **Partnership Pass-Through Items** Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information. **Excess Business Interest Expense** 32 Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.) 33 Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.) 34 34 35 Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.) 36 **Excess taxable income.** Multiply line 35 by line 22 **Excess Business Interest Income** Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, 37 Part III S Corporation Pass-Through Items Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information. **Excess Taxable Income**

38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)	38	
39	Subtract line 38 from line 26. (If zero or less, enter -0)	39	
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)	40	
41	Excess taxable income. Multiply line 40 by line 22	41	

Excess Business Interest Income

42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less,		
	Excess business interest incomer cubinet the sum of interest, 2, and 6 from into 26. (if 25/6 of 1666,		ĺ
	enter -0)	42	

Form **8990** (Rev. 5-2020)

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8	990 (Rev. 5-2020)				Page 2
Sect	ion III—Business Interest Income				
23	Current year business interest income. See instructions	23	426,920		
24	Excess business interest income from pass-through entities (total of Schedule				
	A, line 44, column (g), and Schedule B, line 46, column (d))	24	6,302,665		0.700.505
25	Total. Add lines 23 and 24		<u> ▶</u>	25	6,729,585
Sect	ion IV-163(j) Limitation Calculations				
	Limitation on Business Interest Expens	е			
26	Multiply adjusted taxable income (line 22) by the applicable percentage. See				
	instructions	26	122,571,584		
27	Business interest income (line 25)	27			
28	Floor plan financing interest expense (line 4)	28		-	420 206 606
29	Total. Add lines 26, 27, and 28		<u> ▶</u>	29	129,306,696
	Allowable Business Interest Expense			T 1	
30	Total current year business interest expense deduction. See instructions			30	4,645,609
	Carryforward				
31	Disallowed business interest expense. Subtract line 29 from line 5. (If zero or I	ess, e	nter -0)	31	673,954
Part					
	II is only completed by a partnership that is subject to section 163(j). The partnershare not carried forward by the partnership. See the instructions for more information		ns below are alloc	cated 1	to the partners
	Excess Business Interest Expense				
32	Excess business interest expense. Enter amount from line 31			32	
	Excess Taxable Income (If you entered an amount on line 32, s	kip lin	es 33 through 37.)	
33	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)			33	
34	Subtract line 33 from line 26. (If zero or less, enter -0)			34	
35	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-			35	
36	Excess taxable income. Multiply line 35 by line 22			36	
	Excess Business Interest Income				
37	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from li				
	enter -0)			37	
Part					
	III is only completed by S corporations that are subject to section 163(j). The S corporat the instructions for more information.	ion ite	ms below are alloc	ated to	the shareholders.
	Excess Taxable Income				
38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)			38	
39	Subtract line 38 from line 26. (If zero or less, enter -0)			39	
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-			40	.•
41	Excess taxable income. Multiply line 40 by line 22			41	
	Excess Business Interest Income				
42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from li				
	enter -0)			42	
				Forn	n 8990 (Rev. 5-2020)

2021 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Form 8990 (Rev. 5-2020)

OIIIIO	1990 (1164. 9-2020)									Page U
SCH	HEDULE A Summary of	Partner's Sect	ion 163(j) Exce	ss Items						:
Any t	taxpayer that owns an interest in a	a partnership subj	ect to section 163	(j) should com	plete Sched	ule A before	e completing Part I.			
				ess Business Inte	erest Expense		(f) Current year	(g) Current year	(h) Excess business	(i) Current year
(a) Name of partnership	(a) Name of partnership	(b) EIN	(c) Current year	(d) Prior		(e) Total (c) plus (d))	excess taxable income	excess business interest income	interest expense treated as paid or accrued (see instructions)	excess business interest expense carryforward ((e) minus (h))
43										
44	Total ▶									
SCH	IEDULE B Summary of S	Corporation S	Shareholder's E	Excess Taxa	able Incor	ne and Ex	xcess Business II	nterest Income)	
	taxpayer that is required to comp. re completing Part I.	lete Part I and is a	shareholder in an	S corporation	that has exc	ess taxable	e income or excess bu	usiness interest ind	come should comple	ete Schedule B
	(a) Name of S corporation			(b) EIN		(c) Current year excess taxable income		(d) Current year excess business interest income		
45										
46	Total			🕨						

Form **8990** (Rev. 5-2020)

Form **8990** (Rev. 5-2020)

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8990 (Rev. 5-2020) Page 3 **SCHEDULE A** Summary of Partner's Section 163(j) Excess Items Any taxpayer that owns an interest in a partnership subject to section 163(j) should complete Schedule A before completing Part I. Excess Business Interest Expense (h) Excess business (i) Current year excess business interest (f) Current year (g) Current year nterest expense treated (b) EIN (a) Name of partnership (c) Current (d) Prior excess excess business as paid or accrued expense carryforward ((e) minus (h)) taxable income interest income year carryforward ((c) plus (d)) (see instructions) Total SCHEDULE B Summary of S Corporation Shareholder's Excess Taxable Income and Excess Business Interest Income Any taxpayer that is required to complete Part I and is a shareholder in an S corporation that has excess taxable income or excess business interest income should complete Schedule B before completing Part I. (d) Current year excess (c) Current year excess (a) Name of S corporation (b) EIN taxable income business interest income 45

46

Total

2021 Line Item Estimates—All figures are estimates based on samples.

Number of returns filed for selected lines

Form **8992**

(Rev. December 2021) Department of the Treasury Internal Revenue Service

U.S. Shareholder Calculation of Global Intangible Low-Taxed Income (GILTI)

▶ Go to www.irs.gov/Form8992 for instructions and the latest information.

OMB No. 1545-0123

Attachment Sequence No. **992**

Name of person filing this return Total Forms Filed = 24,233	umber	
Name of U.S. shareholder	B Identifying n	umber
Part I Net Controlled Foreign Corporation (CFC) Tested Income		
1 Sum of Pro Rata Share of Net Tested Income		
If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total		40045
from Schedule A (Form 8992), line 1, column (e). If the U.S. shareholder is a member of a U.S. consolidated group, enter the amount		1 16,945
from Schedule B (Form 8992), Part II, column (c), that pertains to the U.S. shareholder.		
2 Sum of Pro Rata Share of Net Tested Loss		
If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total		0 (40 757
from Schedule A (Form 8992), line 1, column (f). If the U.S. shareholder is a member of a U.S. consolidated group, enter the amount		2 (13,757)
from Schedule B (Form 8992), Part II, column (f), that pertains to the U.S. shareholder.		
3 Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here		3 24,128
Part II Calculation of Global Intangible Low-Taxed Income (GILTI)		
1 Net CFC Tested Income. Enter amount from Part I, line 3		1 13,103
2 Deemed Tangible Income Return (DTIR)		
If the U.S. shareholder is not a member of a U.S. consolidated group, multiply the total from Schedule A (Form 8992), line 1, column (g), by 10% (0.10).		2 7,558
If the U.S. shareholder is a member of a U.S. consolidated group, enter the amount		2 1,330
from Schedule B (Form 8992), Part II, column (i), that pertains to the U.S. shareholder.		
3a Sum of Pro Rata Share of Tested Interest Expense		
If the U.S. shareholder is not a member of a U.S. consolidated		
group, onto the total non-conceder it (remi cocz), mie i,	4,388	
column (j). If the U.S. shareholder is a member of a U.S. consolidated		
group, leave line 3a blank.		
b Sum of Pro Rata Share of Tested Interest Income		
If the U.S. shareholder is not a member of a U.S. consolidated		
group, enter the total from Schedule A (Form 8992), line 1, column (i).	1,404	
If the U.S. shareholder is a member of a U.S. consolidated		
group, leave line 3b blank.		
c Specified Interest Expense If the U.S. shareholder is not a member of a U.S. consolidated group, subtract line		
3b from line 3a. If zero or less, enter -0		3c 3,855
If the U.S. shareholder is a member of a U.S. consolidated group, enter the amount		
from Schedule B (Form 8992), Part II, column (m), that pertains to the U.S. shareholder.		4 7 247
 4 Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0 5 GILTI. Subtract line 4 from line 1		4 7,317 5 11,170
For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 37816Y		Form 8992 (Rev. 12-2021)

(Rev. December 2021)
Department of the Treasury
Internal Revenue Service

U.S. Shareholder Calculation of Global Intangible Low-Taxed Income (GILTI)

▶ Go to www.irs.gov/Form8992 for instructions and the latest information.

OMB No. 1545-0123

Attachment Sequence No. **992**

Name of person filing this return Total Forms Filed = 24,233 A Identifying					numbei	r	
Name o	of U.S. shareholder				B Identifying	numbei	r
Part	Net Controlled	Foreign Corporation	(CFC) Tested	Income			
1	Sum of Pro Rata Share If the U.S. shareholder i from Schedule A (Form If the U.S. shareholder i from Schedule B (Form 8)	of Net Tested Income is not a member of a U.S 8992), line 1, column (e) is a member of a U.S. o	S. consolidated g	roup, enter the total		1	3,140,302
2	Sum of Pro Rata Share If the U.S. shareholder i from Schedule A (Form If the U.S. shareholder from Schedule B (Form 8)	s not a member of a U.S 8992), line 1, column (f) is a member of a U.S. o	consolidated grou	p, enter the amount		2	(5,795,235)
3	Net CFC Tested Income		•			3	-2,654,932
Part		Global Intangible Lov					_,-,,
1	Net CFC Tested Income	e. Enter amount from Pa	rt I, line 3			1	2,585,821
2	Deemed Tangible Incon If the U.S. shareholder total from Schedule A (F	is not a member of a U Form 8992), line 1, colur	nn (g), by 10% (0	.10).		2	604,909
3a	If the U.S. shareholder from Schedule B (Form Sum of Pro Rata Share If the U.S. shareholder in	8992), Part II, column (i), of Tested Interest Expe	that pertains to the tage of the tage of the tage of the tage of the tage of the tage of the tage of the tage of the tage of the tage of the tage of the tage of the tage of the tage of the tage of the tage of the tage of t	• •	J		
b	group, enter the total column (j). If the U.S. shareholder group, leave line 3a blar Sum of Pro Rata Share	from Schedule A (Forn is a member of a U.S nk.	n 8992), line 1, S. consolidated	3a	171,418		
	If the U.S. shareholder igroup, enter the total column (i).			3b	100,490	_	
С	If the U.S. shareholder group, leave line 3b blar Specified Interest Exper	nk. nse])		
	If the U.S. shareholder 3b from line 3a. If zero of	or less, enter -0			.	3c	143,165
4	If the U.S. shareholder if from Schedule B (Form 8 Net DTIR. Subtract line	3992), Part II, column (m),	that pertains to the		J	4	490,165
4 5	GILTI. Subtract line 4 fro		iess, enter -u-			5	2,292,131
	aperwork Reduction Act No		•	Cat. No. 37816Y		_	8992 (Rev. 12-2021)
				54110. 57 51 61			,

2021 Line Item Estimates—All figures are estimates based on samples.

Number of returns filed for selected lines

Form **8994**(Rev. January 2021)
Department of the Treasury
Internal Revenue Service

Employer Credit for Paid Family and Medical Leave

► Attach to your tax return.

► Go to www.irs.gov/Form8994 for instructions and the latest information.

OMB No. 1545-2282

Attachment Sequence No. **994**

Name(s) shown on return

Total Forms Filed = 11,149

Identifying number

or Pa	aperwork Reduction Act Notice, see separate instructions. Cat. No. 37804G	Forn	n 8994 (Rev. 1-2021)					
3	Add lines 1 and 2. Partnerships and S corporations, report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 4j	3	11,149					
2	Employer credit for paid family and medical leave from partnerships and S corporations (see instructions)	2	1,462					
1	Enter the total paid family and medical leave credit figured for wages paid during your tax year to your qualifying employee(s) while on family and medical leave (if you use the Paid Family and Medical Leave Credit Worksheet, the total from column (d)). See instructions for the adjustment you must make to your deduction for salaries and wages	1	9,688					
D	If you employed at least one qualifying employee who was not covered by the Family and Medical Leave Act, did you include in your written policy and otherwise comply with "non-interference" language? See instructions. Yes. No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).							
С	Did you pay family and medical leave to at least one qualifying employee during the tax year? See instru Yes. No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership o							
В	Does the written policy provide paid family and medical leave of at least 50% of the wages normally paid to a qualifyir employee? See instructions. Yes. No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).							
Α	Do you have a written policy providing for at least 2 weeks of annual paid family and medical leave for your qualifyir employee(s) to whom wages are paid (prorated for any part-time employees)? See instructions. Yes. No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).							

(Rev. January 2021) Department of the Treasury

Employer Credit for Paid Family and Medical Leave

► Attach to your tax return.

OMB No. 1545-2282

Attachment

88,896

Form **8994** (Rev. 1-2021)

Internal	Revenue Service						
Name(s) shown on return	Total Forms Filed = 11,149	ntifying	number			
A	employee(s) to	a written policy providing for at least 2 weeks of annual paid family and medical least whom wages are paid (prorated for any part-time employees)? See instructions. Do not file Form 8994 (see instructions for an exception that may apply to a partnership		, , , ,			
В	employee? Se	ten policy provide paid family and medical leave of at least 50% of the wages norm e instructions. Do not file Form 8994 (see instructions for an exception that may apply to a partnership of the provided in the second		, , ,			
С	☐ Yes.	mily and medical leave to at least one qualifying employee during the tax year? See instructions for an exception that may apply to a partnership					
D	If you employed at least one qualifying employee who was not covered by the Family and Medical Leave Act, did you include in your written policy and otherwise comply with "non-interference" language? See instructions. Yes. No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).						
1	qualifying emp Leave Credit	paid family and medical leave credit figured for wages paid during your tax year to your bloyee(s) while on family and medical leave (if you use the Paid Family and Medical Worksheet, the total from column (d)). See instructions for the adjustment you must deduction for salaries and wages	1	88,476			
2	Employer cred	it for paid family and medical leave from partnerships and S corporations (see instructions)	2	420			

Add lines 1 and 2. Partnerships and S corporations, report this amount on Schedule K. All others,

Cat. No. 37804G

report this amount on Form 3800, Part III, line 4j

For Paperwork Reduction Act Notice, see separate instructions.

Department of the Treasury Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

► Attach to your tax return.

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

OMB No. 1545-2294

Attachment Sequence No. **5**

Name(s) shown on return

Total Forms 8995 Filed =

38,399,332

Total Forms 8995A Filed =

Your taxpayer identification number 4,489,531

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 \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

iii Number of forms with trade, business, or aggregations = 33,051,802 iii Number of forms with aggregation business operations = 174,856 iv V 2 Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	1	(a) Trade, business, or aggregation name	ic	(b) Taxpayer dentification number		
Number of forms with aggregation business operations = 174,856 Number of forms with aggregation business operations = 174,856 Number of forms with aggregation business operations = 174,856 Number of forms with aggregation business operations = 174,856 Number of forms with aggregation business operations = 174,856 Number of forms with aggregation business operations = 174,856 Number of forms with aggregation business operations = 174,856 Number of forms with aggregation business in through 1v, column (c) 29,459,848 3 (9,939,896) 4 (19,187,030) 4 (19,187,030) 5 (19,187,030) 5 (19,187,030) 7 (19,187,030	i					
Total qualified business income or (loss). Combine lines 1i through 1v, column (c) Qualified business net (loss) carryforward from the prior year	ii	Number of forms with trade, business, or aggregations = 33,051,802	2			
Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	iii	Number of forms with aggregation business operations = 174,856				
Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	iv					
column (c) Qualified business net (loss) carryforward from the prior year. Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0- Qualified business income component. Multiply line 4 by 20% (0.20) Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions) Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year. Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0- Qualified business income deduction before the income limitation. Add lines 5 and 9 REIT and PTP component. Multiply line 8 by 20% (0.20) Qualified business income deduction before the income limitation. Add lines 5 and 9 Taxable income before qualified business income deduction (see instructions) Subtract line 12 from line 11. If zero or less, enter -0- Income limitation. Multiply line 13 by 20% (0.20) Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions) Total qualified BEIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-	v					
Qualified business net (loss) carryforward from the prior year	2	, ,	2	29.459.848		
Qualified business income component. Multiply line 4 by 20% (0.20)	3	` '				
Gualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)		•	4	19,187,030		00 000 000
(see instructions) Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year		· · · · · · · · · · · · · · · · · · ·			5	20,982,362
7 Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	6		6	12.435.059		
or less, enter -0-	7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior				
9 REIT and PTP component. Multiply line 8 by 20% (0.20)	8	·	_	40 000 507		
Qualified business income deduction before the income limitation. Add lines 5 and 9	a	•			a	11.219.928
Taxable income before qualified business income deduction (see instructions) Net capital gain (see instructions) Subtract line 12 from line 11. If zero or less, enter -0- Income limitation. Multiply line 13 by 20% (0.20) Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions) Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-						
Subtract line 12 from line 11. If zero or less, enter -0	11	•	11	37,066,747		
14Income limitation. Multiply line 13 by 20% (0.20)1436,329,67315Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions)1525,888,78116Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-16(13,014,596)17Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-17(222,033)				, ,		
15 Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions)					4.4	26 220 672
the applicable line of your return (see instructions)					14	30,323,013
Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0	13				15	25,888,781
zero, enter -0	16				16	
	17				17	· · · · · · · · · · · · · · · · · · ·

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Cat. No. 37806C

Form **8995** (2021)

Department of the Treasury Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

► Attach to your tax return.

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

OMB No. 1545-2294

Attachment Sequence No. **5**

Name(s) shown on return

Total Forms 8995 Filed =

38,399,332

Total Forms 8995A Filed =

Your taxpayer identification number 4,489,531

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 \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	ic	(b) Taxpayer dentification number	(c) Qualified business income or (loss)	
i					
ii					
iii					
iv					
V			T		
_					
2	Total qualified business income or (loss). Combine lines 1i through 1v,	_	334,207,289		
3	column (c)	3	(528,777,772)		
3 4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	485,115,218		
5	Qualified business income component. Multiply line 4 by 20% (0.20)			5	227,181,109
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)				
	(see instructions)	6	14,383,831		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior				
	year	7	(4,066,766)		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero				
	or less, enter -0	8	14,404,859		0.000.070
9	REIT and PTP component. Multiply line 8 by 20% (0.20)			9	2,880,879
10	Qualified business income deduction before the income limitation. Add lines 5 an			10	230,061,988
11	Taxable income before qualified business income deduction (see instructions)	11	6,806,317,105		
12	Net capital gain (see instructions)	12	1,934,880,578		
13 14	Subtract line 12 from line 11. If zero or less, enter -0		5,001,414,838	14	1,000,282,986
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also			14	1,000,202,900
13	the applicable line of your return (see instructions)			15	205,572,269
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than			16	(750,459,677)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a				
	zero, enter -0			17	(4,072,871)
For Pri	·		7806C		Form 8995 (2021)

2021 Line Item Estimates—All figures are estimates based on samples.

Number of returns filed for selected lines

Form **8997**

Initial and Annual Statement of Qualified Opportunity Fund (QOF) Investments

► Go to www.irs.gov/Form8997 for the latest information.

31,987

OMB No. 1545-0123

2021

Attachment
Sequence No. 997

Department of the Treasury Internal Revenue Service

► Attach to your tax return.

Total Forms Filed =

Tax identification number (see instructions)

Part I	otal QOF Inversely from	estment Holdings Due to Deferrals Prior to Begir n last year's ending QOF investment holdings, attacl	nning of n explan	Tax Year	
		·		i	a hold in OOE
(a) Qualified Opportunity Fund (QOF) EIN	Date QOF investment acquired (MM/DD/YYYY)	(c) Description of QOF investment (for example, 100 shares or 25% interest)	(d) Special gain code	(e) Amount of short-term deferred gain remaining in QOF	(f) Amount of long-term deferred gain remaining in QOF
LIIV	(WINNESS TITT)			Terraining in QOI	Terrialiling in QOI
4 Folian	d 4-4-1- 16				
2 Enter t	the totals from o	columns (e) and (f)	>	5,733	17,421
Part II	Current Tax Y	ear Capital Gains Deferred by Investing in QOF			
(a) Qualified	(b) Date QOF	(c) Description of interest acquired	(d) Special	_	nvested in QOF
Opportunity Fund (QOF) EIN	investment acquired (MM/DD/YYYY)	(for example, 100 shares or 25% interest)	gain code	(e) Amount of short-term deferred gain remaining in QOF	(f) Amount of long-term deferred gain remaining in QOF
1 Enter t	the totals, if any	, from continuation sheet	▶		
		columns (e) and (f). See instructions for reporting on Form		6,476	16,741
		Rules Regarding the Waiver of Certain Treaty Ber			
☐ Yes. Y	ou may not elect	expayer whose tax year began after March 13, 2020? See to defer tax on an eligible gain by investing in a QOF unless setion and go to Part III.			
		taxpayer, see the instructions to determine if you are requ	ired to at	ttach a written state	ment for the portion
of your first 13, 2020.	tax year ending	after December 21, 2017, and all tax years that began af	ter Decer	mber 21, 2017, and	on or before March
Waiver of T March 13, 2	•	s on Future Inclusions by a Foreign Eligible Taxp	ayer (fo	r Tax Years Begi	nning After
Do you here	eby irrevocably deferring by in	waive any benefits available under an applicable U.S. incovesting in a QOF from being subject to federal income tax			
☐ No. Yo	ou may not elec	ral of the eligible gain in Part II and on Form 8949. t to defer tax on an eligible gain by investing in a QOF. D o	not rep	ort the deferral of	any otherwise
eligibl	e gain in Part I	l or on Form 8949.			

2021 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form **8997**

Initial and Annual Statement of Qualified Opportunity Fund (QOF) Investments ▶ Go to www.irs.gov/Form8997 for the latest information.

Department of the Treasury ► Attach to your tax return. OMB No. 1545-0123

Internal Revenue Service
Name

Total Forms Filed = 31,987

Sequence No. 997 Tax identification number (see instructions)

		estment Holdings Due to Deferrals Prior to Beginn last year's ending QOF investment holdings, attach			
(a)	(b) Date QOF investment acquired (MM/DD/YYYY)	(c) Description of QOF investment (for example, 100 shares or 25% interest)	(d) Special gain code	Deferred gain held in QOF	
Qualified Opportunity Fund (QOF) EIN				(e) Amount of short-term deferred gain remaining in QOF	(f) Amount of long-term deferred gain remaining in QOF
1 Enter t	he totals, if any	, from continuation sheet	. •		
2 Enter t	he totals from o	columns (e) and (f)	. ▶	2,690,083	19,172,590
		<u> </u>	(cn	Deferred gain i	nvested in QOF
(a) Qualified Opportunity Fund (QOF) EIN	(b) Date QOF investment acquired (MM/DD/YYYY)	(c) Description of interest acquired (for example, 100 shares or 25% interest)	(d) Special gain code	(e) Amount of short-term deferred gain remaining in QOF	(f) Amount of long-term deferred gain remaining in QOF
1 Enter t	he totals, if any	, from continuation sheet	. ▶		
2 Enter t	he totals from o	columns (e) and (f). See instructions for reporting on Form 89	949 ▶	2,360,958	13,706,888
		Rules Regarding the Waiver of Certain Treaty Bene		·	
☐ Yes. Yo. Sk	ou may not election the next que foreign eligible	xpayer whose tax year began after March 13, 2020? See in to defer tax on an eligible gain by investing in a QOF unless y stion and go to Part III. taxpayer, see the instructions to determine if you are required after December 21, 2017, and all tax years that began after	ou chec	k "Yes" in response ttach a written state	to the next question. ement for the portion
March 13, 2	020, Only)	s on Future Inclusions by a Foreign Eligible Taxpa			
	deferring by in	waive any benefits available under an applicable U.S. incorvesting in a QOF from being subject to federal income tax			
☐ No. You	u may not elec	ral of the eligible gain in Part II and on Form 8949. t to defer tax on an eligible gain by investing in a QOF. Do I or on Form 8949.	not rep	ort the deferral of	any otherwise

Form 8997 (2021) Page **2**

Part III Inclusion Events and Certain Other Transfers During the Current Tax Year										
(a)	(b)	(c) Description of event (for example, sale of 100 shares, gift of 25% interest, or distribution of \$1,000, etc.)	(d) Special gain code	Deferred gain included due to disposition of QOF interest						
Qualified Opportunity Fund (QOF) EIN	Date of event (MM/DD/YYYY)			(e) Amount of previously deferred short-term gain now included in taxable income	(f) Amount of previously deferred long-term gain now included in taxable income					
1 Enter tl	ne totals if any	, from continuation sheet	•							
	_	columns (e) and (f). See instructions for reporting on Form 89	. P	243	614					
☐ Check this box if you disposed of any investment(s) and didn't receive a Form 1099-B reporting the disposition from the QOF or other third party. See the Instructions for Form 8949 for reporting requirements of any gain or loss.										
Part IV T	Part IV Total QOF Investments Due to Deferrals at Year End (see instructions)									
(a) Qualified	ty investment (for example, 100 shares or 25% interest)		(d) Special	Deferred gain investe	d in QOF investment (f)					
Opportunity Fund (QOF) EIN		gain code	Amount of short-term deferred gain invested in QOF	Amount of long-term deferred gain invested in QOF						
1 Enter ti	ne totals, if any	, from continuation sheet	. ▶							
2 Enter tl	ne totals from o	columns (e) and (f)	. ▶	7,822	24,322					
					Form 8997 (2021)					

Form **8997** (2021)

Form 8997 (2021) Page 2 Part III Inclusion Events and Certain Other Transfers During the Current Tax Year Deferred gain included due to disposition of QOF interest Qualified Date of event Description of event Special (e) (MM/DD/YYYY) (for example, sale of 100 shares, gift of 25% interest, Opportunity gain Amount of previously Amount of previously Fund (QOF) or distribution of \$1,000, etc.) code deferred short-term deferred long-term EIN gain now included in gain now included in taxable income taxable income Enter the totals, if any, from continuation sheet 183,020 743,437 2 Enter the totals from columns (e) and (f). See instructions for reporting on Form 8949 ▶ Check this box if you disposed of any investment(s) and didn't receive a Form 1099-B reporting the disposition from the QOF or other third party. See the Instructions for Form 8949 for reporting requirements of any gain or loss. Part IV Total QOF Investments Due to Deferrals at Year End (see instructions) Deferred gain invested in QOF investment (d) (a) (b) (c) Qualified Date QOF Description of interest acquired Special Opportunity (for example, 100 shares or 25% interest) investment gain Amount of short-term Amount of long-term Fund (QOF) acquired code deferred gain deferred gain EIN (MM/DD/YYYY) invested in QOF invested in QOF 1 Enter the totals, if any, from continuation sheet 29,212,163 4,465,129 Enter the totals from columns (e) and (f) .