

Statistics of Income

Individual Income Tax Returns Line Item Estimates











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2022 Statistics of Income

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Individual Income Tax Returns, Line Item Estimates, 2022

Publication 4801 (Rev. 12–2024)

This 2022 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 2022 Individual SOI Complete Report weighted file. The estimates presented here are based on returns filed in Processing Year 2023 that were sampled statistically and then weighted to estimate the entire 2022 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.

2022 Complete Report estimates:

161,336,659 Total, all individual returns filed

Estimates of returns filed electronically:

149,880,466 Total, all individual returns filed

Suggested Citation

Statistics of Income—2022 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 2022

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 2022

Type of Form	Total	Electronically Filed
All returns filed	161,336,659	149,880,466
Form 1040, U.S. Individual Income Tax Return	143,908,819	134,378,895
Form 1040-SR, U.S. Income Tax Return for Seniors	17,427,841	15,501,571
Schedule 1, Additional Income and Adjustments to Income	64,982,420	60,116,690
Schedule 2, Additional Taxes	38,517,244	35,907,506
Schedule 3, Additional Credits and Payments	39,744,159	37,836,825
Schedule A, Itemized Deductions	15,474,250	14,370,586
Schedule B, Interest and Ordinary Dividends	22,556,941	20,820,613
Schedule C, Profit or Loss From Business (Sole Proprietorship)	35,255,144	32,267,599
Schedule D, Capital Gains and Losses	27,317,805	25,721,199
Schedule E, Supplemental Income and Loss	20,106,223	18,803,272
Schedule EIC, Earned Income Credit	17,208,004	16,604,500
Schedule F, Profit or Loss From Farming	1,843,900	1,724,895
Schedule R, Credit for the Elderly or Disabled	74,992	62,420
Schedule SE, Self-Employment Tax	23,813,536	21,743,129
Schedule 8812, Credits for Qualifying Children and Other Dependents	47,403,924	45,388,616
Form 461, Limitation on Business Losses	52,092	48,570
Form 965-A, Individual Report of Net 965 Tax Liability	20,874	20,063
Form 982, Reduction of Tax Attributes Due io Discharge of Indebtedness (and Section 1082 Basis Adjustment)"	82,659	75,317
Form 2106, Employee Business Expenses	376,518	343,121
Form 2439, Notice to Shareholder of Undistributed Long-Term Capital Gains	30,969	30,895
Form 2441, Child and Dependent Care Expenses	6,483,211	6,264,736
Form 3468, Investment Credit	31,131	29,298
Form 3800, General Business Credit	733,933	693,698
Form 3903, Moving Expenses	124,330	120,296
Form 4136, Credit for Federal Tax Paid on Fuels	568,926	549,190
Form 4562, Depreciation and Amortization (Including Information on Listed Property)	10,316,054	9,781,813
Form 4684, Casualties and Thefts	136,072	124,814
Form 4797, Sales of Business Property	3,362,301	3,181,988
Form 4835, Farm Rental Income and Expenses	431,424	402,937
Form 4952, Investment Interest Expense Deduction	1,365,945	1,280,844
Form 5329, Additional Taxes on Qualified Plans (including IRAs) and Other Tax-Favored Accounts	2,679,325	2,543,718
Form 5405, Repayment of the First-Time Homebuyer Credit	77,427	66,967
Form 5695, Residential Energy Credits	3,410,701	3,229,670

Totals for Forms and Schedules from Line Item Estimates for Tax Year 2022—Continued

Type of Form	Total	Electronically Filed
Form 5884, Work Opportunity Credit	29,339	26,824
Form 6251, Alternative Minimum TaxIndividuals	5,732,344	5,395,306
Form 6252, Installment Sale Income	465,500	446,454
Form 6765, Credit for Increasing Research Activities	10,359	10,047
Form 6781, Gains and Losses From Section 1256 Contracts and Straddles	624,178	591,756
Form 8283, Noncash Charitable Contributions	2,903,536	2,692,123
Form 8396, Mortgage Interest Credit	95,954	93,646
Form 8582, Passive Activity Loss Limitations	8,095,955	7,655,060
Form 8586, Low-Income Housing Credit	1,974	1,925
Form 8606, Nondeductible IRAs	3,250,065	3,096,144
Form 8615, Tax for Certain Children Who Have Unearned Income	298,223	277,480
Form 8801, Credit for Prior Year Minimum Tax—Individuals, Estates, and Trusts	232,636	217,725
Form 8814, Parents' Election To Report Child's Interest and Dividends	88,897	85,167
Form 8824, Like-Kind Exchanges	72,980	69,323
Form 8829, Expenses for Business Use of Your Home	3,496,932	3,271,327
Form 8839, Qualified Adoption Expenses	72,910	71,159
Form 8846, Credit for Employer Social Security and Medicare Taxes Paid on Certain Employee Tips	21,898	21,302
Form 8853, Archer MSAs and Long-Term Care Insurance Contracts	135,816	128,123
Form 8863, Education Credits (American Opportunity and Lifetime Learning Credits)	8,730,136	8,370,999
Form 8880, Credit for Qualified Retirement Savings Contributions	9,436,595	9,065,115
Form 8889, Health Savings Accounts (HSAs)	16,497,046	15,822,689
Form 8910, Alternative Motor Vehicle Credit	47,619	45,548
Form 8911, Alternative Fuel Vehicle Refueling Property Credit	99,289	97,742
Form 8936, Qualified Plug-in Electric Drive Motor Vehicle Credit	255,551	237,498
Form 8938, Statement of Specified Foreign Financial Assets	601,355	503,728
Form 8959, Additional Medicare Tax	7,866,995	7,547,580
Form 8960, Net Investment Income TaxIndividuals, Estates, and Trusts	9,012,236	8,546,089
Form 8962, Premium Tax Credit (PTC)	9,000,908	8,499,710
Form 8990, Limitation on Business Interest Expense Under Section 163(j)	140,392	137,804
Form 8992, U.S. Shareholder Calculation of Global Intangible Low-Taxed Income (GILTI)	20,671	17,039
Form 8994, Employer Credit for Paid Family and Medical Leave	10,769	10,525
Form 8995, Qualified Business Income Deduction Simplified Computation	40,372,138	38,192,227
Form 8997, Initial and Annual Statement of Qualified Opportunity Fund (QOF) Investments	37,025	33,762

Limitations and Guidelines for the 2022 Line Item Estimates

SOI obtained the line counts and amounts used in this package from the Tax Year (TY) 2022 Individual SOI Complete Report File. As such, 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 many 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 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 in thousands of selected Form 1040 items. (For example, the population amount for total wages, with 95% confidence, is between \$9,707,391,635 and \$9,770,510,310.) These confidence intervals correspond to the estimates for all individual income tax returns filed for TY 2022

95% 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	9,738,950,972	0.17	9,707,391,635	9,770,510,310
Taxable interest	133,596,569	0.79	131,518,183	135,674,956
Tax-exempt interest	55,567,941	1.35	54,093,392	57,042,489
Ordinary dividends	412,320,850	0.59	407,552,512	417,089,188
Qualified dividends	313,230,845	0.66	309,164,549	317,297,140
Taxable IRA distributions	437,775,580	0.98	429,356,964	446,194,196
Taxable pensions and annuities	858,038,339	0.69	846,485,747	869,590,932
Total Social Security benefits	871,307,268	0.53	862,287,500	880,327,037
Taxable Social Security benefits	458,513,595	0.63	452,824,654	464,202,537
Total income	14,977,662,516	0.08	14,954,859,425	15,000,465,607
Adjusted gross income	14,833,956,956	0.08	14,811,151,688	14,856,762,224
Basic standard deduction	2,552,043,540	0.12	2,546,232,702	2,557,854,377
Additional standard deduction	56,766,406	0.55	56,156,237	57,376,574
Total itemized deductions	668,001,764	1.37	650,039,750	685,963,778
Qualified business income deduction	216,078,693	0.48	214,046,313	218,111,074
Taxable income	11,714,186,280	0.09	11,693,045,605	11,735,326,956
Income tax before credits	2,260,350,184	0.11	2,255,566,101	2,265,134,267
Total credits	154,773,149	0.47	153,358,404	156,187,894
Income tax after credits	2,098,923,017	0.12	2,094,019,451	2,103,826,583
Total tax liability	2,238,645,554	0.11	2,233,609,432	2,243,681,676
Tax due at time of filing	284,147,330	0.43	281,755,445	286,539,214
Overpayment	501,047,449	0.37	497,446,045	504,648,854

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 (Forms 1040 and 1040-SR (including electronic returns)) filed by U.S. citizens and residents during Calendar Year (CY) 2023.

All returns processed during 2023 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) 2022. While most of the returns processed during CY 2023 were filed for Tax Year 2022, the remaining returns were mostly for prior years, and a few for noncalendar years ending during 2020 and 2021.

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 2023 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 2022, about 0.08% of the sample returns were unavailable.

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 standard error 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 2022

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.

Total of all returns filed = 161,336,659 Electronically Filed Returns = 149,880,466

<u>1040</u>	U.S	thment of the Treasury—Internal Revenue Server. 5. Individual Income Ta	x Ret		2	022	OMB No. 1545-				ite or staple in this space.
iling Status heck only		3,992,729 Single Married filing jointly Married filing separately (MFS) 3,992,729 Married filing jointly Married filing separately (MFS) 1,21,268,139 Pi Head of nousehold (HOH) 99,101 Spouse (QSS) Spouse (QSS) Spouse (QSS)									
ne box.	•	on is a child but not your dependen		your spo	ouse.	If you check	ed the HOH or	QSS	box, enter tr	ne child's	name if the qualifying
Your first name	and mid	ddle initial	Last na	ame						Your soc	cial security number
f joint return, sp	ouse's	first name and middle initial	Last na	ame						Spouse's	s social security number
Home address (numbe	and street). If you have a P.O. box, see	e instruct	ions.				A	Apt. no.		ntial Election Campaign ere if you, or your
City, town, or po	ost offic	e. If you have a foreign address, also co	omplete s	spaces be	elow.	Sta	te	ZIP c	ode	to go to	f filing jointly, want \$3 this fund. Checking a
oreign country	name			Foreign p	provinc	ce/state/count	у	Foreig	gn postal code		ow will not change 78,443 Y = ** 4,143,12 You Spouse
igital		y time during 2022, did you: (a) red	eive (as	a rewai	d, aw	ard, or payr					Virtual Currency
ssets		ange, gift, or otherwis 7,535,2		asset		12,114	in a digital	asset)	? (See instru	ıctions.)	∐ Yes
tandard eduction		eone can claim: You as a de pouse itemizes on a separate retu	•		You	spouse as	a dependent		у	es = 2,7	93,490 no = 157,2°
		30,636,025 were porn perore January 2,		246, Are i	212	Spouse	12.97	4,105 n ber	ore January 2		3,070
ependents	(see i	nstructions):		(2)	Social	security	(3) Relationshi	ip (4	1) Check the b	ox if qualifi	les for (see instructions):
more		st name Last name		, ,	num	•	to you		33,870	,207	Credit for other dependents
an four									20,947	', 002	
ependents, e instructions									7,584	,530	
nd check									2,073	,168	
ere				<u> </u>							100 010 555
ncome	1a	Total amount from Form(s) W-2, b	•			•				. 1a	122,816,828 402,684
tach Form(s)	b	Household employee wages not r	•		` '					. 1b	95,893
-2 here. Also	c d	Tip income not reported on line 18 Medicaid waiver payments not re	•		,		ctions)			. 1d	17,256
tach Forms -2G and	e	Taxable dependent care benefits			,	`	ctions,			. 1u	396,180
99-R if tax	f	Employer-provided adoption benefits			-					. 16	1,914
as withheld.	g g	Wages from Form 8919, line 6.								. 1g	52,828
you did not et a Form	h	Other earned income (see instruction)								. 1h	1,220,775
'-2, see	i	Nontaxable combat pay election (,	ructions) .		1i	Ì	8,074		, ,, ,
structions.	z	Add lines 1a through 1h								. 1z	128,387,726
tach Sch. B	2a	Tax-exempt interest	2a	6,892			axable interest			-	49,736,855
required.	За	Qualified dividends	3a	30,737	•	, D C	rdinary divider	nds .		. 3b	32,853,481
	4a	IRA distributions	4a	17,355			axable amount	: .		. 4b	16,282,441
andard	5a	Pensions and annuities	5a	32,975		~	axable amount			. 5b	30,020,638
duction for-	6a	Social security benefits	6a	31,861	,807	b T	axable amount	: .		. 6b	24,667,460
ingle or arried filing	С	If you elect to use the lump-sum	election	method	, chec	k here (see	instructions)		[
eparately, 2,950	7	Capital gain or (loss). Attach Sche	dule D i	f require	ed. If r	not required,	check here		[7	26,480,998
arried filing	8	Other income from Schedule 1, lin	ne 10							. 8	57,445,060
ntly or ualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7			your t	otal income				. 9	159,671,219
rviving spouse, 5,900	10	Adjustments to income from Sche								. 10	34,109,700
ead of	11	Subtract line 10 from line 9. This i	•	-	•					. 11	159,686,119
ousehold, 19,400	12	Standard deduction or itemized									158,117,559
you checked ny box under	13	Qualified business income deduc								. 13	25,654,318
tandard	14	Add lines 12 and 13								. 14	157,692,734
ee instructions.	15	Subtract line 14 from line 11. If ze	ro or les	s, enter	-0 7	his is your t	axable incom	е.		. 15	129,349,042

*** Standard Deduction = 142,779,280 *** Itemized Deductions = 15,290,841

Total of all returns filed = 161,336,659 Electronically Filed Returns = 149,880,466

£1040		rtment of the Treasury—Internal Revenue Servic Individual Income Tax		urn	20:	22	OMB No. 1545-	-0074	4 IRS Use Only—	-Do not w	rite or staple in this space.
Filing Status Check only one box.	If you	ingle Married filing jointly under the nation is a child but not your dependent:	ame of y	_	separatel use. If yo				sehold (HOH) [spo	lifying surviving use (QSS) s name if the qualifying
Your first name	me and middle initial Last name Your social security number										
If joint return, sp	joint return, spouse's first name and middle initial Last name Spouse's social security number Spouse's social security number										's social security number
Home address (Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Presidential Election Campai Check here if you, or your										here if you, or your
City, town, or po	ost offic	e. If you have a foreign address, also co	mplete s	paces bel	low.	Stat	e	ZIP	code	to go to	if filing jointly, want \$3 this fund. Checking a ow will not change
Foreign country	name			Foreign pr	rovince/sta	te/count	у	Fore	eign postal code	your ta	x or refund. You Spouse
Digital Assets		y time during 2022, did you: (a) rece ange, gift, or otherwise dispose of a	•					-	, ,		☐ Yes ☐ No
Standard Deduction	_	eone can claim:			•		a dependent				
Age/Blindness	You:	Were born before January 2, 19	958 [Are bl	ind \$	Spouse:	☐ Was bor	n be	efore January 2,	1958	Is blind
Dependents	(see i	nstructions):		(2) S	Social secu	ırity	(3) Relationsh	ip	(4) Check the box	k if quali	fies for (see instructions):
If more	(1) Fi	rst name Last name			number		to you		Child tax cre	dit	Credit for other dependents
than four dependents,											
see instructions											
and check here	-										
	1a	Total amount from Form(s) W-2, bo	ox 1 (se	e instruc	tions)					1a	9,360,356,986
Income	b	Household employee wages not re	•							1b	1.001.010
Attach Form(s)	С	Tip income not reported on line 1a	•							10	245,854
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep	orted o	n Form(s	s) W-2 (se	e instru	ctions)			10	144,525
W-2G and	е	Taxable dependent care benefits fr	om For	m 2441,	line 26					16	724,917
1099-R if tax was withheld.	f	Employer-provided adoption benef	fits fron	n Form 8	839, line	29 .				1f	-4,874
If you did not	g	Wages from Form 8919, line 6 .								19	450,317
get a Form	h	Other earned income (see instruction	ons)							1h	53,391,951
W-2, see instructions.	i	Nontaxable combat pay election (s	ee insti	ructions)			<u>1i</u>		179,334		
	Z	Add lines 1a through 1h								1z	
Attach Sch. B	2a	'	2a	55,567.			axable interest			2b	
if required.	3a		Ja	313,230 497,467	-					3b	407 775 500
	4a		14	,528,41						4b	044.000.004
Standard Deduction for—	5a		-	,320,41 871,307	I		axable amount			5b	150 510 505
Single or	6a	,	,u				axable amount			6b	450,515,595
Married filing separately,	c	If you elect to use the lump-sum el		-		•	,	•]] -	4 240 040 675
\$12,950 • Married filing	7 8	Capital gain or (loss). Attach Scheoother income from Schedule 1, line					cneck nere	•		8	1,240,910,675
jointly or	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7,								9	1,632,471,284
Qualifying surviving spouse,	10	Adjustments to income from Scheo					, 			10	14,977,662,516
\$25,900 • Head of	11	Subtract line 10 from line 9. This is								11	
household,	12	Standard deduction or itemized					*** See Belo			12	
\$19,400 If you checked	13	Qualified business income deduction		,		,				13	
any box under Standard	14	Add lines 12 and 13								14	
Deduction, see instructions.	15	Subtract line 14 from line 11. If zero								15	
For Disclosure, I	Privacy	Act, and Paperwork Reduction Act No	otice, se	e separa	te instruc	tions.		Cat	:. No. 11320B		Form 1040 (2022)

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

Itemized Deductions = 668,001,764

Form 1040 (2022	2)									Page 2
Tax and	16	Tax (see instructions). Check if any from	n Form	n(s): 1 881	4 2 🗌 4972	3 🗌			16	128,475,815
Credits	17	Amount from Schedule 2, line 3 .					· · · ·		17	5,323,269
	18	Add lines 16 and 17							18	129,352,044
	19	Child tax credit or credit for other dep	enden	ts from Sched	ule 8812				19	38,295,035
	20	Amount from Schedule 3, line 8 .							20	34,557,343
	21	Add lines 19 and 20							21	59,149,721
	22	Subtract line 21 from line 18. If zero of	r less,	enter -0					22	114,064,762
	23	Other taxes, including self-employme	nt tax,	from Schedule	e 2, line 21 .				23	35,020,478
	24	Add lines 22 and 23. This is your total	l tax						24	124,250,815
Payments	25	Federal income tax withheld from:				i				
_	а	Form(s) W-2				25a	120,46	3,527		
	b	Form(s) 1099				25b	32,364	,226		
	С	Other forms (see instructions)				25c	6,281,	,577		
	d	Add lines 25a through 25c							25d	137,845,727
If you have a	26	2022 estimated tax payments and am	iount a	pplied from 20	021 return				26	10,533,943
qualifying child,	27	Earned income credit (EIC)				27	24,086	,346		
attach Sch. EIC.	28	Additional child tax credit from Schedu	le 8812	2		28	18,076			
	29	American opportunity credit from For	m 8863	3, line 8 . .		29	5,957,	083		
	30	Reserved for future use				30				
	31	Amount from Schedule 3, line 15 .				31	7,569,	053		
	32	Add lines 27, 28, 29, and 31. These a	re your	total other pa	ayments and ref	undabl	e credits		32	39,744,812
	33	Add lines 25d, 26, and 32. These are	your tc	otal payments					33	150,216,673
Refund	34	If line 33 is more than line 24, subtrac	t line 2	4 from line 33.	This is the amou	ınt you	overpaid		34	125,949,019
110101110	35a	Amount of line 34 you want refunded	to you	u. If Form 8888	3 is attached, che	ck here			35a	109,581,457
Direct deposit?	b	Routing number			c Type:	Check	king 🔲 S	Savings		
See instructions.	d	Account number		<u> </u>						
	36	Amount of line 34 you want applied to	your c	2023 estimate	ed tax	36	4,401	,815		
Amount	37	Subtract line 33 from line 24. This is t								
You Owe		For details on how to pay, go to www	.irs.go	v/Payments or	see instructions		1		37	32,771,171
	38	Estimated tax penalty (see instruction				38	14,072			
Third Party	Do	you want to allow another person	to disc	cuss this retu	rn with the IRS?	See 5	7,520,015			
Designee		structions					Yes. Co			∐ No
	nar	signee's ne		Phone no.				nal ident er (PIN)	ification	
Sign	Un	der penalties of perjury, I declare that I have	examine	ed this return and	d accompanying sch	nedules a	and statemen	ts. and to	the bes	st of mv knowledge and
_		ief, they are true, correct, and complete. Decl								, ,
Here	Yo	ur signature		Date	Your occupation					nt you an Identity
								- 1	tection P inst.)	IN, enter it here
Joint return? See instructions.		ougo's signature. If a joint rature, both must		Data	Chausa's assume	tion				nt your spouse an
Keep a copy for	Sp	ouse's signature. If a joint return, both must	sign.	Date	Spouse's occupat	lion				ection PIN, enter it here
your records.								(see	inst.)	
	Ph	one no.		Email address						
Paid	Pre	parer's name Preparer'	s signat	ture		Date		PTIN		Check if:
										Self-employed
Preparer Use Only	Fire	n's name						Pho	ne no.	
————	Fire	n's address						Firm	ı's EIN	
Go to www.irs.gov/Form1040 for instructions and the latest information.										

Form 1040 (2022	<u>'</u>)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	2,249,244,162
Credits	17	Amount from Schedule 2, lin	e3						17	11,096,823
	18	Add lines 16 and 17							18	2,260,350,184
	19	Child tax credit or credit for	other dependent	ts from Schedi	ule 8812				19	83,033,285
	20	Amount from Schedule 3, lin	e8						20	65,423,684
	21	Add lines 19 and 20							21	148,550,118
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	2,111,800,065
	23	Other taxes, including self-e	mployment tax,	from Schedule	2, line 21				23	145,357,322
	24	Add lines 22 and 23. This is	your total tax						24	2,257,368,052
Payments	25	Federal income tax withheld	from:							
_	а	Form(s) W-2				25a	1,363,25	5,151		
	b	Form(s) 1099				25b	182,759	,766		
	С	Other forms (see instructions	s)			25c	16,932	599		
	d	Add lines 25a through 25c							25d	1,566,742,898
If you have a	26	2022 estimated tax payment	ts and amount a	pplied from 20	21 return				26	581,222,117
qualifying child,	27	Earned income credit (EIC)				27	60,068			
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28	34,843,			
	29	American opportunity credit	from Form 8863	s, line 8		29	5,184,4	185		
	30	Reserved for future use .				30				
	31	Amount from Schedule 3, lin	e 15			31	228,154	,483		
	32	Add lines 27, 28, 29, and 31	. These are your	total other pa	yments and refu	ındable	credits		32	331,385,777
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments					33	2,478,394,530
Refund	34	If line 33 is more than line 24	l, subtract line 2	4 from line 33.	This is the amour	nt you o	verpaid		34	-501,047,449
	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	•				35a	367,537,955
Direct deposit? See instructions.	b	Routing number			c Type:	Checki	ng 🗌 S	avings		
See instructions.	d	Account number								
	36	Amount of line 34 you want a	applied to your	2023 estimate	d tax	36	133,50	9,495		
Amount	37	Subtract line 33 from line 24								
You Owe		For details on how to pay, g		-		1 1	4.400		37	284,147,329
	38	Estimated tax penalty (see in				38	4,126,	359		
Third Party		you want to allow another	•				Yes. Cor	nnlata h	olow	No
Designee		signee's		Phone		٠ ـ		nal identif		
	nar			no.			numbe			
Sign		der penalties of perjury, I declare t								
Here		ief, they are true, correct, and com	plete. Declaration of			sed on a	II information			
	YO	ur signature		Date	Your occupation					nt you an Identity IN, enter it here
Joint return?								(see		
See instructions.	Spe	ouse's signature. If a joint return, I	ooth must sign.	Date	Spouse's occupation	on				nt your spouse an
Keep a copy for your records.								Ident (see	•	ection PIN, enter it here
	- Dh	one no.		Email address				(444)	,	
		eparer's name	Preparer's signat			Date		PTIN		Check if:
Paid			,							Self-employed
Preparer	Firr	m's name				1		Phon	e no.	
Use Only		n's address							s EIN	
Go to www irs a		11040 for instructions and the late	st information.					<u> </u>		Form 1040 (2022)

Electronically Filed Returns = 149,880,466

1040		ritment of the Treasury—Internal Revenue Serv S. Individual Income Tax		turn 2	2	2	OMB No. 1545	-0074	IRS Use Only—	-Do not w	rite or staple in this space.	
Filing Status Check only one box.	If yo	Single Married filing jointly u checked the MFS box, enter the n on is a child but not your dependen	ame o	ried filing sepa f your spouse.	• •	·			ehold (HOH) [spo	lifying surviving use (QSS) aname if the qualifying	
Your first name		, ,	Last r	name					,	Your social security number		
If joint return, s	t return, spouse's first name and middle initial			name					:	Spouse's social security number		
Home address	Home address (number and street). If you have a P.O. box, see										esidential Election Campaign eck here if you, or your	
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete	spaces below.		State	е	ZIP	code	to go to	if filing jointly, want \$3 this fund. Checking a ow will not change	
Foreign country	country name Foreign province/state/county Foreign postal code					your tax or refund. You Spouse						
Digital		y time during 2022, did you: (a) rec									□Vaa □Na	
Assets		ange, gift, or otherwise dispose of						asse	t)? (See instruc	tions.)	☐ Yes ☐ No	
Standard Deduction		eone can claim:	•		•		a dependent					
Age/Blindness	You:	Were born before January 2, 1	958	Are blind	Spo	use:	Was bor	n be	fore January 2,	1958	Is blind	
Dependents	s (see	instructions):			l security		(3) Relationsh	ip	(4) Check the box	k if quali	fies for (see instructions):	
If more	(1) F	rst name Last name		nun	nber		to you		Child tax cre	dit	Credit for other dependents	
than four dependents,												
see instructions	s ——											
and check here	_											
	1a	Total amount from Form(s) W-2, b	ov 1 (c	oo instruction	c)	ļ				1a	118,016,099	
Income	b	Household employee wages not re	•							1b	000 000	
Attach Form(s)	c	Tip income not reported on line 1a	•							10		
W-2 here. Also attach Forms	d	Medicaid waiver payments not rep		•						1d	1	
W-2G and	е	Taxable dependent care benefits								1e	383,578	
1099-R if tax was withheld.	f	Employer-provided adoption bene		•						1f		
If you did not	g	Wages from Form 8919, line 6 .								1g	1,008	
get a Form	h	Other earned income (see instruct	ions)							1h	48,097	
W-2, see instructions.	i	Nontaxable combat pay election (see ins	structions) .			1i		8,074			
mstructions.	z	Add lines 1a through 1h			. , .					1z	121,050,756	
Attach Sch. B	2a	Tax-exempt interest	2a	45,816,808		b Ta	xable interest	t		2b	45,817,520	
if required.	3a	Qualified dividends	3a	30,648,006		b Or	dinary divide	nds		3b		
	4a	IRA distributions	4a	1,728,270		b Ta	xable amoun	t.		4b		
Standard	5a		5a	30,245,085		b Ta	xable amoun	t.		5b	1 1	
• Single or	6a	Social security benefits	6a	28,725,205		b Ta	xable amoun	t.	<u>.</u>	6b	22,472,193	
Married filing separately,	С	If you elect to use the lump-sum e										
\$12,950	7	Capital gain or (loss). Attach Sche								7	,,	
 Married filing jointly or 	8	Other income from Schedule 1, lin								8	52,941,143	
Qualifying surviving spouse,	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7								9	148,886,882	
\$25,900	10	Adjustments to income from Sche								10		
 Head of household, 	11	Subtract line 10 from line 9. This is	-	-			*** Coo Pole			11	2 2 2 2 2 2	
\$19,400	12 13	Standard deduction or itemized Qualified business income deduct		•		,				12		
If you checked any box under	13	Add lines 12 and 13								14		
Standard Deduction,	15	Subtract line 14 from line 11. If ze								15		
see instructions.	.5	Castact into 14 nonninto 11. Il 26	5 51 10	,	i i iio io yi		ANADIO IIIOUIII	.0		10	121,700,007	
For Disclosure,	Privac	Act, and Paperwork Reduction Act N	otice,	see separate in	struction	s.		Cat	. No. 11320B		Form 1040 (2022)	

*** Standard Deduction = 133,272,166

Itemized Deductions = 14,211,969

Electronically Filed Returns = 149,880,466

1040		rtment of the Treasury—Internal Revenue Serv S. Individual Income Tax		turn	20	22	OMB No. 1545	-0074	4 IRS Use Only—	-Do not w	rite or staple in this space.	
Filing Status Check only one box.	_	Single Married filing jointly under the number of the MFS box, enter the number of the market in the number of the	_	ied filing			_		ehold (HOH) [S box, enter the	spou	ifying surviving ise (QSS) name if the qualifying	
Your first name	•	on is a child but not your dependen	t: Last na	ame						Your social security number		
If joint return, sp	nt return, spouse's first name and middle initial								:	Spouse's social security number		
Home address (numbe	r and street). If you have a P.O. box, see	instruct	tions.						Check h	ntial Election Campaign ere if you, or your	
City, town, or po	st offic	e. If you have a foreign address, also co	omplete :	spaces be	low.	Sta	te	ZIP	code	to go to box belo	if filing jointly, want \$3 this fund. Checking a ow will not change	
Foreign country				Foreign p			-		3 1	your tax or refund. You Spouse		
Digital Assets	exch	y time during 2022, did you: (a) rec ange, gift, or otherwise dispose of	a digital	l asset (o	r a financ	cial intere	est in a digital	•	,. ,	,	Yes No	
Standard Deduction	_	eone can claim:	•				a dependent					
Age/Blindness	You:	Were born before January 2, 1	958	Are b	lind	Spouse	: Uwas bor	n be	fore January 2,	1958	Is blind	
Dependents	(see i	nstructions):		(2)	Social sec	urity	(3) Relationsh	ip	(4) Check the box	k if qualif	ies for (see instructions):	
If more	(1) Fi	rst name Last name			number		to you		Child tax cre	dit	Credit for other dependents	
than four dependents,				_								
see instructions												
and check				+								
here		T	4 /	<u> </u>	\							
Income	1a	Total amount from Form(s) W-2, b	•		,					1a	9,029,317,223 3,691,861	
Attach Form(s)	b	Household employee wages not re	•		` '			•		1b 1c	204,905	
W-2 here. Also	d	Tip income not reported on line 1a (see instructions) Medicaid waiver payments not reported on Form(s) W-2 (see instructions)							1d	143,728		
attach Forms W-2G and	e	Taxable dependent care benefits		•	,	CC IIISti u	ictions)	•		1e	704,636	
1099-R if tax	f	Employer-provided adoption bene				29		•			-4,875	
was withheld.	g g				•			•		1f 1g	432,621	
If you did not get a Form	h	Other earned income (see instruct						•		1h	47,905,043	
W-2, see	i	Nontaxable combat pay election (,				1i		179,334			
instructions.	z	Add lines 1a through 1h							· · · · · · · · · · · · · · · · · · ·	1z	9,234,550,957	
Attach Sch. B	2a	Tax-exempt interest	2a	121,211		b Ta	axable interest	t		2b	119,968,698	
if required.	3a	Qualified dividends	3a	282,084		b 0	rdinary divide	nds		3b	371,684,029	
	4a	IRA distributions	4a	29,663	,566	b Ta	axable amoun	t.		4b	458,809,283	
Standard	5a	Pensions and annuities	5a ′	1,417,97	1,571	b Ta	axable amoun	t.		5b	830,407,186	
Deduction for— Single or	6a	Social security benefits	6a	789,296	6,175	b Ta	axable amoun	t.		6b	417,894,603	
Married filing	С	If you elect to use the lump-sum e	election	method,	check h	ere (see	instructions)]		
separately, \$12,950	7	Capital gain or (loss). Attach Sche	dule D	if require	d. If not	required,	, check here			7	1,113,903,001	
Married filing	8	Other income from Schedule 1, lin								8	1,547,778,654	
jointly or Qualifying	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7	, and 8.	. This is y	our tota	l income	e			9	14,051,470,663	
surviving spouse, \$25,900	10	Adjustments to income from Sche	edule 1,	line 26						10	134,225,322	
Head of	11	Subtract line 10 from line 9. This is	s your a	adjusted	gross in	come				11	13,917,244,921	
household, \$19,400	12	Standard deduction or itemized		•		•				12	35,533,343	
If you checked any box under	13	Qualified business income deduct								13	203,464,455	
Standard	14	Add lines 12 and 13								14	3,251,770,315	
Deduction, see instructions.	15	Subtract line 14 from line 11. If ze	ro or les	ss, enter	-0 This	ıs your t	axable incom	ie		15	10,986,726,592	
For Disclosure, I	Privacy	Act, and Paperwork Reduction Act N	lotice, s	ee separa	ite instru	ctions.		Cat	. No. 11320B		Form 1040 (2022)	

Form 1040 (2022	2)									Page 2
Tax and	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	120,675,136
Credits	17	Amount from Schedule 2, lin	e3				 .	. [17	5,059,740
	18	Add lines 16 and 17						. [18	121,496,105
	19	Child tax credit or credit for o	other dependent	ts from Schedu	ule 8812			. [19	36,694,275
	20	Amount from Schedule 3, lin	e8						20	33,087,252
	21	Add lines 19 and 20						.	21	56,498,945
	22	Subtract line 21 from line 18.	. If zero or less,	enter -0				.	22	106,794,869
	23	Other taxes, including self-er	mployment tax,	from Schedule	2, line 21			. [23	32,496,310
	24	Add lines 22 and 23. This is	your total tax						24	115,966,720
Payments	25	Federal income tax withheld								
-	а	Form(s) W-2				25a	114,479,6	887		
	b	Form(s) 1099				25b	30,049,2	72		
	С	Other forms (see instructions	s)			25c	5,973,12	20		
	d	Add lines 25a through 25c							25d	129,852,714
If you have a	26	2022 estimated tax payment	s and amount a	pplied from 20	21 return				26	9,711,100
qualifying child,	27	Earned income credit (EIC)				27	22,957,5	59		
attach Sch. EIC.	28	Additional child tax credit from	n Schedule 8812			28	17,168,4	35		
	29	American opportunity credit	from Form 8863	, line 8		29	5,702,06	31		
	30	Reserved for future use				30				
	31	Amount from Schedule 3, lin	e 15			31	6,999,25	56		
	32	Add lines 27, 28, 29, and 31.	These are your	total other pa	yments and refu	ndable d	credits .		32	37,187,494
	33	Add lines 25d, 26, and 32. TI	hese are your to	tal payments					33	141,015,050
Refund	34	If line 33 is more than line 24	, subtract line 2	4 from line 33.	This is the amour	nt you ov	erpaid .		34	106,744,586
Holana	35a	Amount of line 34 you want	refunded to you	ı. If Form 8888	is attached, chec	k here			35a	103,684,763
Direct deposit?	b	Routing number			c Type:	Checkin	g 🔲 Sav	rings		
See instructions.	d	Account number								
	36	Amount of line 34 you want a	applied to your	2023 estimate	d tax	36	4,074,64	48		
Amount	37	Subtract line 33 from line 24.	. This is the amo	ount you owe.						
You Owe		For details on how to pay, go		-					37	37,900,365
	38	Estimated tax penalty (see in	structions) .			38	12,965,2	28		
Third Party		you want to allow another	•				1			
Designee		tructions				. L	Yes. Comp			∐ No
	De: nar	signee's ne		Phone no.			Personal number		cation	
Cian	Un	der penalties of perjury, I declare the	hat I have examine	ed this return and	Laccompanying sche	edules and	l statements	and to t	he bes	t of my knowledge and
Sign		ief, they are true, correct, and comp								
Here	Yo	ur signature		Date	Your occupation					nt you an Identity
								Protect (see in		N, enter it here
Joint return? See instructions.					0 1 "			<u> </u>		
Keep a copy for	Sp	ouse's signature. If a joint return, b	ooth must sign.	Date	Spouse's occupation	on				nt your spouse an ection PIN, enter it here
your records.								(see in	•	
	Pho	one no.		Email address				1		
Doid	Pre	parer's name	Preparer's signat	ure		Date	P	ΓIN		Check if:
Paid										Self-employed
Preparer	Fire	Firm's name Phon				Phone	no.			
Use Only						Firm's	EIN			
Go to www.irs.go	to www.irs.gov/Form1040 for instructions and the latest information.									

Form 1040 (2022)	Page 2
Tax and 16 Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3 16	2,107,358,364
Credits 17 Amount from Schedule 2, line 3	10,479,975
18 Add lines 16 and 17	2,117,838,340
19 Child tax credit or credit for other dependents from Schedule 8812	80,226,545
20 Amount from Schedule 3, line 8	55,239,757
21 Add lines 19 and 20	135,466,302
22 Subtract line 21 from line 18. If zero or less, enter -0	1,982,372,037
23 Other taxes, including self-employment tax, from Schedule 2, line 21	133,088,270
24 Add lines 22 and 23. This is your total tax	2,115,460,307
Payments 25 Federal income tax withheld from:	
a Form(s) W-2	
b Form(s) 1099	
c Other forms (see instructions)	
d Add lines 25a through 25c	1,100,000
If you have a 2022 estimated tax payments and amount applied from 2021 return	538,636,958
qualifying child, 27 Earned income credit (EIC)	
28 Additional child tax credit from Schedule 8812	
29 American opportunity credit from Form 8863, line 8	
30 Reserved for future use	
	303,585,884
32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	2,330,341,857
Of the color ways than the Office of the Color was the col	-472,376,713
Refund 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid 34 35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here	
Direct deposit? b Routing number	, ,
See instructions. d Account number	
36 Amount of line 34 you want applied to your 2023 estimated tax 36 122,291,934	
Amount 37 Subtract line 33 from line 24. This is the amount you owe.	
You Owe For details on how to pay, go to www.irs.gov/Payments or see instructions	261,332,249
38 Estimated tax penalty (see instructions)	
Third Party Do you want to allow another person to discuss this return with the IRS? See	
Designee instructions	
Designee's Phone Personal identification name no. Personal identification number (PIN)	1
Sign Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best	est of my knowledge and
belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer	,
Your signature Date Your occupation If the IRS se	ent you an Identity
Joint return? (see inst.)	PIN, enter it here
	ent your spouse an
Keep a copy for Identity Prot	tection PIN, enter it here
(coo nots)	
Phone no. Email address	Chaptrife
Paid Preparer's name Preparer's signature Date PTIN	Check if: Self-employed
Preparer	Sell-employed
Use Only Firm's name Phone no. Firm's address	
Firm's address Go to www.irs.gov/Form1040 for instructions and the latest information.	Form 1040 (2022)

Total Forms Filed = 64,982,420

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

2022

Attachment
Sequence No. 01

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

Your social security number

Par	t I Additional Income				
1	Taxable refunds, credits, or offsets of state and local income taxes			1	3,013,887
2a	Alimony received			2a	211,993
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C			3	30,356,401
4	Other gains or (losses). Attach Form 4797			4	1,837,414
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Atta	Schedule E .	5	17,160,036	
6	Farm income or (loss). Attach Schedule F		6	1,766,686	
7	Unemployment compensation			7	4,728,507
8	Other income:				
а	Net operating loss	8a	(1,015,332)	
b	Gambling	8b	2,282,733		
С	Cancellation of debt	8c	463,924		
d	Foreign earned income exclusion from Form 2555	8d	(487,323	<u>)</u>	
е	Income from Form 8853	8e	15,000		
f	Income from Form 8889	8f	526,350		
g	Alaska Permanent Fund dividends	8g	253,504		
h	Jury duty pay	8h	164,957		
i	Prizes and awards	8i	114,017		
j	Activity not engaged in for profit income	8j	135,492		
k	Stock options	8k	5,979		
I	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	81	72,134		
m	Olympic and Paralympic medals and USOC prize money (see				
	instructions)	8m	11		
n	Section 951(a) inclusion (see instructions)	8n	9,864		
0	Section 951A(a) inclusion (see instructions)	80	12,786		
р	Section 461(I) excess business loss adjustment	8p	49,775		
q	Taxable distributions from an ABLE account (see instructions)	8q	2,529		
r	Scholarship and fellowship grants not reported on Form W-2	8r	808,493		
S	Nontaxable amount of Medicaid waiver payments included on Form	_	, OF 796		
	1040, line 1a or 1d	8s	(95,786	4	
t	Pension or annuity from a nonqualifed deferred compensation plan or				
	a nongovernmental section 457 plan	8t	307,426		
u	Wages earned while incarcerated	8u	23,107		
Z	Other income. List type and amount:		7 022 744		
_	Tatal attania anna Add linas Oa thurwah Oa	8z	7,932,711		42.070.004
9	Total other income. Add lines 8a through 8z		040 ND 15 0	9	13,970,621
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR			10	57,445,060

Total Forms Filed = 64,982,420

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

SCHEDULE 1 (Form 1040)

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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

2022

Attachment
Sequence No. 01

Your social security number

Part I Additional Income Taxable refunds, credits, or offsets of state and local income taxes 3,876,986 2a 7,432,678 Date of original divorce or separation agreement (see instructions): 3 3 410,392,806 4 4 32,243,776 1,172,099,573 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E . . 5 6 -25,342,708 7 30,247,572 Other income: 8a (179,837,729) 8b 61,109,746 8c 4,047,572 **d** Foreign earned income exclusion from Form 2555 32,967,328 8d (8e 243,596 8f 734,788 8q 1.268.843 8h 20,045 354,843 8i 627,976 8i 8k 345,546 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 . . . 81 569,655 m Olympic and Paralympic medals and USOC prize money (see 8m 52 8n 425,401 o Section 951A(a) inclusion (see instructions) 80 2,133,045 66.149.641 g8 **q** Taxable distributions from an ABLE account (see instructions) . . . 8q 49,161 Scholarship and fellowship grants not reported on Form W-2 . . . 4,425,361 8r Nontaxable amount of Medicaid waiver payments included on Form 2,447,737 8s Pension or annuity from a nonqualifed deferred compensation plan or

z Other income. List type and amount:

Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8

8t

8u

22,454,434

400,608

50.085.121

2,529,497

9

Schedule 1 (Form 1040) 2022 Page **2**

	e i (Foiii 1040) 2022				raye z
Par	Adjustments to Income				
11	Educator expenses			11	3,734,321
12	Certain business expenses of reservists, performing artists, and fee	-basis	s government	40	204 727
40	officials. Attach Form 2106			12	281,727
13	Health savings account deduction. Attach Form 8889			13	2,041,587
14	Moving expenses for members of the Armed Forces. Attach Form 3903			14	113,177
15	Deductible part of self-employment tax. Attach Schedule SE			15	22,434,877
16	Self-employed SEP, SIMPLE, and qualified plans			16	972,046
17	Self-employed health insurance deduction			17	3,716,722
18	Penalty on early withdrawal of savings			18	677,089
19a	Alimony paid			19a	326,919
b	Recipient's SSN				
С	Date of original divorce or separation agreement (see instructions):				
20	IRA deduction			20	2,430,935
21	Student loan interest deduction			21	3,982,018
22	Reserved for future use			22	
23	Archer MSA deduction			23	2,995
24	Other adjustments:				
а	Jury duty pay (see instructions)	24a	10,370		
b	Deductible expenses related to income reported on line 8l from the				
	rental of personal property engaged in for profit	24b	34,545		
С	Nontaxable amount of the value of Olympic and Paralympic medals				
	and USOC prize money reported on line 8m	24c	1,009		
d	Reforestation amortization and expenses	24d	17,262		
е	Repayment of supplemental unemployment benefits under the Trade				
	Act of 1974	24e	6,332		
f	Contributions to section 501(c)(18)(D) pension plans	24f	28,233		
g	Contributions by certain chaplains to section 403(b) plans	24g	5,994		
h	Attorney fees and court costs for actions involving certain unlawful				
	discrimination claims (see instructions)	24h	11,269		
i	Attorney fees and court costs you paid in connection with an award				
	from the IRS for information you provided that helped the IRS detect				
	tax law violations	24i	2,032		
j	Housing deduction from Form 2555	24i	1,879		
	Excess deductions of section 67(e) expenses from Schedule K-1 (Form				
	1041)	24k	118,736		
z	Other adjustments. List type and amount:		•		
_	adjustmente: Electype and amount.	24z	436,761		
25	Total other adjustments. Add lines 24a through 24z	$\overline{}$		25	656,994
26	Add lines 11 through 23 and 25. These are your adjustments to income			20	,
_0	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a			26	33,983,457
	Tom 10 10 of 10 to off, fine 10, of 1 offil 10 to 1411, fine 10a				1 (Form 1040) 202

Schedule 1 (Form 1040) 2022 Page **2**

Par	t II Adjustments to Income		
11	Educator expenses	11	1,120,960
12	Certain business expenses of reservists, performing artists, and fee-basis government		
	officials. Attach Form 2106	12	2,200,377
13	Health savings account deduction. Attach Form 8889	13	6.047.945
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	341,213
15	Deductible part of self-employment tax. Attach Schedule SE	15	40,514,835
16	Self-employed SEP, SIMPLE, and qualified plans	16	29,483,344
17	Self-employed health insurance deduction	17	31,591,197
18	Penalty on early withdrawal of savings	18	497,547
19a	Alimony paid	19a	8,452,144
b	Recipient's SSN		
С	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	13,166,590
21	Student loan interest deduction	21	3,860,127
22	Reserved for future use	22	
23	Archer MSA deduction	23	7,528
24	Other adjustments:		
а	Jury duty pay (see instructions)		
b	Deductible expenses related to income reported on line 8l from the		
	rental of personal property engaged in for profit		
С	Nontaxable amount of the value of Olympic and Paralympic medals		
	and USOC prize money reported on line 8m		
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	-	
g	Contributions by certain chaplains to section 403(b) plans 24g 24,488	-	
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 41,913		
		-	
J		-	
K	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)		
_	1011/1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-	
Z	Other adjustments. List type and amount:		
25	Total other adjustments. Add lines 24a through 24z	25	6,369,023
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on	23	
20	Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	143,657,097
			1 (5 10.40) 2000

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2022 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

2022

Attachment
Sequence No. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number Total Forms Filed = 38,517,244 Part I Tax 1 Alternative minimum tax. Attach Form 6251 1 198,059 2 2 Excess advance premium tax credit repayment. Attach Form 8962 5,134,998 3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17... 3 5,323,269 Part II Other Taxes 22,434,877 4 4 Self-employment tax. Attach Schedule SE 5 Social security and Medicare tax on unreported tip income. Attach Form 4137 5 84,910 Uncollected social security and Medicare tax on wages. Attach Form 8919 6 60,035 7 7 142,177 Total additional social security and Medicare tax. Add lines 5 and 6 8 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. 4,788,972 8 226,516 9 9 Household employment taxes. Attach Schedule H 458.968 10 Repayment of first-time homebuyer credit. Attach Form 5405 if required 10 6,973,863 11 Additional Medicare Tax. Attach Form 8959 11 7,140,565 Net investment income tax. Attach Form 8960 12 12 Uncollected social security and Medicare or RRTA tax on tips or group-term life 13 605.857 13 14 Interest on tax due on installment income from the sale of certain residential lots 1,128 14 Interest on the deferred tax on gain from certain installment sales with a sales price 15 9,783 15

(continued on page 2)

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

Recapture of low-income housing credit. Attach Form 8611

Cat. No. 71478U

Schedule 2 (Form 1040) 2022

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

2022

Attachment
Sequence No. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number Total Forms Filed = 38,517,244 Tax Part I 1 1 4,101,697 Excess advance premium tax credit repayment. Attach Form 8962 2 2 7,004,325 3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17. 3 11,096,823 Part II Other Taxes 81,017,483 4 4 Self-employment tax. Attach Schedule SE Social security and Medicare tax on unreported tip income. 5 Attach Form 4137 5 16,466 Uncollected social security and Medicare tax on wages. Attach 6 31,667 7 7 48,084 Total additional social security and Medicare tax. Add lines 5 and 6 8 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. 5,646,079 8 1,353,946 9 Household employment taxes. Attach Schedule H 9 227.222 10 Repayment of first-time homebuyer credit. Attach Form 5405 if required 10 15,086,713 11 11 40,994,087 12 12 Uncollected social security and Medicare or RRTA tax on tips or group-term life 13 266.640 13 14 Interest on tax due on installment income from the sale of certain residential lots 9,952 14 Interest on the deferred tax on gain from certain installment sales with a sales price 15 316,701 15 933 16 Recapture of low-income housing credit. Attach Form 8611 16

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

Cat. No. 71478U

(continued on page 2)
Schedule 2 (Form 1040) 2022

Schedule 2 (Form 1040) 2022 Page **2**

Part II Other Taxes (continued) Other additional taxes: a Recapture of other credits. List type, form number, and amount: 17a 2,683 **b** Recapture of federal mortgage subsidy, if you sold your home 17b c Additional tax on HSA distributions. Attach Form 8889 17c 231,661 d Additional tax on an HSA because you didn't remain an eligible 17d 12,713 5,593 Additional tax on Archer MSA distributions. Attach Form 8853. 17e f Additional tax on Medicare Advantage MSA distributions. Attach Form 8853 17f 2,452 **q** Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property 17g **h** Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A . . . 17h 1,413 i Compensation you received from a nonqualified deferred compensation plan described in section 457A 17i 17i j Section 72(m)(5) excess benefits tax **k** Golden parachute payments 17k 80,862 I Tax on accumulation distribution of trusts **17**l 30 m Excise tax on insider stock compensation from an expatriated 17m **n** Look-back interest under section 167(g) or 460(b) from Form 9,231 17n o Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR **170** 478 p Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund 17p 9,378 **q** Any interest from Form 8621, line 24 17a 174 **z** Any other taxes. List type and amount: **COBRA** 17z 16.879 18 18 372.249 19 Reserved for future use 19 20 Section 965 net tax liability installment from Form 965-A . . . Add lines 4, 7 through 16, and 18. These are your total other taxes. Enter here and 21

Schedule 2 (Form 1040) 2022

35,020,478

on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b

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

Schedule 2 (Form 1040) 2022 Page **2**

Part II Other Taxes (continued) Other additional taxes: **a** Recapture of other credits. List type, form number, and amount: 17a 14,639 **b** Recapture of federal mortgage subsidy, if you sold your home 17b c Additional tax on HSA distributions, Attach Form 8889 17c 69,177 d Additional tax on an HSA because you didn't remain an eligible 17d 1,618 1.168 e Additional tax on Archer MSA distributions. Attach Form 8853. 17e f Additional tax on Medicare Advantage MSA distributions. Attach Form 8853 17f 905 **q** Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property 17g h Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A . . . 17h 14,007 i Compensation you received from a nonqualified deferred compensation plan described in section 457A 17i * j Section 72(m)(5) excess benefits tax 17i 17k 188,942 I Tax on accumulation distribution of trusts **17**I 7,452 m Excise tax on insider stock compensation from an expatriated 17m

n Look-back interest under section 167(g) or 460(b) from Form

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

p Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund

q Any interest from Form 8621, line 24

z Any other taxes. List type and amount: **COBRA**

Schedule 2 (Form 1040) 2022

518.445

145,357,322

105,418

210

36,635

719

17n

170

17p

17a

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

2022

Attachment Sequence No. 03

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

Total Forms Filed = 39,744,159

Your social security number

Par	t I Nonrefundable Credits					
1	Foreign tax credit. Attach Form 1116 if required			1	11,309,631	
2	Credit for child and dependent care expenses from Form 244Form 2441			2	5,624,565	
3	Education credits from Form 8863, line 19			3	7,528,175	
4	Retirement savings contributions credit. Attach Form 8880			4	9,350,016	
5	Residential energy credits. Attach Form 5695		5	3,209,936		
6	Other nonrefundable credits:					
а	General business credit. Attach Form 3800	6a	527,880			
b	Credit for prior year minimum tax. Attach Form 8801	6b	113,921			
С	Adoption credit. Attach Form 8839	6c	57,700			
d	Credit for the elderly or disabled. Attach Schedule R	6d	69,845			
е	Alternative motor vehicle credit. Attach Form 8910	6e	42,531			
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f	248,052			
g	Mortgage interest credit. Attach Form 8396	6g	88,559			
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h	1,008			
i	Qualified electric vehicle credit. Attach Form 8834	6i	16,481			
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j	97,790			
k	Credit to holders of tax credit bonds. Attach Form 8912	6k	2,188			
I	Amount on Form 8978, line 14. See instructions	61	3,504			
Z	Other nonrefundable credits. List type and amount:					
		6z	2,219			
7	Total other nonrefundable credits. Add lines 6a through 6z			7	1,220,076	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040 line 20	-SR, 	or 1040-NR,	8	34,557,343	
	(continued on page 2)					

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

2022
Attachment
Sequence No. 03

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

Total Forms Filed = 39,744,159

Your social security number

t I Nonrefundable Credits				
Foreign tax credit. Attach Form 1116 if required			1	32,886,473
Farra 0444			2	3,449,539
Education credits from Form 8863, line 19			3	7,850,773
Retirement savings contributions credit. Attach Form 8880 $$. $$.			4	1,810,118
Residential energy credits. Attach Form 5695	5	8,237,739		
Other nonrefundable credits:				
General business credit. Attach Form 3800	6a	7,383,881		
Credit for prior year minimum tax. Attach Form 8801	6b	1,394,884		
Adoption credit. Attach Form 8839	6с	257,701		
Credit for the elderly or disabled. Attach Schedule R	6d	5,292		
Alternative motor vehicle credit. Attach Form 8910	6e	189,368		
Qualified plug-in motor vehicle credit. Attach Form 8936	6f	1,652,554		
Mortgage interest credit. Attach Form 8396	6g	139,929		
District of Columbia first-time homebuyer credit. Attach Form 8859	6h	5,937		
Qualified electric vehicle credit. Attach Form 8834	6i	43,564		
Alternative fuel vehicle refueling property credit. Attach Form 8911	6j	42,321		
Credit to holders of tax credit bonds. Attach Form 8912	6k	51,254		
Amount on Form 8978, line 14. See instructions	6I	88,351		
Other nonrefundable credits. List type and amount:				
	6z	27,155		
Total other nonrefundable credits. Add lines 6a through 6z $$. $$.			7	11,274,652
·	-SR,	or 1040-NR,		05 400 004
line 20			8	65,423,684
	Foreign tax credit. Attach Form 1116 if required	Foreign tax credit. Attach Form 1116 if required	Foreign tax credit. Attach Form 1116 if required Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441 Education credits from Form 8863, line 19 Retirement savings contributions credit. Attach Form 8880 Residential energy credits. Attach Form 5695 Other nonrefundable credits: General business credit. Attach Form 3800 Credit for prior year minimum tax. Attach Form 8801 Credit for prior year minimum tax. Attach Form 8801 Credit for the elderly or disabled. Attach Schedule R Alternative motor vehicle credit. Attach Form 8910 Ge 189,368 Qualified plug-in motor vehicle credit. Attach Form 8936 Gi 1,652,554 Mortgage interest credit. Attach Form 8396 Ge 139,929 District of Columbia first-time homebuyer credit. Attach Form 8859 Qualified electric vehicle credit. Attach Form 8834 Alternative fuel vehicle refueling property credit. Attach Form 8911 Credit to holders of tax credit bonds. Attach Form 8912 Amount on Form 8978, line 14. See instructions Other nonrefundable credits. List type and amount: 62 62 63 64 65 65 67 66 67 67 68 69 69 69 69 69 69 69 69 69	Foreign tax credit. Attach Form 1116 if required

Schedule 3 (Form 1040) 2022 Page **2**

Par	Other Payments and Refundable Credits				
9	Net premium tax credit. Attach Form 8962			9	2,318,423
10	Amount paid with request for extension to file (see instructions) .			10	2,094,039
11	Excess social security and tier 1 RRTA tax withheld			11	2,122,720
12	Credit for federal tax on fuels. Attach Form 4136			12	568,926
13	Other payments or refundable credits:				
а	Form 2439	13a	31,361		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b	435,710		
С	Reserved for future use	13c			
d	Credit for repayment of amounts included in income from earlier years	13d	45,450		
е	Reserved for future use	13e			
f	Deferred amount of net 965 tax liability (see instructions)	13f	*		
g	Reserved for future use	13g			
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 2021	13h	410,837		
Z	Other payments or refundable credits. List type and amount:				
	· · ·	13z	44,766		
14	Total other payments or refundable credits. Add lines 13a through	13z		14	675,806
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	15	7,569,053		

Schedule 3 (Form 1040) 2022

Schedule 3 (Form 1040) 2022 Page **2**

Par	t II Other Payments and Refundable Credits				
9	Net premium tax credit. Attach Form 8962			9	2,388,657
10	Amount paid with request for extension to file (see instructions) .			10	203,886,329
11	Excess social security and tier 1 RRTA tax withheld			11	5,858,921
12	Credit for federal tax on fuels. Attach Form 4136			12	7,187,735
13	Other payments or refundable credits:				
а	Form 2439	13a	9,090		
b	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken before April 1, 2021	13b	3,216,748		
С	Reserved for future use	13c			
d	Credit for repayment of amounts included in income from earlier years	13d	217,639		
е	Reserved for future use	13e			
f	Deferred amount of net 965 tax liability (see instructions)	13f	*		
g	Reserved for future use	13g			
h	Credit for qualified sick and family leave wages paid in 2022 from Schedule(s) H for leave taken after March 31, 2021, and before October 1, 2021	13h	3,631,573		
Z	Other payments or refundable credits. List type and amount:	13z	526,772		
14	Total other payments or refundable credits. Add lines 13a through		14	7,803,140	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040 line 31	15	228,154,483		

Schedule 3 (Form 1040) 2022

Total schedules filed = 15,474,250

SCHEDULE A (Form 1040)

Itemized Deductions

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

OMB No. 1545-0074

2022

Attachment
Sequence No. 07

Department of the Treasury Internal Revenue Service

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

Name(s) shown on	Form	n 1040 or 1040-SR			Your	so	cial security number
Medical and Dental Expenses	2 3	Caution: Do not include expenses reimbursed or paid by others. Medical and dental expenses (see instructions) Enter amount from Form 1040 or 1040-SR, line 11 2 Multiply line 2 by 7.5% (0.075)	3	3,983,082 3,979,042		4	3,983,082
Taxes You Paid	k O	State and local taxes. a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box	5a 5b 5c 5d 5e	Income Taxo General Sales 14,642,239 12,922,862 5.698,771 15,033,846 15,033,846	s Tax	x =	10,988,927 3,653,312 15,079,029
Interest You Paid Caution: Your mortgage interest deduction may be imited. See nstructions.	i i	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box	8a 8b 8c 8d 8e 9	11,472,688 281,475 783,871 11,648,956 823,414			
Gifts to Charity Caution: If you made a gift and got a benefit for it, see instructions.	11 12 13	Add lines 8e and 9	11 12 13	11,214,315 6,492,462 242,502		14	11,900,478
Theft Losses	15	Add lines 11 through 13	tha 8 of	an net qualifie that form. Se	ed ee	15	12,179,939
Other Itemized Deductions		Other—from list in instructions. List type and amount: Gambling Loss Deduction = 662,030 Other than gambling dedu Property income, casualty and theft deduction = 26,287			1	16	1,048,972
Total Itemized Deductions		Add the amounts in the far right column for lines 4 through 16. Also, e Form 1040 or 1040-SR, line 12	stan		n, 1	17	15,290,981

Total schedules filed = 15,474,250

SCHEDULE A (Form 1040)

Itemized Deductions

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

Attach to Form 1040 or 1040-SR.

Attachment 07

Department of the Treasury Internal Revenue Service

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

2022 Attachment Sequence No. 07

OMB No. 1545-0074

Traine(s) Shown on Form 1040-5h					100	our social security number		
Medical		Caution: Do not include expenses reimbursed or paid by others.						
and	1	Medical and dental expenses (see instructions)	1	120,988,136				
Dental		Enter amount from Form 1040 or 1040-SR, line 11 2		120,000,100				
Expenses		Multiply line 2 by 7.5% (0.075)	3	28,042,990				
		Subtract line 3 from line 1. If line 3 is more than line 1, enter -0				4	92,946,111	
Taxes You	5	State and local taxes.						
Paid	a	State and local income taxes or general sales taxes. You may include		Income Taxe	es =		257,354,764	
		either income taxes or general sales taxes on line 5a, but not both. If		General Sales	s T	x =	28,500,488	
		you elect to include general sales taxes instead of income taxes,	_					
	L	check this box	_	285,855,252	_			
		State and local personal property taxes	5b 5c	100,070,440	-			
		Add lines 5a through 5c	5d	7,017,000	_			
		Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing		330,011,043	\equiv			
		separately)	5е	121,664,967				
	6	Other taxes. List type and amount:						
			6	011101				
		Add lines 5e and 6				7	125,205,903	
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	_	instructions and check this box						
deduction may be limited. See	ć	Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a	142,386,128				
instructions.	ŀ	Home mortgage interest not reported to you on Form 1098. See	Ou	142,300,120	\dashv			
	•	instructions if limited. If paid to the person from whom you bought the						
		home, see instructions and show that person's name, identifying no.,						
		and address	8b	3,050,732				
	C	Points not reported to you on Form 1098. See instructions for special	0-	4 004 400				
	,	rules	8c 8d	1,221,468	\dashv			
		Add lines 8a through 8c	8e	146,987,431				
		Investment interest. Attach Form 4952 if required. See instructions.	9	23,463,823				
		Add lines 8e and 9				10	170,451,254	
Gifts to		Gifts by cash or check. If you made any gift of \$250 or more, see						
Charity		instructions	11	155,874,059				
Caution: If you made a gift and	12	Other than by cash or check. If you made any gift of \$250 or more,						
got a benefit for it,	40	see instructions. You must attach Form 8283 if over \$500		119,963,756	_			
see instructions.		Carryover from prior year		12,579,080		11	222 224 255	
Coqualty and						14	222,384,855	
Theft Losses	13	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See						
		instructions				15	1,876,602	
Other	16	Other—from list in instructions. List type and amount:						
Itemized	G	Gambling Loss Deduction = 45,138,786 Other than gambling deduction = 6,811,129						
Deductions						16	55,143,113	
Total	17	Add the amounts in the far right column for lines 4 through 16. Also, e						
Itemized		Form 1040 or 1040-SR, line 12			- H	17	668,013,875	
Deductions	18	If you elect to itemize deductions even though they are less than your check this box			n,			

SCHEDULE B (Form 1040)

Interest and Ordinary Dividends

OMB No. 1545-0074 Attachment

Go to www.irs.gov/ScheduleB for instructions and the latest information. Department of the Treasury Attach to Form 1040 or 1040-SR. Sequence No. 08 Internal Revenue Service Name(s) shown on return Your social security number Total schedules filed = 22.556.941 **Amount** Part I 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 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 form. 19.612.608 2 Add the amounts on line 1 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. 5,019 3 4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b Note: If line 4 is over \$1,500, you must complete Part III. **Amount** List name of payer: Part II **Ordinary Dividends** (See instructions and the Instructions for Form 1040. line 3b.) Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b 17,981,506 dividends shown on that form. Note: If line 6 is over \$1,500, you must complete Part III. Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. **Foreign** Accounts Yes No and Trusts At any time during 2022, did you have a financial interest in or signature authority over a financial Caution: If account (such as a bank account, securities account, or brokerage account) located in a foreign required, failure to file FinCEN Form If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial 114 may result in substantial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 penalties. and its instructions for filing requirements and exceptions to those requirements Additionally, you If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the may be required to file Form 8938, financial account(s) are located:

Statement of Specified Foreign Financial Assets.

See instructions.

During 2022, did you receive a distribution from, or were you the grantor of, or transferor to, a

foreign trust? If "Yes," you may have to file Form 3520. See instructions .

SCHEDULE B (Form 1040)

Interest and Ordinary Dividends

OMB No. 1545-0074 Attachment

Go to www.irs.gov/ScheduleB for instructions and the latest information. Department of the Treasury Attach to Form 1040 or 1040-SR. Sequence No. 08 Internal Revenue Service Name(s) shown on return Your social security number Total schedules filed = 22.556.941 **Amount** Part I 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 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. 1 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. 128,061,873 2 Add the amounts on line 1 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815 31,117 3 4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b Note: If line 4 is over \$1,500, you must complete Part III. Amount List name of payer: Part II **Ordinary Dividends** (See instructions and the Instructions for Form 1040, line 3b.) Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b 405,947,405 dividends shown on that form. Note: If line 6 is over \$1,500, you must complete Part III. Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. **Foreign** Accounts Yes No and Trusts At any time during 2022, did you have a financial interest in or signature authority over a financial Caution: If account (such as a bank account, securities account, or brokerage account) located in a foreign required, failure to file FinCEN Form If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial 114 may result in substantial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 penalties. and its instructions for filing requirements and exceptions to those requirements Additionally, you If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the may be required to file Form 8938, financial account(s) are located: Statement of

Specified Foreign Financial Assets.

See instructions.

During 2022, did you receive a distribution from, or were you the grantor of, or transferor to, a

foreign trust? If "Yes," you may have to file Form 3520. See instructions .

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2022 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

SCHEDULE C (Form 1040)

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074 Attachment

Internal Revenue Service

Go to www.irs.gov/ScheduleC for instructions and the latest information. Department of the Treasury Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065. Sequence No. 09 Name of proprietor Social security number (SSN) Total schedules filed = 35,255,144 Principal business or profession, including product or service (see instructions) B Enter code from instructions Business name. If no separate business name, leave blank. D Employer ID number (EIN) (see instr.) Business address (including suite or room no.) City, town or post office, state, and ZIP code (3) Other (specify) Accounting method: (1) Cash (2) Accrual Did you "materially participate" in the operation of this business during 2022? If "No," see instructions for limit on losses . Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions Yes No If "Yes," did you or will you file required Form(s) 1099? ☐ No Part I Income Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked 46,394 . 29,149,640 1 613.579 2 2 Returns and allowances . . 3 Subtract line 2 from line 1 3 29.155.058 4 4 4,350,976 Cost of goods sold (from line 42) . . 29,202,250 5 5 1,175,972 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . 29.575.433 Gross income. Add lines 5 and 6 7 Part II **Expenses.** Enter expenses for business use of your home **only** on line 30. 7,438,924 9,599,407 8 Advertising 8 18 Office expense (see instructions) . 18 109.450 19 Pension and profit-sharing plans . 19 9 Car and truck expenses 9 16,068,106 20 Rent or lease (see instructions): (see instructions) . . . 10 10 1,759,737 2,316,162 Commissions and fees . а Vehicles, machinery, and equipment 20a 2,814,010 Other business property . . . 20b 11 Contract labor (see instructions) 11 b 3,833,171 83,923 12 Depletion . . . 12 21 Repairs and maintenance . . 21 5,784,988 13 Depreciation and section 179 22 Supplies (not included in Part III) . 22 14,322,009 expense deduction (not 23 Taxes and licenses 23 6,790,857 included in Part III) (see 13 5,591,464 instructions) 24 Travel and meals: 5.733.279 Travel 24a 14 Employee benefit programs а 216.531 (other than on line 19) 14 Deductible meals (see b 7,234,996 15 15 8.046.104 Insurance (other than health) 24h instructions) 16,530,619 Interest (see instructions): 25 Utilities 25 16 486.229 1,034,118 16a 26 26 Mortgage (paid to banks, etc.) Wages (less employment credits) а 1,470,386 15,234,202 27a 16b b 27a Other expenses (from line 48) . . 10.168.130 17 27b 17 Legal and professional services b Reserved for future use . . . Total expenses before expenses for business use of home. Add lines 8 through 27a 28 28 26,636,951 30,692,019 29 30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. 2.719.561 **Simplified method filers only:** Enter the total square footage of (a) your home: 2,718,554 and (b) the part of your home used for business: . Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30 . 30 4,688,745 31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2, (If you

• If you checked 32b, you must attach Form 6198. Your loss may be limited.

• If a loss, you must go to line 32.

Form 1041, line 3.

32

checked the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3.

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

• If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule

SE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on nondeductible loss (+)/suspended loss carryover (-)

194,672

30.356.401

Total Boxes Checked = 8,261,140

at risk.

32a All investment is at risk.

32b Some investment is not

31

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 2022 Attachment

Department of the Treasury

Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065. Sequence No. 09 Internal Revenue Service Name of proprietor
Total schedules filed = 35,255,144 Social security number (SSN) Α Principal business or profession, including product or service (see instructions) B Enter code from instructions C Business name. If no separate business name, leave blank. D Employer ID number (EIN) (see instr.) Business address (including suite or room no.) Ε City, town or post office, state, and ZIP code F Accounting method: (1) Cash (2) Accrual (3) Other (specify) Did you "materially participate" in the operation of this business during 2022? If "No," see instructions for limit on losses . G If "Yes," did you or will you file required Form(s) 1099? No Part I Income Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on 2,053,918,312 Form W-2 and the "Statutory employee" box on that form was checked 1 2 9,220,760 2 Returns and allowances . . . 3 Subtract line 2 from line 1 3 2,044,697,551 4 4 575,538,376 1,469,159,176 5 5 30,248,558 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) Gross income. Add lines 5 and 6 1,499,407,733 7 Part II **Expenses.** Enter expenses for business use of your home **only** on line 30. 8 23,451,354 18 20.997.199 8 Advertising 18 Office expense (see instructions) . 1,775,907 19 Pension and profit-sharing plans . 19 9 Car and truck expenses 9 142,648,614 20 Rent or lease (see instructions): (see instructions) . . . 10 15,582,634 Commissions and fees . 10 26,541,036 а Vehicles, machinery, and equipment 20a 20b 11 Contract labor (see instructions) 11 113,562,574 b Other business property . . . 49,741,626 12 Depletion 12 1,010,683 21 Repairs and maintenance . . . 21 32,198,987 13 Depreciation and section 179 22 Supplies (not included in Part III) . 22 75,948,366 expense deduction (not 23 Taxes and licenses 23 25,167,048 included in Part III) (see 78,017,694 13 24 Travel and meals: instructions) Travel 23.645.825 24a 14 Employee benefit programs а 3,708,671 (other than on line 19) 14 b Deductible meals (see 15 27,620,271 18.514.231 15 Insurance (other than health) 24h instructions) 25 Utilities 25 41,599,345 16 Interest (see instructions): 4,255,119 120,551,491 16a 26 26 Mortgage (paid to banks, etc.) Wages (less employment credits) а 201,982,357 8,587,881 16b b Other 27a Other expenses (from line 48) . . . 27a 20.166.431 17 27b 17 Legal and professional services b Reserved for future use . . 28 Total expenses before expenses for business use of home. Add lines 8 through 27a 28 1.077.301.645 422,106,088 29 30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. 5,813,079 Simplified method filers only: Enter the total square footage of (a) your home: 565,701 and (b) the part of your home used for business: Method Worksheet in the instructions to figure the amount to enter on line 30 . 30 13.565.240 31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you 410.392.806 checked the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32. If you have a loss, check the box that describes your investment in this activity. See instructions. Total Boxes Checked = 8.593 • If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule **32a** All investment is at risk. SE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on nondeductible loss (+)/suspended loss carryover (-) **32b** Some investment is not Form 1041, line 3. 1,851,957 at risk. • If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.

	ie C (Form 1040) 2022			Page 4
Part	Cost of Goods Sold (see instructions)			
33 34	Method(s) used to value closing inventory: a Cost b Lower of cost or market c Other (att Was there any change in determining quantities, costs, or valuations between opening and closing inventor)		planation)	
	If "Yes," attach explanation		. Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	1,078,958	
36	Purchases less cost of items withdrawn for personal use	36	2,211,124	
37	Cost of labor. Do not include any amounts paid to yourself	37	539,350	
38	Materials and supplies	38	2,029,925	
39	Other costs	39	942,965	
40	Add lines 35 through 39	40		
41	Inventory at end of year	41	1,051,923	
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 2022, 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?		Tes	☐ No
47a	Do you have evidence to support your deduction?		Tes	☐ No
b Part	If "Yes," is the evidence written? Other Expenses. List below business expenses not included on lines 8–26 or lines.			☐ No
rait	Other Expenses. List below business expenses not included on lines 0-20 or in	16 30	•	
	Total other expenses. Enter here and an line 97a	40		

Schedule C (Form 1040) 2022 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	ch ex	planation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor If "Yes," attach explanation		. 🗌 Yes	□ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	52,211,162	
36	Purchases less cost of items withdrawn for personal use	36	332,449,237	
37	Cost of labor. Do not include any amounts paid to yourself	37	53,580,616	
38	Materials and supplies	38	98,155,116	
39	Other costs	39	95,381,959	
40	Add lines 35 through 39	40		
41	Inventory at end of year	41	56,239,714	
42 Part	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	ovpopede on lin	o O and
	are not required to file Form 4562 for this business. See the instructions for line 1 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 2022, enter the number of miles you used your vehicle during 2022, enter the number of miles you while your vehicle during 2022, enter the number of miles you while your vehicle during 2022, enter the number of miles you while your vehicle during 2022, enter the number of miles	ehicle	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?		🗌 Yes	☐ No
47a	Do you have evidence to support your deduction?		🗌 Yes	☐ No
b	If "Yes," is the evidence written?		🗌 Yes	☐ No
Part	V Other Expenses. List below business expenses not included on lines 8–26 or lin	e 30.		
48	Total other expenses. Enter here and on line 27a	48		

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

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

Attachment

Department of the Treasury Sequence No. 12 Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. Internal Revenue Service Name(s) shown on return Your social security number Total schedules filed = 27,317,805 Total Sales Reported with Form 1099 = 23,126,425 Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ■ No 20.898.240 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) Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result whole dollars. with column (q) 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 . 5,017,538 5,103,513 5,082,439 1b Totals for all transactions reported on Form(s) 8949 with Box A checked 11,774,921 11,754,784 5,080,018 11,539,291 2 Totals for all transactions reported on Form(s) 8949 with Box B checked 3,347,241 268,546 2,906,939 2,957,517 Totals for all transactions reported on Form(s) 8949 with **Box C** checked 1,367,243 1.409.689 1.423.934 104.280 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 647,095 5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 1,169,497 5 6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 2,471,320 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-18,347,893 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 (h) Gain or (loss) (a) Adjustments (d) Proceeds Subtract column (e) lines below. Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. with column (g) line 2, column (q) 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 5,050,494 5,123,173 5,111,205 on Form 8949, leave this line blank and go to line 8b . 8b Totals for all transactions reported on Form(s) 8949 with 11,401,939 11,388,517 3,667,702 11,113,371 Box D checked Totals for all transactions reported on Form(s) 8949 with 5,126,152 4,750,788 237,718 4,789,240 10 Totals for all transactions reported on Form(s) 8949 with 2,820,330 2,579,998 1,112,064 2,183,629 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 2,728,077 11 12 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 1,965,042 13 11,062,511 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 3,310,661

on the back.

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

22,693,875

15

SCHEDULE D (Form 1040)

Capital Gains and Losses

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

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return Go to www.irs.gov/ScheduleD for instructions and the latest information. Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Attachment Sequence No. 12

Your social security number

	l otal schedules filed = 27,317,805 Total S	Sales Reported wi	ith Form 1099 = 1	4,190,132,70	04	
-	you dispose of any investment(s) in a qualified opportunity es," attach Form 8949 and see its instructions for additiona		•	_		
Pa	rt I Short-Term Capital Gains and Losses—Ge	nerally Assets I	Held One Year	or Less (se	e ins	tructions)
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, line 2, colum	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.	1,259,859,910	1,328,620,426			-68,760,516
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked	8,462,260,141	9,172,275,327	495,250,4	95	-214,786,448
2	Totals for all transactions reported on Form(s) 8949 with Box B checked	465,580,299	507,132,511	25,019,43		-16,532,772
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	312,740,982	324,911,792	1,714,90	2	-10,455,907
4	Short-term gain from Form 6252 and short-term gain or (I	oss) from Forms 4	684, 6781, and 88	324	4	10,635,617
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1				5	-11,051,012
6	Short-term capital loss carryover. Enter the amount, if ar Worksheet in the instructions				6	(241,696,788)
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis				7	-552,647,827
Pa	t II Long-Term Capital Gains and Losses—Ge	nerally Assets F	Held More Than	One Year	(see i	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 e dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	Adjustmen to gain or loss Form(s) 8949, I line 2, colum	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.	651,928,046	634,665,561			17,262,485
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	1,657,803,370	1,677,101,584	67,351,	909	48,052,691
9	Totals for all transactions reported on Form(s) 8949 with Box E checked	384,786,348	265,509,426	-3,766,9	915	115,510,007
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	995,173,607	642,104,494	-203,245	,615	149,823,498
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824				11	488,583,583
12	Net long-term gain or (loss) from partnerships, S corporat	tions, estates, and	trusts from Scheo	dule(s) K-1	12	352,983,463
13					13	65,827,708
	Long-term capital loss carryover. Enter the amount, if any Worksheet in the instructions				14	(279,429,941)
15	Net long-term capital gain or (loss). Combine lines 88 on the back				15	958,619,929

Schedule D (Form 1040) 2022 Page **2**

Part	III Summary		
16	Combine lines 7 and 15 and enter the result	16	26,480,998
	• 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	33,229
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	1,361,503
20	Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.		
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:		
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21	()
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?		
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.		
	☐ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

Schedule D (Form 1040) 2022 Page **2**

Part III Summary

16	Combine lines 7 and 15 and enter the result	16	405,966,171	
	• 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	4,321,142	
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	51,712,806	
20	Are lines 18 and 19 both zero or blank and you are not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below.			
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:			
	• The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500)	21	(
	Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
22	Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?			
	☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16.			
	☐ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

Schedule D (Form 1040) 2022

SCHEDULE E (Form 1040)

Department of the Treasury Internal Revenue Service **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

2022

Attachment Sequence No. 13

Name(s) shown on return

Total schedules filed = 20.106.223

Your social security number

	Total scriedules filed – 20,106,223								
Pai	Income or Loss From Rental Real Estate and Note: If you are in the business of renting personal propert rental income or loss from Form 4835 on page 2, line 40.			c . See	instru	ctions. If you a	are an indiv	vidual, rep	ort farm
A B	Did you make any payments in 2022 that would require you if "Yes," did you or will you file required Form(s) 1099?					structions .			
	, , , , , , , , , , , , , , , , , , , ,								
	Number of Returns with Rental Properties = 9,567,		<u> </u>	al Nicos		f Dontal Du		- 40	700 457
_ <u>A</u>			101			of Rental Pro			729,157
B C	Number of Returns with Royalties = 2,020,	464		Total	Numi	per of Royal	ties =	2,8	910,355
	Town of Donas at 1 0 Constant and a state and a	.a 1!	LI		_				
1b	(from list below) above, report the number of fair r	rental	and		Fa	ir Rental Days	Person Da	ial Use iys	QJV
<u>A</u>	personal use days. Check the QJ if you meet the requirements to fi			Α					
B	qualified joint venture. See instruc			В					
<u>C</u>				С					
	e of Property:				_	0.16.0			
	Single Family Residence 3 Vacation/Short-Term Rent	tal	5 Land			Self-Rental			
2	Multi-Family Residence 4 Commercial		6 Roya	aities	8	Other (desc	ribe)		
						Properti	es:		
Inco	me:		REN	ΤΑ		ROYALTYB			С
3	Rents received	3	8,963,3	354					
4	Royalties received	4				1,856,543			
Expe	enses:								
5	Advertising	5							
6	Auto and travel (see instructions)	6							
7	Cleaning and maintenance	7							
8	Commissions	8							
9	Insurance	9							
10	Legal and other professional fees	10							
11	Management fees	11							
12	Mortgage interest paid to banks, etc. (see instructions)	12	4,506,1	118					
13	Other interest	13						480,29)6
14	Repairs	14							
15	Supplies	15							
16	Taxes	16	7,965,	350					
17	Utilities	17							
18	Depreciation expense or depletion	18	7,247,6	653		785,202			
19	Other (list)	19							
20	Total expenses. Add lines 5 through 19	20	9,066,	211		1,226,642			
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If								
	result is a (loss), see instructions to find out if you must		0.070	070					
	file Form 6198	21	9,270,	3/0	.	1.864.909			4 =00 6 :=
22	Deductible rental real estate loss after limitation, if any,	00	4,038,	332		nondeductib			
00-	on Form 8582 (see instructions)	22	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		23a	suspended I 8,963,354	oss carr	yover =	1,021,040
23a	•								
b		ei lies			23b 23c	1,856,543 4,506,118			
q					23d	7,931,970			
d					23e	10,058,434			
e 24	Income. Add positive amounts shown on line 21. Do not	incl	 Ide anv lo		200	10,000,404	. 24	7,165,7	728
2 4 25	Losses. Add royalty losses from line 21 and rental real estat		-		nter t	 ntal losses ha		(4,585,3	
26	Total rental real estate and royalty income or (loss).							, 4,000,0	<u>, , , , , , , , , , , , , , , , , , , </u>
20	here. If Parts II, III, IV, and line 40 on page 2 do not a								
	Schedule 1 (Form 1040), line 5. Otherwise, include this an						. 26	9,434,	516

SCHEDULE E (Form 1040)

Department of the Treasury

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

2022

Attachment Sequence No. 13

Internal Revenue Service

Name(s) shown on return

Total schedules filed = 20.106.223

Your social security number

	Total schedules filed = 20,106,223									
Par	Income or Loss From Rental Real Estate an Note: If you are in the business of renting personal proper rental income or loss from Form 4835 on page 2, line 40.			C . See	e instru	ections. If you a	are an indi	vidual, rep	ort faı	m
	Did you make any payments in 2022 that would require you If "Yes," did you or will you file required Form(s) 1099?					structions .				
	Physical address of each property (street, city, state, ZIF								_	
A			<u>′</u>							
В										
С										
1b	Type of Property (from list below) 2 For each rental real estate properabove, report the number of fair	rental	and		Fa	air Rental Days	Persor Da	nal Use iys	C	jλ
Α	personal use days. Check the Qu			Α						
В	if you meet the requirements to f qualified joint venture. See instru			В						
C			J.	С						
1	of Property: Single Family Residence 3 Vacation/Short-Term Ren Multi-Family Residence 4 Commercial	tal	5 Land 6 Roya			Self-Rental Other (desc				
_						Propert	es:			
Incor		_	REN'			ROYALTYB			С	
3	Rents received	3	412,738	,382		65 902 050				
4 Evno	Royalties received	4				65,802,059				
=xpe 5	nses: Advertising	5								
6	Auto and travel (see instructions)	6								
7	Cleaning and maintenance	7								
8	Commissions	8								
9	Insurance	9								
10	Legal and other professional fees	10								
11	Management fees	11								
12	Mortgage interest paid to banks, etc. (see instructions)	12	54,512,	906						
13	Other interest	13						7,569,6	339	
14	Repairs	14								
15	Supplies	15								
16	Taxes	16	60,184	,376						
17	Utilities	17								
18	Depreciation expense or depletion	18	110,091	,778		7,458,223				
19	Other (list)	19								
20	Total expenses. Add lines 5 through 19	20	410,084	1,042		17,027,671				
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	01	2,654,	330		40 774 200				
22	Deductible rental real estate loss after limitation, if any,	21	2,004,	303		48.774.388 nondeductib		loss =	54 70	7 042
22	on Form 8582 (see instructions)	22	(60,252	993		suspended				
23a	Total of all amounts reported on line 3 for all rental prope		<u>.</u>		_	412,738,382		, 0 7 01 -	. 5,55	3,303
b	Total of all amounts reported on line 4 for all royalty prope				23b	65,802,059				
c	Total of all amounts reported on line 12 for all properties				23c					
d	Total of all amounts reported on line 18 for all properties					117,550,001				
е	Total of all amounts reported on line 20 for all properties					427,111,714				
24	Income. Add positive amounts shown on line 21. Do no	t inclu	ide any lo	sses				164,667	,774	
25	Losses. Add royalty losses from line 21 and rental real estat		-		Enter t	otal losses he	re 25	(77,541)
26	Total rental real estate and royalty income or (loss).	Comb	ine lines	24 and	25. E	Enter the resu	ılt			
	here. If Parts II, III, IV, and line 40 on page 2 do not						n			
	Schedule 1 (Form 1040), line 5. Otherwise, include this ar	mount	in the to	tal on li	ine 41	on page 2	. 26	87,126	.031	

Schedule	E (Form	1040) 2022				Attachmen	t Sequen	ce No. 1	3					Page 2
Name(s)	shown on	return. Do not enter name and	d social secu	rity number	if showr	n on other	side.			Y	our soci	al security	numb	er
Cautio Part	II In	RS compares amounts acome or Loss From te: If you report a loss, re e box in column (e) on line mount is not at risk, you mo	Partner eceive a dis 28 and att	ships and tribution, of ach the rec	d S C lispose quired b	Corpora of stock, basis com	tions or rece	ive a loa n. If you	ın repay	ment from an S a loss from an a	corpora			
27	Are you	u reporting any loss not activity (if that loss wattructions before comple	allowed i	n a prior y	year d Form	lue to the 8582), o	e at-ris r unrei	k or bas mburse	sis lim d part	tations, a prio	r year ι ses? If	you ansv	verec	
28	366 1113	(a) Name	ting tins s	ection	(b) E	nter P for nership; S corporation	(c) Ch fore	eck if	(d	Employer ication number	(e) C	heck if mputation quired	(f) (Check if amount is at risk
A B														
C D		Passive Income	and Los	s				No	onpas	sive Income a	nd Los	s		
) Passive loss allowed	(h) Pa	ssive income				ss allowed	d (j) Section 179 exp	ense	(k) Nonpa		
	. ` `	ch Form 8582 if required)		Schedule K-		<u> </u>	Schedul			duction from Forn		from So		
<u>A</u>	PAI	RTNERSHIPS		ERSHIPS		PARTI			PA	RTNERSHIPS	i	PART		
B C		1,248,463	1,782,7				40,910 ORPS			198,138 S-CORPS			3,71	
D		S-CORPS 160,923	S-COR 509.0				51,171			501,323			ORP	
29a	Totals	100,923	2,187,6			1,0	31,171			501,323			6,42 9,83	
	Totals	1,352,834	2,107,0	712		3 30	4,525			686,119		3,00	9,00	<u>, </u>
30		lumns (h) and (k) of line	29a				74,323			000,110	30	7 24	2,38	7
31		lumns (g), (i), and (j) of li									31		4,41	
32		artnership and S corp					ne lines	30 and	d 31		32		2,97	
Part I	I In	come or Loss From	Estates	and Tru	sts									
33				(a) N	Name							(b) Empidentificatio		ber
Α														
В														
	(0)	Passive I			Dogoivo	e income				onpassive Inc		nd Loss (f) Other inc	omo fr	
	(0)	(attach Form 8582 if required				dule K-1				edule K-1		Schedu		OIII
Α														
В														
	Totals				282,3	86						424,29	1	
	Totals	44,265							49,4	35				
35		lumns (d) and (f) of line									35	637.		
36 37		lumns (c) and (e) of line state and trust income		 Combin	 olina-		 36				36 37	(88,7)
Part		come or Loss From						Cond		REMICs) — R		675, Holde		
38		(a) Name	ricai Es	(b)	Employe	er (c) Exces	s inclusio	n from	(d) Taxable inc	ome	(e) Ind	come f	
				identific	auon n	ai i i i i i i	(see i	nstruction 795	ns)	Schedules Q, I	ne 1b	Schedu	100 W,	e on
39	Combin	ne columns (d) and (e) o	nly Enter	the result	here	and incl	ıde in t		l on lin		39	11,0	160	
Part		ummary	my. Linton	tile result	TICIC	and more	ade iii t	no total	011 1111	C 41 DCIOW .	03	11,0	,00	
40		m rental income or (loss) from Fo i	rm 4835.	Also. o	complete	line 42	2 below	,		40	396,	886	
41	Total ir	ncome or (loss). Combi	•	6, 32, 37,							41			
42	`	ciliation of farming a			 e . Fn	 iter vour	arne		Ι .		71	17,16	u,u30	
		and fishing income rep												
	(Form 1	065), box 14, code B; S	chedule k	(-1 (Form	1120-	S), box 1	7, code							
	AD; and	d Schedule K-1 (Form 10	041), box ⁻	14, code F	See	instruction	ons .	42	(636,726				
43		ciliation for real estate												
		sional (see instructions												
		d anywhere on Form 1 I rental real estate activi												
		he passive activity loss						43		552.434				

Schedul	le E (Form 1040) 2022			At	ttachment	Sequenc	ce No. 1 3	3					Page 2
Name(s)) shown on return. Do not enter name a	nd social securi	ty number if						1	our soci	al security	numbe	r
Cautio	on: The IRS compares amount	s reported o	n vour tax	x returi	n with a	mounts	show	n on S	Schedule(s) K-1				
Part		n Partners receive a distr le 28 and attac	hips and ribution, dis ch the requ	d S Co spose o uired ba	orpora of stock, asis com	tions or receiv putation	ve a loa	n repa report	yment from an S a loss from an a	corpora			
27	Are you reporting any loss no passive activity (if that loss w	ot allowed in vas not repo	a prior y	ear du	e to the 582), or	at-risk unreim	or bas	sis lim	itations, a pric	r year ι ses? If	you ansv	wered	"Yes,"
28	see instructions before comp	leting this se		(b) Ent partne	ter P for rship; S rporation	(c) Che foreign	eck if gn	(c		(e) C basis co		(f) Cl any ar	No neck if nount is at risk
Α				10. 0 00	.porumorr]			[[
В]			[[
С]			[[
D	Dessive Incom						J Na		-i I				
	Passive Incom		sive income		(i) Nonpa	ssive loss			sive Income a		(k) Nonpa	assive i	ncome
	(attach Form 8582 if required)	from Sc	hedule K-1			Schedule			eduction from Forr		from So		
_ <u>A</u> _	PARTNERSHIPS	PARTNE			PARTN			PA	RTNERSHIPS	5	PARTI		
B C	59,255,397 S-CORPS	105,222,1 S-CORP				342,615 ORPS	•		6,143,020 S-CORPS			011,09	
D	5,816,581	54,652,3		+		258,269	<u> </u>		25,362,330			ORPS 500,53	
29a	Totals	159,874,5			,				20,002,000		1,271,		
b	Totals 65,071,978				303,6	00,884			31,505,350				
30	Add columns (h) and (k) of line									30	1,431,	386,1	33
31	Add columns (g), (i), and (j) of									31		78,21	
32 Part	Total partnership and S cor				Combin	e lines	30 and	131		32	1,031,	207,9	21
33	income of Loss From	II LStates d	(a) Na								(b) Emp		er
Α													
В		_											
	(c) Passive deduction or loss al	Income an		Nonpassive I Passive income (e) Deduction or loss					•		nd Loss (f) Other inc	ome fro	m
	(attach Form 8582 if require			Schedu					hedule K-1		Schedu		"""
Α													
В	Tatala		04	040.4	70						25 026 0	140	
34a b	Totals 2,579,309		21	,216,1	12			5,958	729		35,036,9	740	
35	Add columns (d) and (f) of line	e 34a						5,550		35	56,25	3.112	
36	Add columns (c) and (e) of line									36	(8,538)
37	Total estate and trust incom									37	47,71		
Part	IV Income or Loss Fron	n Real Est	ate Mor	tgage					_		I Holde	r	
38	(a) Name		(b) E identifica	mployer ation nun		(see in	les Q, lin struction	e 2c	(d) Taxable inc (net loss) fro Schedules Q,	om	(e) Ind	come fr les Q, li	
39	Combine columns (d) and (e)	only. Enter t	he result	here a	nd inclu			on lin		39	-23,4	413	
Part		orny: Eritor t	no rocait	11010 4	114 111014	<u> </u>	io total	011 111			20,	110	
40	Net farm rental income or (los	s) from Forr	m 4835. A	Also, co	omplete	line 42	below			40	6,073	,960	
41	Total income or (loss). Comba (Form 1040), line 5	, 32, 37, 3			er the r	esult h	ere ar	nd on Schedule	41	1,172,0	99.57	3	
42 43	Reconciliation of farming farming and fishing income re (Form 1065), box 14, code B; AD; and Schedule K-1 (Form 1 Reconciliation for real estate	ported on Fo Schedule K- 1041), box 14	orm 4835 1 (Form 1 4, code F.	, line 7 I120-S . See ir	; Sched), box 1 nstructio	ule K-1 7, code ons .	42	18	31,687,301			,-	
10	professional (see instruction reported anywhere on Form from all rental real estate acti	ns), enter th 1040, Form vities in wh	ne net in n 1040-SI	ncome R, or f	or (los Form 10	s) you 040-NR	1	_	7 500 272				

SCHEDULE EIC (Form 1040)

Earned Income Credit

Qualifying Child Information

2002

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service 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 = 17,208,004

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, line 27, 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, line 27, 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, line 27, 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.			
	Child's SSN The child must have an SSN as defined in the instructions for Form 1040, line 27, unless the child was born and died in 2022 or you are claiming the self-only EIC (see instructions). If your child was born and died in 2022 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 17,208.004 If born after 2003 and the child is younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.	Year 8.717.587 If born after 2003 and the child is younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.	Year 3.089.498 If born after 2003 and the child is younger than you (or your spouse, if filing jointly), skip lines 4a and 4b; go to line 5.
4a	Was the child under age 24 at the end of 2022, a student, and younger than you (or your spouse, if filing jointly)?	1,014,476 Yes. No. Go to Go to line 4b. line 5.	280,808 Yes. No. Go to line 4b. line 5.	73,576 Yes. No. <i>Go to line 5.</i>
b	Was the child permanently and totally disabled during any part of 2022?	Yes. No. Go to Iine 5. The child is not a qualifying child.	99.163 Yes. No. Go to Iine 5. The child is not a qualifying child.	Yes. No. Go to Ine 5. The child is not a qualifying child.
5	Child's relationship to you (for example, son, daughter, grandchild, niece, nephew, eligible foster child, etc.)	17,208,004	8,717,587	3,089,498
	Number of months child lived with you in the United States during 2022			
	• If the child lived with you for more than half of 2022 but less than 7 months, enter "7."	17,208,004	8,717,587	3,088,489
	• If the child was born or died in 2022 and your home was the child's home for more than half the time he or she was alive during 2022, 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

Qualifying Child Information

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

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.

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

Attachment Sequence No. 43

Name(s) shown on return

Total schedules filed = 17,208,004

Your social security number

Before you begin:

- See the instructions for Form 1040, line 27, 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, line 27, 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, line 27, 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.

Qı	ualifying Child Information	Ch	nild 1	Cł	nild 2	Cl	nild 3
1	Child's name If you have more than three qualifying children, you have to list only three to get the maximum credit.	First name	Last name	First name	Last name	First name	Last name
2	Child's SSN The child must have an SSN as defined in the instructions for Form 1040, line 27, unless the child was born and died in 2022 or you are claiming the self-only EIC (see instructions). If your child was born and died in 2022 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	03 and the child is ou (or your spouse, skip lines 4a and	younger than y	003 and the child is ou (or your spouse, , skip lines 4a and	younger than y	103 and the child is ou (or your spouse, , skip lines 4a and
4a	Was the child under age 24 at the end of 2022, a student, and younger than you (or your spouse, if filing jointly)?	Yes. 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.
b	Was the child permanently and totally disabled during any part of 2022?	Go to line 5.	No. The child is not a qualifying child.	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 (for example, son, daughter, grandchild, niece, nephew, eligible foster child, etc.)						
	Number of months child lived with you in the United States during 2022 • If the child lived with you for more than half of 2022 but less than 7 months, enter "7."						
For	• If the child was born or died in 2022 and your home was the child's home for more than half the time he or she was alive during 2022, enter "12." Paperwork Reduction Act Notice, see you	Do not enter months.		Do not enter months.	months more than 12	months.	months more than 12 EIC (Form 1040) 2022

SCHEDULE F (Form 1040)

Department of the Treasury Internal Revenue Service

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

2022

Attachment
Sequence No. 14

Name	of proprietor Total schedules filed = 1	,843,	900					Social s		y number (SSN)
A Prir	ncipal crop or activity		B Enter code	e from Pari	C Account	-		D Emplo	yer ID r	number (EIN) (see instr.)
E Did	you "materially participate" in the operation	on of t	his business during	2022? If	"No," see instru	ctions	for limit c	n passive	losses	Yes No
F Did	you make any payments in 2022 that wou	ıld red	uire you to file Form	(s) 1099?	See instruction	ns .				☐ Yes ☐ No
	Yes," did you or will you file required Form		•	. ,						☐ Yes ☐ No
Part		d. Co	mplete Parts I ar	nd II. (Ad	ccrual method	d. Cor	nplete P	arts II an	d III, a	
1a	Sales of purchased livestock and other r		-			1a		,641		, ,
b	Cost or other basis of purchased livesto		,	,		1b	207			
C						$\overline{}$			1c	403,043
2	Sales of livestock, produce, grains, and								2	984,604
- 3а	Cooperative distributions (Form(s) 1099-		1 1	4,621	1				3b	** 428,682
4a	Agricultural program payments (see insti			9,859					4b	** 375,664
5a	Commodity Credit Corporation (CCC) lo								5a	** 465
b	CCC loans forfeited		1 1	162	1		nount		5c	** 162
6	Crop insurance proceeds and federal cro					abic ai	nount			
а	Amount received in 2022		1 1 1	13.439	1	able ar	mount		6b	** 129,219
C	If election to defer to 2023 is attached, of		. 00	-,			eferred fro	 nm 2021	6d	9,186
7									7	** 142,201
8	Other income, including federal and stat								8	** 533,167
		-							-	333,107
9	Gross income. Add amounts in the rigaccrual method, enter the amount from								9	1,546,279
Part									_	
	•	ACCI	uai Metriou. Do		•				1	1,939
10	Car and truck expenses (see instructions). Also attach Form 4562	40	469.066	23	Pension and p		٠.		23	1,535
44		10	468,066	24	Rent or lease	•		,	04-	
11	Chemicals	11	509,082 61,532	а	Vehicles, mac				24a	
12	Conservation expenses (see instructions)	12	409,386	b	Other (land, ar		,		24b	1,180,669
13	Custom hire (machine work)	13	409,300	25	Repairs and m				25	
14	Depreciation and section 179 expense		4 270 420	26	Seeds and pla				26	546,189
	(see instructions)	14	1,270,428	27	Storage and w		_		27	4.000
15	Employee benefit programs other than		22.440	28	Supplies				28	1,078,288
	on line 23	15	22,449	29	Taxes				29	956,691
16	Feed	16	939,932	30	Utilities				30	
17	Fertilizers and lime	17	598,394	31	Veterinary, bre	_		licine .	31	
18	Freight and trucking	18	4.405.704	32	Other expense	es (spe	city):			
19	Gasoline, fuel, and oil	19	1,105,791	а					32a	
20	Insurance (other than health)	20	873,788	b					32b	
21	Interest (see instructions):		224 744	C .					32c	
a	Mortgage (paid to banks, etc.)	21a	331,714	d					32d	
b	Other	21b	390,862	e					32e	
22	Labor hired (less employment credits)	22	245,996	f					32f	4.750.070
33	Total expenses. Add lines 10 through 3								33	1,752,373
34	Net farm profit or (loss). Subtract line 3								34	1,766,683
	If a profit, stop here and see instructions	for w	here to report. If a lo	ss, comp	olete line 36.		Nondedi			Suspended Carryover
35	Reserved for future use.							17,803	,	
36	Check the box that describes your inves	_	,			e to rep	ort your	oss:		
a	_	b _	Some investment is	s not at r	isk.					
For Pa	perwork Reduction Act Notice, see the	sepa	rate instructions.		Cat. No. 1	11346H		:	Schedu	ile F (Form 1040) 2022

SCHEDULE F (Form 1040)

Department of the Treasury Internal Revenue Service

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.

2022
Attachment
Sequence No. 14

OMB No. 1545-0074

Name	of proprietor Total schedules filed = '	I,843,	900					Social sec	urity	number (SSN)
	ncipal crop or activity		B Enter code	from Part		counting m		D Employer	· ID n	number (EIN) (see instr.)
						Cash				
	I you "materially participate" in the operati		~					•		
	I you make any payments in 2022 that wo		· · · · · · · · · · · · · · · · · · ·							Yes No
	Yes," did you or will you file required Forn									Yes No
Par	Farm Income – Cash Metho	od. Co	omplete Parts I an	d II. (Ac	crual me	thod. Cor	mplete Pai	ts II and	III, a	and Part I, line 9.)
1a	Sales of purchased livestock and other	resale	tems (see instruction	ns) .		. 1a	44,947	,522		
b	Cost or other basis of purchased livesto	ck or c	other items reported	on line 1a	ı	. 1b	23,231,	492		
С	Subtract line 1b from line 1a							1	1c	21,716,030
2	Sales of livestock, produce, grains, and	other p	products you raised						2	125,773,384
3a	Cooperative distributions (Form(s) 1099-	PATR)	. 3a ** 38,8	40,222	3b	Taxable a	mount .	3	3b	** 31,564,789
4a	Agricultural program payments (see inst	ructior	s). 4a ** 7,7 0	02,401	4b	Taxable a	mount .	4	4b	** 7,642,582
5a	Commodity Credit Corporation (CCC) lo	ans re	ported under election	ı					5а	** 250,587
b	CCC loans forfeited		. 5b ** 19	9,761	5c	Taxable a	mount .		5c	** 19,761
6	Crop insurance proceeds and federal cr	op disa			ns):					
а	Amount received in 2022		. 6a 9,7	76,735	6b	Taxable a	mount .	6	3b	** 7,865,230
С	If election to defer to 2023 is attached, of	heck l	nere		6d	Amount d	eferred from	2021	6d	728,900
7	Custom hire (machine work) income .								7	** 6,153,050
8	Other income, including federal and stat	e gasc	line or fuel tax credit	t or refun	d (see instr	ructions) .			8	**13,986,451
9	Gross income. Add amounts in the rig	ght co	umn (lines 1c, 2, 3b	o, 4b, 5a	, 5c, 6b, 6	3d, 7, and	8). If you u	se the		
	accrual method, enter the amount from	Part III	, line 50. See instruct	tions .					9	211,662,000
Par	Farm Expenses—Cash and	Accı	ual Method. Do	not inc	ude pers	sonal or li	ving expe	nses. See	ins	structions.
10	Car and truck expenses (see			23	Pension a	and profit-s	haring plans	s 2	23	29,995
	instructions). Also attach Form 4562	10	2,097,772	24	Rent or le	ase (see in	structions):			
11	Chemicals	11	12,271,185	а	Vehicles,	machinery	, equipment	2	4a	
12	Conservation expenses (see instructions)	12	182,473	b	Other (lan	nd, animals	, etc.)	2	4b	
13	Custom hire (machine work)	13	6,533,448	25	Repairs a	nd mainter	nance	2	25	14,199,637
14	Depreciation and section 179 expense			26	Seeds an	d plants .		2	26	12,542,084
	(see instructions)	14	49,723,830	27	Storage a	and wareho	ousing .	2	27	
15	Employee benefit programs other than			28	Supplies			2	28	6,873,703
	on line 23	15	329,620	29	Taxes			2	29	4,291,725
16	Feed	16	25,567,174	30	Utilities				30	
17	Fertilizers and lime	17	23,410,672	31	Veterinary	y, breeding	, and medic	ine .	31	
18	Freight and trucking	18		32	Other exp	enses (spe	ecify):			
19	Gasoline, fuel, and oil	19	10,496,411	а				3	2a	
20	Insurance (other than health)	20	8,408,867	b					2b	
21	Interest (see instructions):			С				3	2c	
а	Mortgage (paid to banks, etc.)	21a	4,758,564	d				3	2d	
b	Other	21b	3,729,403	е				3	2e	
22	Labor hired (less employment credits)	22	7,753,829	f					32f	
33	Total expenses. Add lines 10 through 3								33	239,598,298
34	Net farm profit or (loss). Subtract line 3	33 fron	n line 9 Total of al	I unmai	ked expe	enses 4			34	-25,343,031
	If a profit, stop here and see instructions	for w	nere to report. If a los	ss, comp	lete line 36	6.			(+)/	Suspended Carryover
35	Reserved for future use.							274,290		
36	Check the box that describes your investigation	tment	in this activity and se	ee instruc	tions for w	vhere to rep	port your los	ss:		
а	All investment is at risk.	b [Some investment is	not at ri	sk.					
For Pa	aperwork Reduction Act Notice, see the	sepa	rate instructions.		Cat.	No. 11346H	1	Sch	nedu	le F (Form 1040) 2022

Schedule F (Form 1040) 2022 Page **2**

Part	Farm Income – Accrual Method (see instructions)		- 1 ago -
37	Sales of livestock, produce, grains, and other products (see instructions)	37	984,604
38a	Cooperative distributions (Form(s) 1099-PATR) . 38a ** 434,621 38b Taxable amount	38b	** 428,682
39a	Agricultural program payments	39b	** 375,664
40 a	Commodity Credit Corporation (CCC) loans: CCC loans reported under election	40a	** 465
b	CCC loans forfeited	40c	** 162
41	Crop insurance proceeds	41	** 129,219
42	Custom hire (machine work) income	42	** 142,201
43	Other income (see instructions)	43	** 533,167
44	Add amounts in the right column for lines 37 through 43 (lines 37, 38b, 39b, 40a, 40c, 41, 42, and 43)	44	8,091
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	9,057

^{*} 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, see instructions for Schedule C (Form 1040).
- Income from breeding, raising, or caring for dogs, cats, or other pet animals. Instead, see instructions for Schedule C (Form 1040).
- Income from managing a farm for a fee or on a contract basis. Instead, see instructions for Schedule C (Form 1040).
- Sales of livestock held for draft, breeding, sport, or dairy purposes. Instead, see instructions for 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 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 F (Form 1040) 2022 Page **2**

Part	Farm Income – Accrual Method (see instructions)		
37	Sales of livestock, produce, grains, and other products (see instructions)	37	125,773,384
38a	Cooperative distributions (Form(s) 1099-PATR) . 38a ** 38,840,222 38b Taxable amount	38b	** 31,564,789
39a	Agricultural program payments	39b	** 7,642,582
40 a	Commodity Credit Corporation (CCC) loans: CCC loans reported under election	40a	** 250,587
b	CCC loans forfeited	40c	** 19,761
41	Crop insurance proceeds	41	** 7,865,230
42	Custom hire (machine work) income	42	** 6,153,050
43	Other income (see instructions)	43	** 13,986,451
44	Add amounts in the right column for lines 37 through 43 (lines 37, 38b, 39b, 40a, 40c, 41, 42, and 43)	44	3,983,338
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	2,318,977

^{*} 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, see instructions for Schedule C (Form 1040).

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

Department of the Treasury Internal Revenue Service

• You were age 65 or older

Credit for the Elderly or the Disabled

Attach to Form 1040 or 1040-SR.

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

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

OMB No. 1545-0074

Attachment Sequence No. **16**

Name(s) shown on return

Total schedules filed = 74,992

You may be able to take this credit and reduce your tax if by the end of 2022:

or

Your	social	security	number

D. I I I		you received taxable disability income.	•	
But you must also meet oth				
		ran figure the credit for you. See instructions.		
Part I Check the Box If your filing status is:	k fo	r Your Filing Status and Age And by the end of 2022: Check o	nlv o	ne box:
ii your minig statao is.		And by the ond of 2022.		iic boxi
Single, Head of household, or	1	You were 65 or older	1	
Qualifying surviving spouse	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 total disability	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	7	
Married filing	8	You were 65 or older and you lived apart from your spouse for all of 2022	8	
separately	9	You were under 65, you retired on permanent and total disability, and you lived apart from your spouse for all of 2022	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 P	Per	manent and Total Disability (Complete only if you checked box 2, 4, 5, 6, or 9 above	e.)	
		s statement for this disability for 1983 or an earlier year, or you filed or gafter 1983 and your physician signed line B on the statement, and	ot a	
-		disabled condition, you were unable to engage in any substantial gainful ac	•	
If you checked this	is b	ox, you don't have to get another statement for 2022.		
 If you didn't check keep the statement 		nis box, have your physician complete the statement in the instructions. You ror your records.	nust	

Schedule R (Form 1040)

Credit for the Elderly or the Disabled

OMB No. 1545-0074

Attachment Sequence No. **16**

Department of the Treasury Internal Revenue Service Attach to Form 1040 or 1040-SR.

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

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

Name(s) shown on return

• You were age 65 or older

Total schedules filed = 74,992

You may be able to take this credit and reduce your tax if by the end of 2022:

or

Your social security number

But you must also meet ot				
	S can figure the credit for you. See instructions.			
Part I Check the Box If your filing status is:	for Your Filing Status and Age And by the end of 2022:	Check onl	lv oı	ne box:
Single,	1 You were 65 or older		1	
Head of household, or Qualifying surviving spouse	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 perma total disability		4	
Married filing jointly	5 Both spouses were under 65, and both retired on permanent a disability		5	
	6 One spouse was 65 or older, and the other spouse was under 65 are on permanent and total disability		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 202	22	8	
separately	9 You were under 65, you retired on permanent and total disability, lived apart from your spouse for all of 2022		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 F	Permanent and Total Disability (Complete only if you checked box 2, 4, 5, 6,	or 9 above	.)	
If: 1 You filed a physici	an's statement for this disability for 1983 or an earlier year, or you tars after 1983 and your physician signed line B on the statement, and		-	
	ed disabled condition, you were unable to engage in any substantial goox			
If you checked this	s box, you don't have to get another statement for 2022.			
	k this box, have your physician complete the statement in the instruction	ns. You m ı	ust	

Schedule R (Form 1040) 2022 Page **2**

Part	II Figure Your	Cradit		. ago _
10	If you checked (in			
			40	
			10	
	Box 8 or 9	\$3,750 J		
	Did you check	Yes. You must complete line 11.		
	box 2, 4, 5, 6,	No. E. Leville, and a life of Part 40 and a classic Part 40.		
	or 9 in Part I?	No. Enter the amount from line 10 on line 12 and go to line 13.		
11	If you checked (in	n Part I):		
		,000 to the taxable disability income of the)		
		s under age 65. Enter the total.		
	• Box 2, 4, or 9, e	enter your taxable disability income.	11	*
	• Box 5, add you	ur taxable disability income to your spouse's		
		y income. Enter the total.		
_				
TIP	For more details o	n what to include on line 11, see Figure Your Credit in the instructions.		
		, 3		
12	If you completed I	ine 11, enter the smaller of line 10 or line 11. All others , enter the amount		
	from line 10 .		12	74,992
13	Enter the followin	g pensions, annuities, or disability income that you		14,002
		if filing jointly) received in 2022.		
а		of social security benefits and nontaxable part of		
u		t benefits treated as social security (see instructions)		
b		ans' pensions and any other pension, annuity, or	-	
		that is excluded from income under any other		
		ee instructions)		
•	•	nd 13b. (Even though these income items aren't		
C		t be included here to figure your credit.) If you didn't		
		e types of nontaxable income listed on line 13a or		
	13b, enter -0- on I	. 11.		
	·	100	-	
14		: from Form 1040 or 1040-SR,		
45	line 11			
15	If you checked (in	·		
	Box 3, 4, 5, 6, or 7			
		\$5,000 J		
16		om line 14. If zero or less, enter		
		16 63,783		
17		ine 16		
18		17	18	65,815
19		rom line 12. If zero or less, stop; you can't take the credit. Otherwise,		
	•		19	70,831
20		15% (0.15)	20	
21	-	Inter the amount from the Credit Limit Worksheet in the instructions	21	
22		derly or the disabled. Enter the smaller of line 20 or line 21. Also enter		
	this amount on So	hedule 3 (Form 1040), line 6d	22	69.845

Schedule R (Form 1040) 2022

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

Schedu	ıle R (Form 1040) 2022		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	10	
	Did you check Yes. You must complete line 11.		
	box 2, 4, 5, 6, or 9 in Part I? No. Enter the amount from line 10 on line 12 and go to line 13.		
	or 9 in Part I? No. Enter the amount from line 10 on line 12 and go to line 13.		
11	If you checked (in Part I):		
• • •	• 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.		
	5		
TIP	For more details on what to include on line 11, see Figure Your Credit in the instructions.		
12	If you completed line 11, enter the smaller of line 10 or line 11. All others , enter the amount		
12	from line 10	12	405,277
13	Enter the following pensions, annuities, or disability income that you		
	(and your spouse if filing jointly) received in 2022.		
а			
	railroad retirement benefits treated as social security (see instructions) 13a 11,915		
b	Nontaxable veterans' pensions and any other pension, annuity, or disability benefit that is excluded from income under any other		
	provision of law (see instructions)		
С	Add lines 13a and 13b. (Even though these income items aren't		
Ū	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,		
45	line 11		
15	If you checked (in Part I): Enter: Box 1 or 2 \$7,500 }		
	Box 3, 4, 5, 6, or 7 \$10,000 }		
	Box 8 or 9		
16	Subtract line 15 from line 14. If zero or less, enter		
	-0		
17	Enter one-half of line 16		
18	Add lines 13c and 17	18	345,451
19	go to line 20	19	143,922
20	Multiply line 19 by 15% (0.15)	20	170,022
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	5,292

Schedule R (Form 1040) 2022

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

SCHEDULE SE (Form 1040)

Department of the Treasury Internal Revenue Service

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

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

Total schedules filed = 23,813,536

Social security number of person with self-employment income

гаг	Sen-Linployment rax		
	If your only income subject to self-employment tax is church employee income , see instructions for home definition of church employee income.	w to re	eport your income
A	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		, but you had
Skip I	ines 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	579,863
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	(22,482
Skip I	ine 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	22,105,015
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	22,458,483
	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	22,419,138
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	22,434,877
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 2022	7	147,000
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 \$147,000 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 6,258		
С	Wages subject to social security tax from Form 8919, line 10 8c 6,566		
d	Add lines 8a, 8b, and 8c	8d	9,493,523
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	21,638,029
11	Multiply line 6 by 2.9% (0.029)	11	22,434,877
12	Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4	12	22,434,877
13	Deduction for one-half of self-employment tax.		
	Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040),		
Dord	line 15		
Part	. ,		
	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 \$6,540.		
14	Maximum income for optional methods	14	6,040
15	Enter the smaller of: two-thirds (2/3) of gross farm income¹ (not less than zero) or \$6,040. Also, include	17	0,040
	this amount on line 4b above	15	12,680
	arm Optional Method. You may use this method only if (a) your net nonfarm profits³ were less than \$6,540		
	so less than 72.189% of your gross nonfarm income, ⁴ and (b) you had not earnings from self-employment		
	east \$400 in 2 of the prior 3 years. Caution: You may use this method no more than five times.	40	
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	13,965
	Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B. 3 From Sch. C, line 31; and Sch. K-1 (Form 1085), 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 106 vould have entered on line 1b had you not used the optional method.	5), DOX	14, code C.

SCHEDULE SE (Form 1040)

Department of the Treasury Internal Revenue Service

Self-Employment Tax

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

Attachment Sequence No. 17

OMB No. 1545-0074

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

Total schedules filed = 23,813,536

Social security number of person with self-employment income

Part	Self-Employment Tax		
	If your only income subject to self-employment tax is church employee income , see instructions for how e definition of church employee income.	v to re	port your income
A	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	15,820,263
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	(250,972
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	830,356,234
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	780,952,717
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	784,490,679
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	785,252,352
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 2022	7	147,000
8a b	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$147,000 or more, skip lines 8b through 10, and go to line 11		
С	Wages subject to social security tax from Form 8919, line 10 8c 66,211		
d	Add lines 8a, 8b, and 8c	8d	480,369,126
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	58,245,121
11	Multiply line 6 by 2.9% (0.029)	11	22,772,322
12	Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4	12	81,017,483
13	Deduction for one-half of self-employment tax.		
	Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040),		
Part	Ine 15		
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 \$6,540.		
14	Maximum income for optional methods	14	6,040
15	Enter the smaller of: two-thirds (2/3) of gross farm income¹ (not less than zero) or \$6,040. Also, include		
	this amount on line 4b above	15	79,403
and al	rm Optional Method. You may use this method only if (a) your net nonfarm profits ³ were less than \$6,540 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	75,315
¹ From	Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.		
² From you w	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) ould have entered on line 1b had you not used the optional method.	5), box	14, code C.

Schedu	Schedule 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	28,601	
19	If line 18 is more than zero, multiply line 18 by 92.35% (0.9235); otherwise, enter the amount from line 18	19	28,601	
20	Enter the portion of lines 15 and 17 that can be attributed to March 27, 2020, through December 31,			
	2020	20		
21	Combine lines 19 and 20	21	28,604	
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		
23	Multiply line 22 by 92.35% (0.9235)	23		
24	Add lines 21 and 23	24	28,604	
25	Enter the smaller of line 9 or line 24	25	28,192	
26	Multiply line 25 by 6.2% (0.062). Enter here and see the instructions for line 12e of Schedule 3 (Form			
	1040)	26	28,192	

Schedule SE (Form 1040) 2020

Schedule SE (Form 1040) 2020 Attachment Sequence No. 1			Page 2
Par	Maximum Deferral of Self-Employment Tax Payments		
If line	e 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	807,499
19	If line 18 is more than zero, multiply line 18 by 92.35% (0.9235); otherwise, enter the amount from line 18	19	745,727
20	Enter the portion of lines 15 and 17 that can be attributed to March 27, 2020, through December 31,		
	2020	20	
21	Combine lines 19 and 20	21	745,740
If line	e 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	
23	Multiply line 22 by 92.35% (0.9235)	23	
24	Add lines 21 and 23	24	745,740
25	Enter the smaller of line 9 or line 24	25	532,509
26	Multiply line 25 by 6.2% (0.062). Enter here and see the instructions for line 12e of Schedule 3 (Form		
	1040)	26	33,016

Schedule SE (Form 1040) 2020

Total schedules filed = 47,403,924

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

SCHEDULE 8812 (Form 1040)

Department of the Treasury

Internal Revenue Service

Credits for Qualifying Children and Other Dependents

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

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

OMB No. 1545-0074

2022

Attachment Sequence No. **47**

Schedule 8812 (Form 1040) 2022

Name(s)	Name(s) shown on return							
Davi	Obild Too One dis and One distant Other Demandents							
Par	•		47 4EC 00E					
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	. 1	47,156,885					
2a	Enter income from Puerto Rico that you excluded							
b	Enter the amounts from lines 45 and 50 of your Form 2555							
c	Enter the amount from line 15 of your Form 4563							
d	Add lines 2a through 2c		86,974					
3	Add lines 1 and 2d		47,162,879					
4	Number of qualifying children under age 17 with the required social security number 4 37,273,996							
5	Multiply line 4 by \$2,000	. 5	37,273,998					
6	Number of other dependents, including any qualifying children who are not under age							
	17 or who do not have the required social security number							
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. residents.	ent						
	alien. Also, do not include anyone you included on line 4.							
7	Multiply line 6 by \$500		16,313,738					
8	Add lines 5 and 7	. 8	47,146,961					
9	Enter the amount shown below for your filing status.							
	• Married filing jointly—\$400,000		47,229,292					
	• All other filing statuses—\$200,000 \(\int \)	. 9	41,229,292					
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		4 407 700					
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.		1,465,738					
11	Multiply line 10 by 5% (0.05)		1,465,738					
12	Is the amount on line 8 more than the amount on line 11?		46,314,288					
	No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit	dit.						
	Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.							
	Yes. Subtract line 11 from line 8. Enter the result.							
13	Enter the amount from the Credit Limit Worksheet A		37,582,648					
14	Enter the smaller of line 12 or 13. This is your child tax credit and credit for other dependents	. 14	37,628,653					
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.							
	If the amount on line 12 is more than the amount on line 14, you may be able to take the addition							
	on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NI	R through	line 27					
	(also complete Schedule 3, line 11) before completing Part II-A.							

Cat. No. 59761M

Total schedules filed = 47,403,924

SCHEDULE 8812 (Form 1040)

Department of the Treasury

Internal Revenue Service

Name(s) shown on return

Credits for Qualifying Children and Other Dependents

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

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

OMB No. 1545-0074

2022

Attachment Sequence No. 47

Your social security number

Pai	t I Child Tax Credit and Credit for Other Dependents		
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	. 1	5,153,863,824
2a	Enter income from Puerto Rico that you excluded		
b	Enter the amounts from lines 45 and 50 of your Form 2555		
c	Enter the amount from line 15 of your Form 4563		
d	Add lines 2a through 2c	. 2d	8,907,542
3	Add lines 1 and 2d	. 3	5,162,771,366
4	Number of qualifying children under age 17 with the required social security number 4 63,622		
5	Multiply line 4 by \$2,000	. 5	128,750,266
6	Number of other dependents, including any qualifying children who are not under age		
	17 or who do not have the required social security number		
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. residen	nt	
	alien. Also, do not include anyone you included on line 4.		
7	Multiply line 6 by \$500		10,074,951
8	Add lines 5 and 7	. 8	138,825,217
9	Enter the amount shown below for your filing status.		
	• Married filing jointly—\$400,000		44 004 057 57
	• All other filing statuses—\$200,000 \int	. 9	14,281,257,572
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.		847,766,541
11	Multiply line 10 by 5% (0.05)		42,388,327
12	Is the amount on line 8 more than the amount on line 11?		135,988,491
	No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax cred	it.	
	Skip Parts II-A and II-B. Enter -0- on lines 14 and 27.		
	Yes. Subtract line 11 from line 8. Enter the result.		
13	Enter the amount from the Credit Limit Worksheet A		431,221,016
14	Enter the smaller of line 12 or 13. This is your child tax credit and credit for other dependents	. 14	82,118,237
	Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.		
	If the amount on line 12 is more than the amount on line 14, you may be able to take the additional		
	on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR	through	line 27
	(also complete Schedule 3, line 11) before completing Part II-A.		

Schedule 8812 (Form 1040) 2022 Page **2**

Part	IFA Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line	27	
16a	Subtract line 14 from line 12. If zero, stop here ; you cannot take the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27	16a	19,214,388
b	Number of qualifying children under 17 with the required social security number: x \$1,500.		
	Enter the result. If zero, stop here ; you cannot claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27	16b	17,632,514
17	Enter the smaller of line 16a or line 16b	17	17,621,444
18a	Earned income (see instructions)	1/	11,021,111
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	17,210,466
	Next. On line 16b, is the amount \$4,500 or more?		, , , , , , , , , , , , , , , , , , , ,
	■ No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27. Otherwise, go to line 21.		
Part		s of F	Puerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, 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 . 22 658,746		
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 27, 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	226,451
26	Enter the larger of line 20 or line 25	26	1,660,666
<u> </u>	Next, enter the smaller of line 17 or line 26 on line 27.		
	I-C Additional Child Tax Credit		47.040.500
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28	27	17.219.508

Schedule 8812 (Form 1040) 2022 Page **2**

Part	II-A Additional Child Tax Credit for All Filers		
Cautio	on: If you file Form 2555, you cannot claim the additional child tax credit.		
15	Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line	27	
16a	Subtract line 14 from line 12. If zero, stop here ; you cannot take the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27	16a	49,358,788
b	Number of qualifying children under 17 with the required social security number: x \$1,500.		
	Enter the result. If zero, stop here ; you cannot claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27	16b	48,574,587
	TIP: The number of children you use for this line is the same as the number of children you used for line 4.		40.000.474
17	Enter the smaller of line 16a or line 16b	17	40,036,471
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.		
20	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result	20	T O 000 040
20	Next. On line 16b, is the amount \$4,500 or more?	20	73,080,849
	No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the		
	smaller of line 17 or line 20 on line 27.		
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.		
	Otherwise, go to line 21.		
Part	II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Resident	s of F	Puerto Rico
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2,		
	boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If		
	your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, 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 . 22 749,308		
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 27, 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	432,783
26	Enter the larger of line 20 or line 25	26	4,818,386
	Next, enter the smaller of line 17 or line 26 on line 27.		
Part	II-C Additional Child Tax Credit		
27	This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28.	27	32,036,369

Form **461**

Limitation on Business Losses

OMB No. 1545-2283

2022

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**

Name((s) shown on return Total Forms Filed = 52,092	dentifying nu	mber
Par	Total Income/Loss Items See instructions if you are filing a tax return other than Form 1040 or 1040-SR.		
1	Reserved for future use	. 1	
2	Enter amount from Schedule 1 (Form 1040), line 3		
3	Enter amount from Form 1040 or 1040-SR, line 7		
4	Enter amount from Schedule 1 (Form 1040), line 4		
5	Enter amount from Schedule 1 (Form 1040), line 5		
6	Enter amount from Schedule 1 (Form 1040), line 6		
7	Reserved for future use		
8	Enter other income, gain, or losses from a trade or business not reported on lines 1 through 7		2,631
9	Combine lines 1 through 8		52,074
Pari 10 11	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 Enter any losses or deductions reported on lines 1 through 8 that are not attributable to a trade business. See instructions	or	24.613 19,684
12	Subtract line 11 from line 10	. 12	36,179
Part	Limitation on Losses		
13	If line 12 is a negative number, enter it here as a positive number. If line 12 is a positive number, enter		
	here as a negative number	. 13	36,179
14	Add lines 9 and 13	. 14	52,061
15	Enter \$270,000 (or \$540,000 if married filing jointly)	. 15	52,092
16	Add lines 14 and 15. If less than zero, enter the amount from line 16 as a positive number on Schedu 1 (Form 1040), line 8p. See instructions if you are filing a tax return other than a Form 1040 or 1040-S If zero or greater, do not attach this form to your tax return	ıle R.	49.404
	rivacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 16654	10	Form 461 (20

Form **461**

Limitation on Business Losses

OMB No. 1545-2283

2022

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**

Name(Total Forms Filed = 52,092	lentifying r	number
Par	Total Income/Loss Items See instructions if you are filing a tax return other than Form 1040 or 1040-SR.		
1	Reserved for future use	. 1	
2	Enter amount from Schedule 1 (Form 1040), line 3	2	
3	Enter amount from Form 1040 or 1040-SR, line 7	3	
4	Enter amount from Schedule 1 (Form 1040), line 4	4	
5	Enter amount from Schedule 1 (Form 1040), line 5	5	
6	Enter amount from Schedule 1 (Form 1040), line 6	6	
7	Reserved for future use	7	
8	Enter other income, gain, or losses from a trade or business not reported on lines 1 through 7	8	2,303,092
9	Combine lines 1 through 8	9	-23,388,760
Par	Adjustment for Amounts Not Attributable to Trade or Business See instructions if you are filing a tax return other than Form 1040 or 1040-SR.		
10	Enter any income or gain reported on lines 1 through 8 that is not attributable to a trade or business .	10	61,670,054
11	Enter any losses or deductions reported on lines 1 through 8 that are not attributable to a trade of business. See instructions		1,967,886
12	Subtract line 11 from line 10	12	59,702,168
Part			
13	If line 12 is a negative number, enter it here as a positive number. If line 12 is a positive number, enter here as a negative number		-59,702,168
14	Add lines 9 and 13	14	-83,090,928
15	Enter \$270,000 (or \$540,000 if married filing jointly)	15	22,368,974
16	Add lines 14 and 15. If less than zero, enter the amount from line 16 as a positive number on Schedul 1 (Form 1040), line 8p. See instructions if you are filing a tax return other than a Form 1040 or 1040-SF		
	If zero or greater, do not attach this form to your tax return	16	-65,209,226
or P	rivacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 16654		Form 461 (20

8

Form											OMB No. 1545-0074	
Depart	anuary 2021) ment of the Treasury I Revenue Service			► Go to ww	w.irs.gov/Form965A	A for instructions ar	nd the latest info	ormation.			Attachment Sequence No. 76	4
	eck this box if this is an a	mended repor	t								>	
Name	of taxpayer with a net 965 tax lia	ability T	otal Form	ns Filed =	20,874				Identifying nur	nber	Taxable year of reporting	
Par	Report of Net 9	965 Tax Liab	ility and	d Election T	o Pay in Installı	ments						
	(a) Year of Section 965(a) Inclusion, Liability Assumed, or Liability Triggering Event (see instructions)	(b) Taxpayer's Net Ta with all 965 amour (see instructi		c Liability	Taxpayer's N wit 965 a	(c) let Tax Liability thout mounts tructions)		(d) Net 965 Tax Liability otract column (c) from column (b))		Deferre (line total	(e) ation Shareholder Total d Net 965 Tax Liability from Part III, column (g), ee instructions)	
1	2017											1
2	2018											2
3	2019											3
4	2020											4
5												5
6												6
7												7
8												8
	(f) Net 965 Tax Liability eligible for installment payment (subtract column (e) from colu see instructions)	Insta t election Ele	g) Illment ction ade	to be paid (if column (g) is	(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	Transf	(j) Net 965 Tax Liab erred (Out), Tran sequent Adjustm (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												8
Par	Record of Amo	unt of Net 9	65 Tax	Liability Pa	id by the Taxpa	yer (see instruct	ions)					'
	(a) Year of Section 965(a) Inclusion, Liability Assumed, or Triggering Event		b) or 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
												

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

Cat. No. 71277H

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

				,			,oa (t	Jaoanao (J. 4011	110)			
Form	965-A				Indivi	dual Report	of Net 965	Tax Liab	ility			OMB No. 1545-007	4
,	anuary 2021)											Attachment	
	ment of the Treasury I Revenue Service				► Go to www	w.irs.gov/Form965A	A for instructions ar	d the latest info	ormation.			Sequence No. 76	١
	eck this box if this is an a	mender	d report	<u> </u>									П
	of taxpayer with a net 965 tax lia		и тороп						• • •	Identifying nun	nher	Taxable year of reporting	ш
1401110	or taxpayor with a not ooo tax no	ability	To	otal For	ms Filed =	20,874				idonarying nui		Taxable year of reporting	
Par	TI Report of Net 9	965 Tax	x Liabi	ility an	d Election T	o Pay in Installr	ments						
	(a) Year of Section 965(a) Inclusion, Liability Assumed, or Liability Triggering Event (see instructions)		Taxpayer	(b)	ax Liability	(u Taxpayer's N with 965 ar	c) et Tax Liability hout mounts tructions)	Net 9 (subtract colu	(d) 165 Tax Liabi ımn (c) from		Deferre (line tota	(e) ration Shareholder Total ad Net 965 Tax Liability 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
			to be paid (if column (g) is	(h) 5 Tax Liability in full for Year 1 "No," enter amount column (f))			Transfe or Subse	(j) Net 965 Tax Liability Transferred (Out), Transferred In, or Subsequent Adjustments, if any (see instructions)		(k) Tax Identification Number of buyer/transferee or seller/transferor			
1													1
2													2
3													3
4													4
5													5
6													6
7													7

Part II Record of Amount of Net 965 Tax Liability Paid by the Taxpayer (see instructions)

				,			
	(a) Year of Section 965(a) Inclusion, Liability Assumed, or Triggering Event	(b) Paid for Year 1	(c) Paid for Year 2	(d) Paid for 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

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

8

Cat. No. 71277H

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

Form 965-A (Rev. 1-2021)

		<u> </u>										
Par	II Re	cord of Amount of	Net 965 Tax Liak	oility Paid by th	ne Taxpayer (continue	<u>d)</u>						
		(g) Paid for Year 6	(h) Paid for Yea		(i) Paid for Year 8	Net 965 Tax Liability F (see instru	Remaining Unpaid ctions)	F	Net Paid for	(I) 965 Ta r the R	k) ax Liability eporting Year	
1												1
2												2
3												3
4												4
_5												5
6												6
7												7
8												8
Tota							,277				3,056	
Part	S (Corporation Share ection To Defer Suc	holder: Report o ch Net 965 Tax Li	f Calculation ability	of Net 965 Tax Liabi	lity Related to 965	Amounts Allo	cated I	From	n an	S Corporation	and
	Year of 965(a) Inclusion	(a) S Corporati	on 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 Lial related to 965 amou this S Corporation (column (d) from col	nts from subtract	Defe Elect Mac	erral tion	(g) Deferred Net 965 Tax (if column (f) is "Yes," amount from colum	' enter
1	2017											
'	2017											
Tota	ıl									•	2,000	
2	2018											
-	2010											
Tota	ıl								<u></u>	>	60	
3	2019							-				
Tota	ıl									•	*	
									_			
4	2020											
Tota	.I										*	
Tota	<u></u>					<u> </u>			• •		Form 965-A (Rev.)	
		Tay Vaar 2021	^								Form 903-A (Rev.)	1-2021\

Tax Year 2021

Tax Year 2022

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

Form 965-A (Rev. 1-2021)

Par	II Re	cord of Amount of	Net 965 Tax Liab	ility Paid by th	e Taxpayer (continued	a)						
	ŀ	(g) Paid for Year 6	(h) Paid for Yea	ur 7	(i) Paid for Year 8	Net 965 Tax Liability F (see instru	Remaining Unpaid ctions)	Р	Net aid fo	(I) 1965 Ta or the R	k) ax Liability eporting Year	
1												1
2												2
3												3
4												4
5												5
6												6
7												8
8 Tota	ıle					1,22	25,086			:	211,291	0
Part	∭ S (Corporation Share	holder: Report o	f Calculation of ability	of Net 965 Tax Liabi	lity Related to 965	Amounts Allo	cated F	ror	n 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 Lia related to 965 amou this S Corporation (column (d) from col	nts from subtract	Defe Elec Ma	tion	(g) Deferred Net 965 Tax (if column (f) is "Yes," amount from colum	" enter
1	2017											
•	2017											
Tota										>	2,818,053	
2	2018											
Tota	l									•	74,149	
3	2019											
Tota	l									•	*	
4	2020											
Tota	1									•	*	
1012		Tax Year 2021									Form 965-A (Rev.	1-2021)
		Tax Year 2021	0	* Data not show	n because of the small	number of sample ret	urns on which t	hey are	bas	ed.	. 5/111 000 71 (1160).	. 2021

Form 965-A (Rev. 1-2021)

Part			ed Net 965 Tax Liability Relate the liability is fully paid)	ed to 965 Amounts Allocated F	rom S Corporations		
	(a) Election or Transfer Year		(b) S Corporation Na	me	(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	ure 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
Tota	l					E52122	

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

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

Form 965-A (Rev. 1-2021)

Part IV Annual Report of Deferred Net 965 Tax Liability Related to 965 Amounts Allocated From S Corporations (required every year until the liability is fully paid)

	(a) Election or Transfer Year		(b) S Corporation Nam	е	(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	ure 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
Tota	l					E52122	

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

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

-orm **982**

(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.

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

OMB No. 1545-0046

Attachment Sequence No. **94**

Identifying number Name shown on return Total Forms Filed = 82,659 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) d 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 Reduction of Tax Attributes. You must attach a description of any transactions resulting in the reduction in Part II 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 3.154 5 That you elect under section 108(b)(5) to apply first to reduce the basis (under section 1017) of 5 Applied to reduce any net operating loss that occurred in the tax year of the discharge or carried 6 6 242 Applied to reduce any general business credit carryover to or from the tax year of the discharge . 7 0 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 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 13,120 Applied to reduce the basis of your principal residence. Enter amount here ONLY if line 1e is 10b 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 **b** Land used or held for use in a trade or business of farming 11b 0 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 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 and ending for the tax year beginning 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) Note: You must attach a description of the transactions resulting in the nonrecognition of gain under section 1081.

Cat. No. 17066E

982 Form

(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.

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

OMB No. 1545-0046

Attachment Sequence No. **94**

Name shown on return Identifying number Total Forms Filed = 82,659 Part I **General Information** (see instructions) Amount excluded is due to (check applicable box(es)): П С 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 4 109,682 5 That you elect under section 108(b)(5) to apply first to reduce the basis (under section 1017) of 5 6 Applied to reduce any net operating loss that occurred in the tax year of the discharge or carried 39,454 Applied to reduce any general business credit carryover to or from the tax year of the discharge . 7 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 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 261,033 b Applied to reduce the basis of your principal residence. Enter amount here ONLY if line 1e is 10b 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 0 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 . . . 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 of _____ (State of incorporation)

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

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

Your name

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form2106 for instructions and the latest information.

Occupation in which you incurred expenses

Attachment Sequence No. **129**

Social security number

10

Cat. No. 11700N

361,110

Form **2106** (2022)

Total Forms Filed = 376.518 Part I **Employee Business Expenses and Reimbursements** Column A Column B **Step 1 Enter Your Expenses** Other Than Meals Meals 192,274 1 Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.) . . . 1 2 Parking fees, tolls, and transportation, including trains, buses, etc., that didn't involve 2 116,771 3 Travel expense while away from home overnight, including lodging, airfare, car rental, etc. Don't include meals 3 89,530 4 Business expenses not included on lines 1 through 3. Don't include meals 4 230,543 128,335 5 **5** Meals expenses (see instructions) 6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column 6 360.750 Note: If you weren't reimbursed for any expenses in Step 1, skip line 7 and enter the amounts 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 of 5,600 **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 8 357.791 128.335 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 128.335 10 Add the amounts on line 9 for both columns and enter the total here. Also, enter the total on Schedule 1

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

on where to enter the total on your return

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

(Form 1040), line 12. Employees with impairment-related work expenses, see the instructions for rules

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)

2022

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Total Forms Filed =

Your name

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form2106 for instructions and the latest information.

376.518

Occupation in which you incurred expenses

Attachment Sequence No. 129

Social security number

10

Cat. No. 11700N

3,462,240 Form **2106** (2022)

Part I **Employee Business Expenses and Reimbursements** Column A Column B **Step 1 Enter Your Expenses** Other Than Meals Meals 1,519,295 1 Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.) . . . 1 2 Parking fees, tolls, and transportation, including trains, buses, etc., that didn't involve 2 261,471 3 Travel expense while away from home overnight, including lodging, airfare, car rental, 3 266,083 4 Business expenses not included on lines 1 through 3. Don't include meals 1,185,428 396,023 5 6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column 6 3,232,277 Note: If you weren't reimbursed for any expenses in Step 1, skip line 7 and enter the amounts 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 of 14,376 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 3,219,406 395.415 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 242.834

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

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

10 Add the amounts on line 9 for both columns and enter the total here. Also, enter the total on Schedule 1 (Form 1040), line 12. Employees with impairment-related work expenses, see the instructions for rules

Form 2106 (2022) Page **2**

Part	II venicie Expenses								
	on A-General Information (You must complete the	is sec	tion if you are		(a) '	Vehicle 1		b) Vehi	cle 2
	ng vehicle expenses.)				.,		`		
11	Enter the date the vehicle was placed in service					/			
12	Total miles the vehicle was driven during 2022				_	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	L		miles
18	Was your vehicle available for personal use during		-					Yes	☐ No
19	Do you (or your spouse) have another vehicle available		•					_ Yes	☐ No
20	Do you have evidence to support your deduction?							Yes	☐ No
21	If "Yes," is the evidence written?							Yes	□ No
	on B-Standard Mileage Rate (See the instruc						Section	on or 56	ection C.)
22	Multiply line 13 by 58.5¢ (0.585) (January 1–June							474	000
Cooti	result here and on line 1					<u> </u>	22	1/4	,082
Secu	on C—Actual Expenses		(a) \/a	hiolo 1		1	h) \/al	hiele O	
			(a) Ve	nicie i			b) ver	hicle 2	
00	Casalina ail ranaira vahiala insuranaa ata	00							
23 24a	Gasoline, oil, repairs, vehicle insurance, etc Vehicle rentals	23 24a							
24a b	Inclusion amount (see instructions)	24a				-	-		
	Subtract line 24b from line 24a	24b							
C		240							
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		21	,386				
	on D—Depreciation of Vehicles (Use this section		if you owned the v			ompletina Se	ction	C for the	e vehicle.
				hicle 1		,		hicle 2	<u> </u>
			(-, - : -			,	1		
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								
02	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								
	skipped lines 36 and 37, enter the amount from								
	line 35. Also enter this amount on line 28 above	38							

Form 2106 (2022) Page **2**

Part	II Vehicle Expenses						
	on A-General Information (You must complete th	is sec	tion if you are		(a) Vehicle 1	(b) \	/ehicle 2
claimi	ng vehicle expenses.)				(a) Verlicie i	(D) V	
11	Enter the date the vehicle was placed in service			11	/ /	/	/
12	Total miles the vehicle was driven during 2022			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						
19	Do you (or your spouse) have another vehicle avai						es 🗌 No
20	Do you have evidence to support your deduction?						_
21			<u> </u>				
Secti	on B-Standard Mileage Rate (See the instruct				•		r Section C.)
22	Multiply line 13 by 58.5¢ (0.585) (January 1–June 3						
	result here and on line 1					22 1	,256,555
Secti	on C—Actual Expenses						
			(a) Vehic	ile 1		(b) Vehicle	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	•	26					
27	Add lines 23, 24c, and 25	27					
28	Depreciation (see instructions)	28					
29	Add lines 27 and 28. Enter total here and on line 1	29		232	230		
	on D—Depreciation of Vehicles (Use this section		if you owned the veh			ection C for	r the vehicle)
	Depresion of Fernance (ede and edeale)	01119	(a) Vehic			(b) Vehicle	
			(4)			(1)	_
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						
	skipped lines 36 and 37, enter the amount from						
	line 35 Alea enter this amount on line 38 above	20					

□ VOID L	_ CORRECTED				
Name, address, and ZIP code of RIC or REIT	OMB No. 1545-0123	Notice to Shareholder of Undistributed Long-Term Capital Gains			
Total Forms Filed = 30,969	Form 2439 (Rev. November 2021)	For calendar year 20 of the regulated investment co real estate investment	mpany (RIC) or the trust (REIT)		
		beginning, ending,			
Identification number of RIC or REIT	1a Total undistributed long-t	erm capital gains			
	30,773		Copy A		
Shareholder's identifying number	1b Unrecaptured section 125	50 gain	Attach to		
	400		Form 1120-RIC or Form 1120-REIT.		
Shareholder's name, address, and ZIP code	1c Section 1202 gain	1d Collectibles (28%) gain			
	*	0	For Instructions		
	2 Tax paid by the RIC or RE	EIT on the box 1a gains	and Paperwork Reduction Act Notice, see back of		
	28,977		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.

	RREGIED		
Name, address, and ZIP code of RIC or REIT	OMB No. 1545-0123	Notice to Shareholder of Long-Term Capita	
Total Forms Filed = 30,969	Form 2439 (Rev. November 2021)	For calendar year 20, of the regulated investment come real estate investment true beginning, 20 ending, 20	pany (RIC) or the ust (REIT)
Identification number of RIC or REIT	1a Total undistributed long-te 41,238	erm capital gains	Сору А
Shareholder's identifying number	1b Unrecaptured section 125	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	For Instructions
	2 Tax paid by the RIC or RE 7,112	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.

Form **2441**

Department of the Treasury Internal Revenue Service

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.

A You can't claim a credit for child and dependent care expenses if your filing status is married filing separately unless you meet the

OMB No. 1545-0074

2022

Attachment Sequence No. 21

Name(s) shown on return

Total Forms Filed =

6,483,211

Your social security number

require	ements listed	in the	instructions	under <i>Mari</i>	ried Perso	ons Filing Sep	oarately. If yo	u mee	t these requireme	nts, cl	heck t	his box
B If y	ou or your sp	ouse	was a studen	t or was di	sabled du	ıring 2022 an	d you're ente	ering d	eemed income of	\$250	or \$50	0 a month on
Form 2	2441 based or	the in	ncome rules li	sted in the	instructio	ns under <i>If Yo</i>	ou or Your Sp	ouse V	Vas a Student or D	isable	d, che	ck this box .
Part									mplete this par			
	If you	have	more than	three care	e provide	ers, see the	instruction	s and	check this box			<u> </u>
1 (8	a) Care provider': name	s	(number, str	(b) Ad eet, apt. no., o		nd ZIP code)	(c) Identifying r (SSN or El		(d) Was the care pr household employe For example, this gene nannies but not dayo (see instructi	e in 202 erally inc are cen	22? cludes	(e) Amount paid (see instructions)
									Yes	□ No	o	6,312,097
									Yes	□ No)	
									Yes	☐ No)	
					1	— No ——		mplote	only Part II belov	W	•	
		don	Did you red endent care	eive		140	COI	iibiere	only Fart II Delov	٧.		
		uep	endent care	Dellellis:		— Yes ——	Coi	mplete	Part III on page 2	2 next		
be pro	ovided in 2023 Cre	3, doi	n't include th or Child and	ese expen I Depend	ses in co	lumn (d) of li e Expenses	ne 2 for 2022 s	2. See	the instructions.			
2	information a	bout y	your qua lityin	g person(s). It you na	ave more than	three quality	ing pei	sons, see the instr			
	First	(a)	Qualifying person	on's name	Last		(b) Qualifying p social security r		(c) Check here if qualifying person wa age 12 and was dis (see instruction	ıs over abled.	you in 20	nualified expenses incurred and paid 022 for the person ted in column (a)
							S056		78,842			5,992,330
							S057		18,980			2,109,057
3			, ,				-		qualifying person ınt from line 31	3		5,793,769
4			d income. Se							4		6,426,759
5									e was a student			0.000.405
			see the instru	-	others,	enter the am	ount from lin	e4.		5		3,960,165
6			t of line 3, 4,					1 1		6		5,750,711
7			from Form 1					7				
8		8 the	e decimal am			nat applies t		t on III	ne /.			
	If line 7 is:	not	Decimal	If line 7 is	: But not	Decimal	If line 7 is:	ut not	Decimal			
	Over ove		amount is	Over	over	amount is		ver	amount is			
	\$0-15,0	000	.35	\$25,000—	27,000	.29	\$37,000—39	9,000	.23			
	15,000-17,0		.34	27,000—	•	.28	39,000-4	-	.22	8		х.
	17,000—19,0		.33	29,000—	•	.27	41,000—43	-	.21			/\ I
	19,000-21,0		.32	31,000—	•	.26	43,000-N	o limit	.20			
	21,000-23,0		.31	33,000—	•	.25						
_	23,000 — 25,0		.30	35,000—		.24					_	740.040
9a			the decimal a							9a	5	,749,046
b	, ,		•						nter the amount 9c	OF		*
_	Add lines 9a						•			9b		
C 10			enter the amount			 Norkshoot in t			1	9с		
10												
11									line 10 here and	11		5,624,565
	anerwork Pe								Cot No. 11960M			Corr. 2441 (2022)

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

2441

Department of the Treasury Internal Revenue Service

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.

6,483,211

OMB No. 1545-0074 Attachment

Name(s) shown on return

Total Forms Filed =

Your social security number

Caution: If the care provider is your household employee, you may owe employment taxes. For details, see the Instructions Schedule H (Form 1040). If you incurred care expenses in 2022 but didn't pay them until 2023, or you repaid in 2022 for car be provided in 2023, don't include these expenses in 2022 but didn't pay them until 2023, or you repaid in 2022 for car be provided in 2023, don't include these expenses in 2022 but didn't pay them until 2023, or you repaid in 2022 for car be provided in 2023, don't include these expenses in 2022 but didn't pay them until 2023, or you repaid in 2022 for car be provided in 2023, don't include these expenses in column (d) of line 2 for 2022. See the instructions. Part II											unless you meet the
Persons or Organizations Who Provided the Care—You must complete this part. If you have more than three care providers, see the instructions and check this box 1 (a) Care provider's name (b) Address (b) Address (c) Identifying number (c) Identifying	B If y	ou or your sp	ouse v	vas a stud	lent or was di	sabled di	uring 2022 ar	nd you're entering	deemed income of	of \$250	or \$500 a month on
If you have more than three care providers, see the instructions and check this box 1 (a) Care provider's (b) Address (c) Identifying number (c) Identifying numbe								<u> </u>			ed, check this box .
1 (a) Care provider's name	Part										
Yes No No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No Ves No No Ves No No No No No No No N	1 (a		s	(number,			and ZIP code)		er household emplo For example, this ge nannies but not da	yee in 20 nerally in ycare cer	(e) Amount paid
Did you receive dependent care benefits?									Yes	□ N	0 44,899,004
Did you receive dependent care benefits? Yes			_						Yes	□ N	0
Caution: If the care provider is your household employee, you may owe employment taxes. For details, see the Instructions Schedule H (Form 1040). If you incurred care expenses in 2022 but didn't pay them until 2023, or if you prepaid in 2022 for care be provided in 2023, don't include these expenses in column (d) of line 2 for 2022. See the instructions. Credit for Child and Dependent Care Expenses Credit for Child and Check this box (d) Check here if the (d) Qualifided Expense or social security number and check this box (e) Check here if the (d) Qualifided Expense or social security number and check this box (e) Check here if the (d) Qualifided Expense or social security number and check this box (e) Check here if the (d) Qualifided Expense or social security number and check this box (e) Check here if the									Yes	□ N	0
Caution: If the care provider is your household employee, you may owe employment taxes. For details, see the Instructions Schedule H (Form 1040). If you incurred care expenses in 2022 but didn't pay them until 2023, or if you prepaid in 2022 for care be provided in 2023, don't include these expenses in column (d) of line 2 for 2022. See the instructions. Credit for Child and Dependent Care Expenses						}	— No —	Comple	ete only Part II belo	ow.	
Schedule H (Form 1040). If you incurred care expenses in 2022 but didn't pay them until 2023, or if you prepaid in 2022 for care be provided in 2023, don't include these expenses in column (d) of line 2 for 2022. See the instructions. Credit for Child and Dependent Care Expenses			depe	endent ca	re benefits?		— Yes ——	Comple	ete Part III on page	2 nex	t.
(a) Qualifying person's name First Last (b) Qualifying person's social security number social social security number social security number social security number social s	Sched be pro	lule H (Form ovided in 202 II Cre	1040). 3, don dit fo	If you include r Child a	curred care e these expen nd Depend	xpenses ses in co ent Car	in 2022 but blumn (d) of li e Expense	didn't pay them ine 2 for 2022. S	until 2023, or if yoee the instructions	ou prep s.	paid in 2022 for care to
(a) Qualifying person's name First Last (b) Qualifying person's ocial security number age 12 and was disabled. (see instructions) and (_2_	Information a	bout y	our qualify	ing person(s). If you h	ave more thar	three qualifying p			ns and check this box
3 Add the amounts in column (d) of line 2. Don't enter more than \$3,000 if you had one qualifying person or \$6,000 if you had two or more persons. If you completed Part III, enter the amount from line 31 4 Enter your earned income. See instructions 5 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		First	(a)	Qualifying po	erson's name	Last			n's qualifying person ver age 12 and was d	was over lisabled.	in 2022 for the person
3 Add the amounts in column (d) of line 2. Don't enter more than \$3,000 if you had one qualifying person or \$6,000 if you had two or more persons. If you completed Part III, enter the amount from line 31 3 17,949,381 4 Enter your earned income. See instructions 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								S056	79		30,661,614
3 Add the amounts in column (d) of line 2. Don't enter more than \$3,000 if you had one qualifying person or \$6,000 if you had two or more persons. If you completed Part III, enter the amount from line 31 3 17,949,381 4 Enter your earned income. See instructions 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											
or \$6,000 if you had two or more persons. If you completed Part III, enter the amount from line 31 4 Enter your earned income. See instructions											10,234,189
5 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	3			•	•			•			
or was disabled, see the instructions); all others, enter the amount from line 4											627,721,104
7 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11	5										330,333,724
8 Enter on line 8 the decimal amount shown below that applies to the amount on line 7. If line 7 is: But not Decimal Over Sum Decimal Over Sum Decimal Over Sum Decimal Over Sum Over Over Sum Over	6									6	17,625,176
If line 7 is:	-							_		_	
Over But not over Decimal amount is Over Decimal amount is Over But not over Decimal amount is \$0-15,000 .35 \$25,000-27,000 .29 \$37,000-39,000 .23 15,000-17,000 .34 27,000-29,000 .28 39,000-41,000 .22 17,000-19,000 .33 29,000-31,000 .27 41,000-43,000 .21 19,000-21,000 .32 31,000-33,000 .26 43,000-No limit .20 21,000-23,000 .31 33,000-35,000 .25 23,000-25,000 .30 35,000-37,000 .24 9a Multiply line 6 by the decimal amount on line 8	8		8 the	decimal a			that applies t		line /.		
Over over amount is Over over amount is Over over amount is \$0-15,000 .35 \$25,000-27,000 .29 \$37,000-39,000 .23 15,000-17,000 .34 27,000-29,000 .28 39,000-41,000 .22 17,000-19,000 .33 29,000-31,000 .27 41,000-43,000 .21 19,000-21,000 .32 31,000-33,000 .26 43,000-No limit .20 21,000-23,000 .31 33,000-35,000 .25 23,000-25,000 .30 35,000-37,000 .24 9a Multiply line 6 by the decimal amount on line 8			not	Decimal	IT line / is		Decimal	1	ot Decimal		
15,000—17,000		Over ove	r	amount i			amount is				
17,000—19,000 .33 29,000—31,000 .27 41,000—43,000 .21 19,000—21,000 .32 31,000—33,000 .26 43,000—No limit .20 21,000—23,000 .31 33,000—35,000 .25 23,000—25,000 .30 35,000—37,000 .24 9a Multiply line 6 by the decimal amount on line 8					ľ						
19,000—21,000								1		8	х.
21,000—23,000											
23,000—25,000 .30 35,000—37,000 .24 9a Multiply line 6 by the decimal amount on line 8					1	•		40,000 140 1111	.20		
9a Multiply line 6 by the decimal amount on line 8					1	•					
b If you paid 2021 expenses in 2022, complete Worksheet A in the instructions. Enter the amount from line 13 of the worksheet here. Otherwise, enter -0- on line 9b and go to line 9c	9a									9a	3,815,446
c Add lines 9a and 9b and enter the result	b	If you paid 2	2021 e	xpenses i	n 2022, com	plete Wo					
						wise, ent	ter -0- on line	e 9b and go to lin	e 9c		*
40 T PIPE P PEI II										9c	
10 Tax liability limit. Enter the amount from the Credit Limit Worksheet in the instructions 10											
11 Credit for child and dependent care expenses. Enter the smaller of line 9c or line 10 here and on Schedule 3 (Form 1040), line 2		on Schedule	3 (Fo	rm 1040),	line 2	·					3,449,539

Form 2441 (2022) Page 2

Part	Dependent Care Benefits		,
12	Enter the total amount of dependent care benefits you received in 2022. 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	1,448,437
13 14	Enter the amount, if any, you carried over from 2020 and/or 2021 and used in 2022. See instructions If you forfeited or carried over to 2023 any of the amounts reported on line 12 or 13, enter the amount. See instructions	13	18,682 (102,297)
15 16	Combine lines 12 through 14. See instructions	15	
17 18 19	Enter the smaller of line 15 or 16		
20	 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). If married filing separately, see instructions. All others, enter the amount from line 18. Enter the smallest of line 17, 18, or 19 20 		
21	Enter \$5,000 (\$2,500 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 \$5,000 or \$2,500 amount you enter on line 21. However, don't enter more than the maximum amount allowed under your dependent care plan. If your dependent care plan uses a non-calendar plan year, 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	4,978
23 24	Subtract line 22 from line 15	24	2,634
25 26	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	1,096,698
20	on Form 1040, 1040-SR, or 1040-NR, line 1e	26	414,615
	To claim the child and dependent care credit, complete lines 27 through 31 below.		
27	Enter \$3,000 (\$6,000 if two or more qualifying persons)	27	
28 29	Add lines 24 and 25	28	1,099,029
30	Complete line 2 on page 1 of this form. Don't include in column (d) any benefits shown on line 28 above. Then, add the amounts in column (d) 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	5,793,769
			Form 2441 (2022)

Form 2441 (2022) Page **2**

Part	Dependent Care Benefits		
12	Enter the total amount of dependent care benefits you received in 2022. 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	4,902,947
13 14	Enter the amount, if any, you carried over from 2020 and/or 2021 and used in 2022. See instructions If you forfeited or carried over to 2023 any of the amounts reported on line 12 or 13, enter the amount. See instructions	13	21,868 (137,960)
15 16	Combine lines 12 through 14. See instructions	15	(137,900)
17 18 19	Enter the smaller of line 15 or 16		
20	 If married filing separately, see instructions. All others, enter the amount from line 18. Enter the smallest of line 17, 18, or 19 20 		
21	Enter \$5,000 (\$2,500 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 \$5,000 or \$2,500 amount you enter on line 21. However, don't enter more than the maximum amount allowed under your dependent care plan. If your dependent care plan uses a non-calendar plan year, 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	14,883
23 24	Subtract line 22 from line 15	24	8,851
25 26	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	3,993,281
	on Form 1040, 1040-SR, or 1040-NR, line 1e	26	778,691
	To claim the child and dependent care credit, complete lines 27 through 31 below.		
27 28 29	Enter \$3,000 (\$6,000 if two or more qualifying persons)	27 28 29	4,002,132
30 31	Complete line 2 on page 1 of this form. Don't include in column (d) any benefits shown on line 28 above. Then, add the amounts in column (d) and enter the total here	30	
J1	complete lines 4 through 11	31	17,949,381

Form **3468**

Department of the Treasury Internal Revenue Service

Investment Credit

Attach to your tax return.

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

OMB No. 1545-0155

2022

Attachment Sequence No. 174

Name(s) shown on return

Total Forms Filed = 31,131

Identifying number

Part	Information Regarding the Election To Treat the Lessee as the Purchaser of Investment	ant C	radit Propert
	are claiming the investment credit as a lessee based on a section 48(d) (as in effect on November 4, 1990		
	ing information. If you acquired more than one property as a lessee, attach a statement showing the infor		
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	Qualifying Advanced Coal Project Credit, Qualifying Gasification Project Credit, Qualifying Project Credit, and Advanced Manufacturing Investment Credit	alifyin	g Advanced
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) \$ x 20% (0.20)		
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) \$ x 15% (0.15)		
c d	Qualified investment in advanced coalbased generation technology property placed in service during the tax year for projects described in section 48A(d)(3)(B)(iii) \$ × 30% (0.30) 5c	5d	79
6	Qualifying gasification or advanced energy project credit (see instructions):		
а	Qualified investment in property placed in service during the tax year (a) of advanced energy project property or (b) of qualified gasification property 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)		
b	Qualified investment in property other than in 6a above placed in service during the tax year		
С	Total. Add lines 6a and 6b	6c	1,536
7	Advanced manufacturing investment credit (see instructions):		
	Basis in qualified property as part of an advanced manufacturing facility, placed in service during the tax year and after 2022, the		
	construction of which began after August 9, 2022 \$ × 25% (0.25)	7	*
8	Reserved for future use	8	
9	Enter the applicable unused investment credit from cooperatives (see instructions)	9	1,704
0	Add lines 5d, 6c, 7, and 9. Report this amount on Form 3800, Part III, line 1a (see instructions if you entered an amount on line 7)	10	3,323

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

Form **3468**

Department of the Treasury Internal Revenue Service

Investment Credit

Attach to your tax return.

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

OMB No. 1545-0155

2022

Attachment Sequence No. 174

Name(s) shown on return

Total Forms Filed =

31,131

Identifying number

Part	Information Regarding the Election	on To Treat the Le	essee as the F	Purcha	ser of Investm	nent C	Credit Property
	are claiming the investment credit as a lessee						
followi	ng information. If you acquired more than one	e property as a lesse	e, attach a state	ment s	howing the infor	matior	below.
1	Name of lessor:						
2	Address of lessor:						
3	Description of property:						
4	Amount for which you were treated as having						
Part	Qualifying Advanced Coal Project Energy Project Credit, and Advan					alityin	g Advanced
5	Qualifying advanced coal project credit (se	ee 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)	\$	× 20% (0.20)	5a			
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)	\$	× 15% (0.15)	5b			
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)			5c			222
d	Total. Add lines 5a, 5b, and 5c					5d	323
6	Qualifying gasification or advanced energ	y project credit (see	e instructions):				
а	Qualified investment in property placed in service during the tax year (a) of advanced energy project property or (b) of qualified gasification property 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 6a above placed in service during the tax year	\$	× 20% (0.20)	6b			
С	Total. Add lines 6a and 6b					6c	1,105
7	Advanced manufacturing investment cred	lit (see instructions):					
	Basis in qualified property as part of an advantage facility, placed in service during the tax year construction of which began after August 9,	ar and after 2022, th	ne		× 25% (0.25)	7	*
8	Reserved for future use					8	
9	Enter the applicable unused investment cred	lit from cooperatives	(see instruction	s) .		9	6,000
10	Add lines 5d, 6c, 7, and 9. Report this amount entered an amount on line 7)	unt on Form 3800, F				10	7,569
For Pa	perwork Reduction Act Notice, see separate ins	tructions.	Cat. N	No. 12276	E		Form 3468 (2022)

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

Form 3468 (2022)

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 rehainto account for the tax year in which paid (or, for self-rehabilitated property, vinstructions. Note: This election applies to the current tax year and to all later to revoke this election without IRS consent	when capitalized). See ax years. You may not		
b				
	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 of the percen			
е	Pre-1936 buildings under the transition rule (see instructions) \$		11e	518
f	Certified historic structures under the transition rule (see instructions) \$	× 20% (0.20)	11f	5,872
g	Certified historic structures with expenditures paid or incurred after 2017 and not under the transition rule (see instructions) \$	× 4% (0.04)	11g	2,086
	Note: This credit is allowed for a 5-year period beginning in the tax year that the 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)			
12	Energy credit:			
а	Basis of property using geothermal energy placed in service during the tax year. See instructions	× 30% (0.30)	12a	1,632
b	Basis of property using solar illumination or solar energy placed in service during the tax year that is attributable to periods after 2005, the construction of which began before 2020 or after 2021	× 30% (0.30)	12b	8,798
С	Basis of property using solar illumination or solar energy placed in service during the tax year, the construction of which began in	000/ (0.00)	40	0.422
	2020 or 2021 (see instructions)		12c	9,433
d	Qualified fuel cell property (see instructions):		120	
е	Basis of property placed in service during			
·	the tax year that was acquired after 2005 and before October 4, 2008, and the basis attributable to construction, reconstruction, or erection by the taxpayer after 2005 and before October 4, 2008 \$ × 30% (0.30)	12e		
f	Applicable kilowatt capacity of property on line 12e			
	(see instructions)	12f	10-	*
g	Enter the smaller of line 12e or line 12f		12g	
h	Basis of property placed in service during the tax year that is attributable to periods after October 3, 2008, the construction of			
	which began before 2020 or after 2021 . \$ × 30% (0.30)	12h	+	
i	Applicable kilowatt capacity of property on line 12h (see instructions)	12i		
j	Enter the smaller of line 12h or line 12i		12j	*
k	Basis of property placed in service during the tax year, the construction of which began in 2020 or 2021	12k		
ı	Applicable kilowatt capacity of property on line 12k			
•	(see instructions)	121		
m	Enter the smaller of line 12k or line 12l		12m	*
n	Reserved for future use	12n		
0	Reserved for future use	120		
р	Reserved for future use		12p	

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 rehainto account for the tax year in which paid (or, for self-rehabilitated property, v	bilitation expenditures		
	instructions. Note: This election applies to the current tax year and to all later tar revoke this election without IRS consent	x years. You may not		
b	Enter the dates on which the 24- or 60-month measuring period begins			
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 perc	entage shown:		
е	Pre-1936 buildings under the transition rule (see instructions) \$	× 10% (0.10)	11e	1,188
f	Certified historic structures under the transition rule (see instructions) \$		11f	299,396
g	Certified historic structures with expenditures paid or incurred after 2017 and not under the transition rule (see instructions) \$		11g	60,931
	Note: This credit is allowed for a 5-year period beginning in the tax year that the		119	
	building is placed in service.	quaimed renabilitated		
	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)			
12	Energy credit:			
а	Basis of property using geothermal energy placed in service during the tax year. See instructions	200/ (0.20)	12a	259 400
h	Basis of property using solar illumination or solar energy placed in	× 30% (0.30)	12a	258,499
b	service during the tax year that is attributable to periods after 2005, the construction of which began before 2020 or after 2021 (see instructions)	× 30% (0.30)	12b	353,857
_	Basis of property using solar illumination or solar energy placed in			
С	service during the tax year, the construction of which began in 2020 or 2021 (see instructions)	× 30% (0.30)	12c	306,952
d	Reserved for future use		12d	,
_	Qualified fuel cell property (see instructions):		120	
е	Basis of property placed in service during			
_	the tax year that was acquired after 2005			
	and before October 4, 2008, and the basis			
	attributable to construction, reconstruction,			
	or erection by the taxpayer after 2005 and			
	before October 4, 2008	12e	- 1	
f	Applicable kilowatt capacity of property on line 12e (see instructions)	12f		
g	Enter the smaller of line 12e or line 12f		12g	*
h	Basis of property placed in service during			
	the tax year that is attributable to periods			
	after October 3, 2008, the construction of			
	which began before 2020 or after 2021 . \$ × 30% (0.30)	12h		
i	Applicable kilowatt capacity of property on line 12h (see instructions)	12i		
j	Enter the smaller of line 12h or line 12i		12j	*
k	Basis of property placed in service during			
	the tax year, the construction of which began in 2020 or 2021	12k		
ı	Applicable kilowatt capacity of property on line 12k			
•	(see instructions)	121		
m	Enter the smaller of line 12k or line 12l		12m	*
n	Reserved for future use	12n		
o	Reserved for future use	120		
р	Reserved for future use		12p	

Form 3468 (2022) Page **3**

Part I	Rehabilitation Credit and Energy Credit (continued)				-
	Qualified microturbine property (see instructions):				
	Basis of property placed in service during the tax year that was acquired after 2005, the basis attributable to construction,				
	reconstruction, or erection by the taxpayer after 2005	12q			
r	Kilowatt capacity of property on line 12q × \$200	12r			
S	Enter the smaller of line 12q or line 12r			12s	6
	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 a mechanical energy capacity of more than 67,000 horsepower or an equi electrical and mechanical energy capabilities.				
t	Basis of property placed in service during the tax year. See instructions. For property placed in service after 2022, multiply by 30% instead of 10%	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 less	12u			
V	Multiply line 12t by line 12u $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$			12v	420
	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 2009 and the basis attributable to the construction, reconstruction, or erection by the taxpayer after October 3, 2008, and before 2009 . \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	12w			
X	Enter the smaller of line 12w or \$4,000			12x	*
у	Basis of property placed in service during the tax year that is attributable to periods after 2008, the construction of which began before 2020 or after 2021		× 30% (0.30)	12y	*
z	Basis of property placed in service during the tax year, the construction of which began in 2020 or 2021		× 30% (0.30)	12z	*
aa	Reserved for future use		× 50 / (0.50)	12aa	
	Waste energy recovery property:			1244	
bb	Basis of property placed in service during the tax year. See				
	instructions		× 30% (0.30)	12bb	0
	Geothermal heat pump systems (see instructions):				
cc	Basis of property placed in service during the tax year. See instructions. For property placed in service after 2022, multiply by 30% instead of 10%		× 10% (0.10)	12cc	*
	Qualified investment credit facility property (see instructions):		× 10% (0.10)	1200	
dd			× 30% (0.30)	12dd	291
	Reserved for future use			12ee	2
ff	Reserved for future use			12ff	
	Reserved for future use			12gg	
	Other energy credits and special adjustments (see instructions)			12hh	*
13	Enter the applicable unused investment credit from cooperatives (see instruction			13	180
14	Combine lines 11e, 11f, 11g, 12a, 12b, 12c, 12g, 12j, 12m, 12s, 12v, 12x, 12y, 12	2z, 12	bb, 12cc, 12dd,		
	12hh, and 13. Report this amount on Form 3800. Part III, line 4a			14	27.822

Form **3468** (2022)

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

Form 3468 (2022) Page **3**

art	Rehabilitation Credit and Energy Credit (continued)				
	Qualified microturbine property (see instructions):				
q	Basis of property placed in service during the tax year that was acquired after 2005, the basis attributable to construction, reconstruction, or erection by the taxpayer after 2005	12q			
r	Kilowatt capacity of property on line 12q	12r			
s	Enter the smaller of line 12q or line 12r $$			12s	20
	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 a mechanical energy capacity of more than 67,000 horsepower or an equelectrical and mechanical energy capabilities.				
t	Basis of property placed in service during the tax year. See instructions. For property placed in service after 2022, multiply by 30% instead of 10% \$ × 10% (0.10)	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 less	12u			
V	Multiply line 12t by line 12u $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$			12v	117
	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 2009 and the basis attributable to the construction, reconstruction, or erection by the taxpayer after October 3, 2008, and before 2009 . \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	12w			
x	Enter the smaller of line 12w or \$4,000			12x	*
У	Basis of property placed in service during the tax year that is attributable to periods after 2008, the construction of which began before 2020 or after 2021		× 30% (0.30)	12y	*
z	Basis of property placed in service during the tax year, the				
	construction of which began in 2020 or 2021		× 30% (0.30)	12z	*
aa	Reserved for future use			12aa	
bb	Waste energy recovery property: Basis of property placed in service during the tax year. See instructions		× 30% (0.30)	12bb	0
	Geothermal heat pump systems (see instructions):		. ,		
cc	Basis of property placed in service during the tax year. See instructions. For property placed in service after 2022, multiply by 30% instead of 10%		× 10% (0.10)	12cc	*
	Qualified investment credit facility property (see instructions):				
dd			× 30% (0.30)	12dd	23,095
ee	Reserved for future use			12ee	
ff	Reserved for future use			12ff	
	Reserved for future use			12gg	
	Other energy credits and special adjustments (see instructions)			12hh	*
13	Enter the applicable unused investment credit from cooperatives (see instruction	•		13	1,561
14	Combine lines 11e, 11f, 11g, 12a, 12b, 12c, 12g, 12j, 12m, 12s, 12v, 12x, 12y, 1 12hb, and 13. Report this amount on Form 3800. Part III, line 4a	2Z, 12b	D, 12CC, 12dd,	14	1 311 675

Form **3468** (2022)

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

3800 Form

Department of the Treasury Internal Revenue Service

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

2022

Attachment Sequence No. 22

Name(s) shown on return

Total Forms Filed = 733,933

Identifying number

Par	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	1	110,876
2	Passive activity credits from line 2 of all Parts III with box B checked 2 85,632		
3	Enter the applicable passive activity credits allowed for 2022. See instructions	3	65,408
4	Carryforward of general business credit to 2022. Enter the amount from line 2 of Part III with box C		
	checked. See instructions for statement to attach	4	58,127
	Check this box if the carryforward was changed or revised from the original reported amount		
5	Carryback of general business credit from 2023. Enter the amount from line 2 of Part III with box D		
	checked. See instructions	5	
6	Add lines 1, 3, 4, and 5	6	218,137
Part			
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.		
	Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2;		
	or the applicable line of your return.	7	674,409
	• 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.		
8	Alternative minimum tax:		
	• Individuals. Enter the amount from Form 6251, line 11.		
	• Corporations. Enter -0	8	27,189
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54.		
9	Add lines 7 and 8	9	675,108
J			073,100
10a	Foreign tax credit		
b	Certain allowable credits (see instructions)		
C	Add lines 10a and 10b	10c	458,877
			100,011
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	644,405
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0 12 643,716		
13	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See instructions 425,359		
14	Tentative minimum tax:		
	• Individuals. Enter the amount from Form 6251, line 9.		
	• Corporations. Enter -0 517,221		
	Estates and trusts. Enter the amount from Schedule I		
. –	(Form 1041), line 52.		
15	Enter the greater of line 13 or line 14	15	518,326
16	Subtract line 15 from line 11. If zero or less, enter -0	16	606,611
17	Enter the smaller of line 6 or line 16	17	181,421
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or reorganization.		
	reorganization.		

3800 Form

Department of the Treasury Internal Revenue Service

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

2022

Attachment Sequence No. 22

Name(s) shown on return

Total Forms Filed = 733,933

Identifying number

Pari	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	1	1,209,586
2	Passive activity credits from line 2 of all Parts III with box B checked 2 180,978		
3	Enter the applicable passive activity credits allowed for 2022. See instructions	3	224,805
4	Carryforward of general business credit to 2022. Enter the amount from line 2 of Part III with box C		
	checked. See instructions for statement to attach	4	3,234,684
5	Check this box if the carryforward was changed or revised from the original reported amount		
5	checked. See instructions	5	
6	Add lines 1, 3, 4, and 5	6	4 000 075
Part		<u> </u>	4,669,075
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.		
	Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2;		
	or the applicable line of your return.	7	265,553,413
	• 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. Alternative minimum tax:		
8	Individuals. Enter the amount from Form 6251, line 11.		
	• Corporations. Enter -0	8	989,455
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54.		909,400
	,		
9	Add lines 7 and 8	9	266,542,869
10a	Foreign tax credit		
b	Certain allowable credits (see instructions)		
С	Add lines 10a and 10b	10c	9,033,359
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	257,509,475
••	The modifie that each act mile for north mile of miles in a miles in a miles in a mile		201,000,410
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0 12 256,522,664		
13	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See instructions 13 60,991,330		
14	Tentative minimum tax:		
	• Individuals. Enter the amount from Form 6251, line 9.		
	• Corporations. Enter -0		
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 52.		
15	Enter the greater of line 13 or line 14	15	217,829,818
16	Subtract line 15 from line 11. If zero or less, enter -0-	16	39,767,271
17	Enter the smaller of line 6 or line 16	17	1,860,127
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or		
	reorganization.		

Par	,		
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	30,841
19	Enter the greater of line 13 or line 18	19	30,907
20	Subtract line 19 from line 11. If zero or less, enter -0	20	34,358
21	Subtract line 17 from line 20. If zero or less, enter -0	21	33,909
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	12,511
23	Passive activity credit from line 3 of all Parts III with box B checked 23 7,056		
24	Enter the applicable passive activity credit allowed for 2022. See instructions	24	5.806
25	Add lines 22 and 24	25	18,190
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	15,542
27	Subtract line 13 from line 11. If zero or less, enter -0	27	644,405
28	Add lines 17 and 26	28	189,776
29	Subtract line 28 from line 27. If zero or less, enter -0	29	627,976
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	296.887
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 32 187,846		
33	Enter the applicable passive activity credits allowed for 2022. See instructions	33	127,649
34	Carryforward of business credit to 2022. 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	76,885
	Check this box if the carryforward was changed or revised from the original reported amount		
35	Carryback of business credit from 2023. 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	446.665
37	Enter the smaller of line 29 or line 36	37	388,366
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. Corporations. Form 1120, Schedule J, Part I, line 5c. Estates and trusts. Form 1041, Schedule G, line 2b. 	38	527,880

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	line 26.
18	Multiply line 14 by 75% (0.75). See instructions	18	17,793,992
19	Enter the greater of line 13 or line 18	19	17,821,760
20	Subtract line 19 from line 11. If zero or less, enter -0	20	10,064,157
21	Subtract line 17 from line 20. If zero or less, enter -0	21	9,814,235
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	77,321
23	Passive activity credit from line 3 of all Parts III with box B checked 23 4,484		
24	Enter the applicable passive activity credit allowed for 2022. See instructions	24	12,209
25	Add lines 22 and 24	25	89,531
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	47,794
27	Subtract line 13 from line 11. If zero or less, enter -0	27	196,518,146
28	Add lines 17 and 26	28	1,907,921
29	Subtract line 28 from line 27. If zero or less, enter -0	29	194,610,224
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	5,219,000
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 32 788,272		
33	Enter the applicable passive activity credits allowed for 2022. See instructions	33	657,308
34	Carryforward of business credit to 2022. 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	4,069,987
	Check this box if the carryforward was changed or revised from the original reported amount \Box		
35	Carryback of business credit from 2023. 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	9.946.295
37	Enter the smaller of line 29 or line 36	37	5,475,959
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.		
	Corporations. Form 1120, Schedule J, Part I, line 5c. Estates and trusts. Form 1041. Schedule G, line 2b.	38	7,383,881
	* Laiguea guu muala, FOITH 1041, OCHEODIE CA, IIIIE ZD J		

name(s)	Shown on return		identifying nur	nber
Part	General Business Credits or Eligible Small Business Credits (see inst	ructio	nne)	
	ete a separate Part III for each box checked below. See instructions.	iuctic	5113)	
A	General Business Credit From a Non-Passive Activity General Business Credit From a Passive Activity General Business Credit Carryforwards General Business Credit Carrybacks		-	
	ou are filing more than one Part III with box A or B checked, complete and attach first n all Parts III with box A or B checked. Check here if this is the consolidated Part III			
		• •	(b) Enter EIN if	<u> </u>
Note: C	(a) Description of credit On 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.	(c) Enter the appropriate amount.
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		3,403
b	Advanced manufacturing production (Form 7207)	1b		*
С	Increasing research activities (Form 6765)	1c		91,519
d	Low-income housing (carryforward only) (see instructions)	1d		*
е	Disabled access (Form 8826)*	1e		2,817
f	Renewable electricity production (Form 8835)	1f		3,491
g	Indian employment (Form 8845)	1g		1,277
h	Orphan drug (Form 8820)	1h		2,341
i	New markets (Form 8874)	1i		1,728
j	Small employer pension plan startup costs and auto-enrollment (Form 8881)	1j		9,786
k	Employer-provided child care facilities and services (Form 8882)*	1k		20,274
ı	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		1,133
m	Low sulfur diesel fuel production (Form 8896)	1m		36
n	Distilled spirits (Form 8906)	1n		175
ο	Nonconventional source fuel (carryforward only)	10		*
р	Energy efficient home (Form 8908)	1p		16,626
q	Energy efficient appliance (carryforward only)	1q		*
r	Alternative motor vehicle (Form 8910)	1r		8,098
s	Alternative fuel vehicle refueling property (Form 8911)	1s		15,406
t	Enhanced oil recovery credit (Form 8830)	1t		1,212
u	Mine rescue team training (Form 8923)	1u		25
v	Agricultural chemicals security (carryforward only)	1v		0
w	Employer differential wage payments (Form 8932)	1w		3,615
x	Carbon oxide sequestration (Form 8933)	1x		609
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		14,879
Z	Qualified plug-in electric vehicle (carryforward only)	1z		*
aa	Employee retention (Form 5884-A)	1aa		2,582
bb	General credits from an electing large partnership (carryforward only)	1bb		*
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		5,758
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		191,877
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		18,078
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		27,874
b	Work opportunity (Form 5884)	4b		124,266
С	Biofuel producer (Form 6478)	4c		10,535
d	Low-income housing (Form 8586)	4d		7,215
е	Renewable electricity production (Form 8835)	4e		512
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		218,222
g	Qualified railroad track maintenance (Form 8900)	4g		608
h	Small employer health insurance premiums (Form 8941)	4h		3,736
Í	Increasing research activities (Form 6765)	4i		137,500
j	Employer credit for paid family and medical leave (Form 8994)	4 <u>j</u>		21,424
Z	Other	4z		1,742
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.

Name(s) s	shown on return		Identifying nu	mber
Part II	General Business Credits or Eligible Small Business Credits (see inst	truction	ons)	
Comple	ete a separate Part III for each box checked below. See instructions.			
	General Business Credit From a Non-Passive Activity E Reserved			
	General Business Credit From a Passive Activity F Reserved			
	General Business Credit Carryforwards G 🗌 Eligible Small Busin	ness C	redit Carryforward	ds
	General Business Credit Carrybacks H Reserved			
	ou are filing more than one Part III with box A or B checked, complete and attach firs nall 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
Note: O pass-thr	n 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
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		8,024
b	Advanced manufacturing production (Form 7207)	1b		*
С	Increasing research activities (Form 6765)	1c		753,738
d	Low-income housing (carryforward only) (see instructions)	1d		*
е	Disabled access (Form 8826)*	1e		5,293
f	Renewable electricity production (Form 8835)	1f		2,784
g	Indian employment (Form 8845)	1g		7,696
h	Orphan drug (Form 8820)	1h		5,190
i	New markets (Form 8874)	1i		1,613
j	Small employer pension plan startup costs and auto-enrollment (Form 8881)	1j		9,410
k	Employer-provided child care facilities and services (Form 8882)*	1k		7,921
I	Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)	11		3,142
m	Low sulfur diesel fuel production (Form 8896)	1m		1
n	Distilled spirits (Form 8906)	1n		4,928
0	Nonconventional source fuel (carryforward only)	10		*
р	Energy efficient home (Form 8908)	1p		265,038
q	Energy efficient appliance (carryforward only)	1q		*
r	Alternative motor vehicle (Form 8910)	1r		38,180
S	Alternative fuel vehicle refueling property (Form 8911)	1s		36,443
t	Enhanced oil recovery credit (Form 8830)	1t		53,630
u	Mine rescue team training (Form 8923)	1u		29
V	Agricultural chemicals security (carryforward only)	1v		0
w	Employer differential wage payments (Form 8932)	1w		642
X	Carbon oxide sequestration (Form 8933)	1x		8,098
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		75,313
Z	Qualified plug-in electric vehicle (carryforward only)	1z		*
aa	Employee retention (Form 5884-A)	1aa		23,968
bb	General credits from an electing large partnership (carryforward only)	1bb		*
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other			
	credits (see instructions)	1zz		77,610
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		1,391,449
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		50,581
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		1,319,531
b	Work opportunity (Form 5884)	4b		739,858
С	Biofuel producer (Form 6478)	4c		41,698
d	Low-income housing (Form 8586)	4d		107,766
е	Renewable electricity production (Form 8835)	4e		3,457
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		2,038,850
g	Qualified railroad track maintenance (Form 8900)	4g		40,817
h	Small employer health insurance premiums (Form 8941)	4h		11,552
i	Increasing research activities (Form 6765)	4i		1,566,396
j	Employer credit for paid family and medical leave (Form 8994)	4j		84,339
Z	Other	4z		63,709
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

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

2022

Attachment
Sequence No. 170

Name(s) shown on return

Total Forms Filed = 124,330

Your social security number

Befo	pre you begin: You can deduct moving expenses only if you are a Member of the Armed Forces on act military order, you, your spouse, or your dependents move because of a permanent chance Check here to certify that you meet these requirements. See the instructions	ge of	station.
1	Transportation and storage of household goods and personal effects (see instructions)	1	94,795
2	Travel (including lodging) from your old home to your new home (see instructions). Do not include the cost of meals	2	116,009
3	Add lines 1 and 2	3	124,026
4	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 W-2 with code P	4	50,041
5	Is line 3 more 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, 1040-SR, 1040-NR, line 1h.		
	☐ 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	110,795
For P	aperwork Reduction Act Notice, see your tax return instructions. Cat. No. 12490K		Form 3903 (2022)

Form **3903**

Department of the Treasury Internal Revenue Service

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

2022

Attachment
Sequence No. 170

Name(s) shown on return

Total Forms Filed = 124,330

Your social security number

Befo	pre you begin: You can deduct moving expenses only if you are a Member of the Armed Forces on a military order, you, your spouse, or your dependents move because of a permanent characteristic check here to certify that you meet these requirements. See the instructions	ange of	station.
1	Transportation and storage of household goods and personal effects (see instructions)	1	286,624
2	Travel (including lodging) from your old home to your new home (see instructions). Do not include the cost of meals		169,220
3	Add lines 1 and 2	3	455,845
4	Enter the total amount the government paid you for the expenses listed on lines 1 and 2 that is no included in box 1 of your Form W-2 (wages). This amount should be shown in box 12 of your Form W-2 with code P	า	138,756
5	Is line 3 more 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, 1040-SR, 1040-NR, line 1h.	1	
	☐ 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		338,096
For P	aperwork Reduction Act Notice, see your tax return instructions. Cat. No. 12490K		Form 3903 (2022)

Credit for Federal Tax Paid on Fuels

OMB No. 1545-0162

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form4136 for instructions and the latest information.

Name (as shown on your income tax return)

568,926 Total Forms Filed =

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.

Nontaxable Use of Gasoline 1

Note: CRN is the credit reference number.

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(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 J	\$ 512,033	
d	Exported		.184		23.265	411

Nontaxable Use of Aviation Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cro	edit	(e) CRN
а	Use in commercial aviation (other than foreign trade)		\$.15		\$ 1,050		354
b	Other nontaxable use (see Caution above line 1)		.193		1,582		324
С	Exported		.194		0		412
d	LUST tax on aviation fuels used in foreign trade		.001		*		433

Nontaxable Use of Undyed Diesel Fuel 3

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 credit		(e) CRN
а	Nontaxable use		\$.243)			
b	Use on a farm for farming purposes		.243	<u> </u>	\$ 85,324		360
С	Use in trains		.243		*		353
d	Use in certain intercity and local buses (see Caution above line 1)		.17		*		350
е	Exported		.244		*		413

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 credit		(e) CRN	
а	Nontaxable use taxed at \$.244		\$.243)				
b	Use on a farm for farming purposes		.243	}	\$ 9,795		346	
С	Use in certain intercity and local buses (see Caution above line 1)		.17		0		347	
d	Exported		.244		*		414	
е	Nontaxable use taxed at \$.044		.043		*		377	
f	Nontaxable use taxed at \$.219		.218		*		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

Department of the Treasury Internal Revenue Service

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 = 568.926

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 the credit reference number.

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(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	\$ 5,444,499	
d	Exported		.184		901,290	411

2 Nontaxable Use of Aviation Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cre	dit	(e) CRN
а	Use in commercial aviation (other than foreign trade)		\$.15		\$ 12,151		354
b	Other nontaxable use (see Caution above line 1)		.193		13,404		324
С	Exported		.194		0		412
d	LUST tax on aviation fuels used in foreign trade		.001		*		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 credit		(e) CRN
а	Nontaxable use		\$.243]			
b	Use on a farm for farming purposes		.243	<u> </u>	\$ 538,060		360
С	Use in trains		.243		*		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 credit		(e) CRN	
а	Nontaxable use taxed at \$.244		\$.243)				
b	Use on a farm for farming purposes		.243	}	\$ 131,352		346	
С	Use in certain intercity and local buses (see Caution above line 1)		.17		0		347	
d	Exported		.244		*		414	
е	Nontaxable use taxed at \$.044		.043		0		377	
f	Nontaxable use taxed at \$.219		.218		*		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 (2022) 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		\$ 27		417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219		.175		14		355
С	Nontaxable use (other than use by state or local government) taxed at \$.244		.243		9,795		346
d	Nontaxable use (other than use by state or local government) taxed at \$.219		.218		*		369
е	LUST tax on aviation fuels used in foreign trade		.001		*		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		\$ 85,324		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	J			
b	Sales from a blocked pump	.243	}	\$ 9,795		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		\$ 14		355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200		27		417
С	Nonexempt use in noncommercial aviation		.025		0		418
d	Other nontaxable uses taxed at \$.244		.243		9,795		346
е	Other nontaxable uses taxed at \$.219		.218		*		369
f	LUST tax on aviation fuels used in foreign trade		.001		*		433

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

Form 4136 (2022) 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		\$ 631		417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219		.175		176		355
С	Nontaxable use (other than use by state or local government) taxed at \$.244		.243		131,352		346
d	Nontaxable use (other than use by state or local government) taxed at \$.219		.218		*		369
е	LUST tax on aviation fuels used in foreign trade		.001		*		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		\$ 538,060		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	dit	(e) CRN
а	Use by a state or local government	\$.243)			
b	Sales from a blocked pump	.243	}	\$ 131,352		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		\$ 176		355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200		631		417
С	Nonexempt use in noncommercial aviation		.025		0		418
d	Other nontaxable uses taxed at \$.244		.243		131,352		346
е	Other nontaxable uses taxed at \$.219		.218		*		369
f	LUST tax on aviation fuels used in foreign trade		.001		*		433

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

Form 4136 (2022) 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, Renewable Diesel, or Sustainable Aviation Fuel Mixture Credit Registration No.

Biodiesel or renewable diesel mixtures. Claimant produced a mixture by mixing biodiesel with diesel fuel or renewable diesel with liquid fuel (other than renewable diesel). The biodiesel used to produce the biodiesel mixture met ASTM D6751 and met EPA's registration requirements for fuels and fuel additives. 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. Sustainable aviation fuel (SAF) mixtures. Claimant produced a qualified mixture by mixing SAF with kerosene. The qualified mixture was produced by the claimant in the United States, such mixture was used by the claimant (or sold by the claimant for use) in an aircraft, such sale or use was in the ordinary course of a trade or business of the claimant, and the transfer of such mixture to the fuel tank of such aircraft occurred in the United States. The SAF used to produce the qualified mixture is the portion of liquid fuel that is not kerosene that (i) either (A) meets the specifications of one of the ASTM D7566 Annexes, or (B) meets the specifications of ASTM D1655 Annex A1, (ii) is not derived from coprocessing an applicable material (or materials derived from an applicable material) with a feedstock that is not biomass, (iii) is not derived from palm fatty acid distillates or petroleum, and (iv) has been certified in accordance with section 40B(e) as having a lifecycle greenhouse gas emissions reduction percentage of at least 50 percent. For all claims. Claimant has attached the appropriate certificates and, if applicable, appropriate reseller statements. Claimant has no reason to believe that the information in the certificate or statement is false. See the instructions for additional information and requirements.

		(b) Rate	(c) Number of gallons sold or used	(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		*		307
d	Sustainable aviation fuel mixtures (see instructions)			0		440

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. (e) CRN (a) Type of use (b) Rate (c) Gallons, (d) Amount of credit or gasoline or diesel gallon equivalents a Liquefied petroleum gas (LPG) (see instructions) \$.183 \$ 0 419 b "P Series" fuels .183 420 3.199 С Compressed natural gas (CNG) (see instructions) .183 421 d Liquefied hydrogen .183 422 е Fischer-Tropsch process liquid fuel from coal (including peat) .243 0 423 f Liquid fuel derived from biomass .243 424 Liquefied natural gas (LNG) (see instructions) .243 425 g Liquefied gas derived from biomass .183 435

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

Form 4136 (2022) 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, Renewable Diesel, or Sustainable Aviation Fuel Mixture Credit

Registration No.

Biodiesel or renewable diesel mixtures. Claimant produced a mixture by mixing biodiesel with diesel fuel or renewable diesel with liquid fuel (other than renewable diesel). The biodiesel used to produce the biodiesel mixture met ASTM D6751 and met EPA's registration requirements for fuels and fuel additives. 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. Sustainable aviation fuel (SAF) mixtures. Claimant produced a qualified mixture by mixing SAF with kerosene. The qualified mixture was produced by the claimant in the United States, such mixture was used by the claimant (or sold by the claimant for use) in an aircraft, such sale or use was in the ordinary course of a trade or business of the claimant, and the transfer of such mixture to the fuel tank of such aircraft occurred in the United States. The SAF used to produce the qualified mixture is the portion of liquid fuel that is not kerosene that (i) either (A) meets the specifications of one of the ASTM D7566 Annexes, or (B) meets the specifications of ASTM D1655 Annex A1, (ii) is not derived from coprocessing an applicable material (or materials derived from an applicable material) with a feedstock that is not biomass, (iii) is not derived from palm fatty acid distillates or petroleum, and (iv) has been certified in accordance with section 40B(e) as having a lifecycle greenhouse gas emissions reduction percentage of at least 50 percent. For all claims. Claimant has attached the appropriate certificates and, if applicable, appropriate reseller statements. Claimant has no reason to believe that the information in the certificate or statement is false. See the instructions for additional information and requirements.

		(b) Rate	(c) Number of gallons sold or used	(d) Amount of cre	edit	(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		*		307
d	Sustainable aviation fuel mixtures (see instructions)			0		440

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) Bate (c) Gallons. (d) Amount of credit rate for use in certain intercity and local buses (type of use 5).

		(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		\$ 0	419
b	"P Series" fuels		.183		10.545	420
С	Compressed natural gas (CNG) (see instructions)		.183		*	421
d	Liquefied hydrogen		.183		*	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

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

Form 4136 (2022) Page **4**

12 Alternative Fuel Credit

Registration No.

For the alternative fuel mixture credit, claimant produced a mixture by mixing taxable fuel with alternative fuel. Claimant certifies that it (a) produced the alternative fuel, or (b) has in its possession the name, address, and EIN of the person(s) that sold the alternative fuel to the claimant; the date of purchase; and an invoice or other documentation identifying the amount of the alternative fuel. The claimant also certifies that it made no other claim for the amount of the alternative fuel, or has repaid the amount to the government. The alternative fuel mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant.

		(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of cre	dit	(e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)	\$.50		\$ 6,362		426
b	"P Series" fuels	.50		1,009		427
С	Compressed natural gas (CNG) (see instructions)	.50		*		428
d	Liquefied hydrogen (terminated after 12/31/2022)	.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		*		432
h	Liquefied gas derived from biomass	.50		0		436
i	Compressed gas derived from biomass	.50		*		437

13 Registered Credit Card Issuers

Registration No.

		(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Diesel fuel sold for the exclusive use of a state or local government	\$.243		\$ 85,324	360
b	Kerosene sold for the exclusive use of a state or local government	.243		9,795	346
С	Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at \$.219	.218		*	369

14 Nontaxable Use of a Diesel-Water Fuel Emulsion

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

	Cadion More to a reduced creat rate for dec in	Toortain intoronty c	and lood by	acce (type of acc c	7). 000 11101140110116	<i>,</i> ,	
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Nontaxable use		\$.197		\$ *		309
b	Exported		.198		*		306

15 Diesel-Water Fuel Emulsion Blending

Registration No.

17 |\$

568,926

		(c) Gallons	(d) Amount of cro	edit	(e) CRN
Blender credit	\$.046		\$ 0		310

16 Exported Dyed Fuels and Exported Gasoline Blendstocks

		(b) Rate	(c) Gallons	(d) Amount of cr	edit	(e) CRN		
а	Exported dyed diesel fuel and exported gasoline blendstocks taxed at \$.001	\$.001		\$ *		415		
b	Exported dyed kerosene .001 0							
17	Total income tax credit claimed. Add lines 1 through 16, column							

Total income tax credit claimed. Add lines 1 through 16, column (d). Enter here and on Schedule 3 (Form 1040), line 12; Form 1120, Schedule J, line 20b; Form 1120-S, line 23c; Form 1041, Schedule G, line 16b; or the proper line of other returns

Form **4136** (2022)

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

Form 4136 (2022) Page f 4

12 Alternative Fuel Credit

Registration No.

For the alternative fuel mixture credit, claimant produced a mixture by mixing taxable fuel with alternative fuel. Claimant certifies that it (a) produced the alternative fuel, or (b) has in its possession the name, address, and EIN of the person(s) that sold the alternative fuel to the claimant; the date of purchase; and an invoice or other documentation identifying the amount of the alternative fuel. The claimant also certifies that it made no other claim for the amount of the alternative fuel, or has repaid the amount to the government. The alternative fuel mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant.

		(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of cre	(d) Amount of credit		
а	Liquefied petroleum gas (LPG) (see instructions)	\$.50		\$ 42,034		426	
b	"P Series" fuels	.50		6,223		427	
С	Compressed natural gas (CNG) (see instructions)	.50		*		428	
d	Liquefied hydrogen (terminated after 12/31/2022)	.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		*		432	
h	Liquefied gas derived from biomass	.50		0		436	
i	Compressed gas derived from biomass	.50		*		437	

13 Registered Credit Card Issuers

Registration No.

		(b) Rate	(c) Gallons	(d) Amount of cred	dit (e	e) CRN
а	Diesel fuel sold for the exclusive use of a state or local government	\$.243		\$ 538,060		360
b	Kerosene sold for the exclusive use of a state or local government	.243		131,352		346
С	Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at \$.219	.218		*		369

14 Nontaxable Use of a Diesel-Water Fuel Emulsion

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	(d) Amount of credit		(e) CRN
а	Nontaxable use		\$.197		\$ *		309
b	Exported		.198		*		306

15 Diesel-Water Fuel Emulsion Blending

Registration No.

	(b) Rate	(c) Gallons	(d) Amount of cr	edit	(e) CRN
Blender credit	\$.046		\$ 0		310

16 Exported Dyed Fuels and Exported Gasoline Blendstocks

		(b) Rate	(c) Gallons	(d) Amount of cr	edit	(e) CRN
а	Exported dyed diesel fuel and exported gasoline blendstocks taxed at \$.001	\$.001		\$ *		415
b	Exported dyed kerosene	.001		0		416
17	Total income tax credit claimed. Add lines 1 through 16, column Schedule 3 (Form 1040), line 12; Form 1120, Schedule J, line 20b; I					

Form **4136** (2022)

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

Form **4562**

Department of the Treasury

Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

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

OMB No. 1545-0172

Attachment Sequence No. **179**

Name(s) shown on return

Total Forms Filed = 10,316,054 Business or activity to which this form relates Identifying number **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount (see instructions) 1 2 Total cost of section 179 property placed in service (see instructions) 2 1,552,488 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . 3 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 2,574,608 (c) Elected cost (b) Cost (business use only) 6 (a) Description of property 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 2,218,283 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 2,218,234 10 Carryover of disallowed deduction from line 13 of your 2021 Form 4562. 10 180,824 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 2,354,045 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 . 2,201,413 13 Carryover of disallowed deduction to 2023. 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 during the tax year. See instructions 14 1,838,665 15 Property subject to section 168(f)(1) election . 15 4,880 **16** Other depreciation (including ACRS) 956.461 Part III MACRS Depreciation (Don't include listed property. See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2022 5,169,538 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2022 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (a) Classification of property (business/investment use (e) Convention (f) Method (g) Depreciation deduction service only-see instructions) 68,583 67,367 3-year property 776,602 773,387 5-year property 629.164 628,600 c 7-year property 61,491 61,478 d 10-year property 191,555 191,039 e 15-year property 43,481 43,420 f 20-year property 5,091 5,383 g 25-year property 25 yrs. S/L 1,120,199 27.5 yrs. ММ S/L 1,115,986 h Residential rental undetermined type 27.5 yrs. 400 MM S/L 351 property 458,147 i Nonresidential real 39 yrs. MM S/L 456,526 Total GDS cost 2,799,313 MM S/L 2,790,821 property Section C-Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System 20a Class life 12,203 S/L 12,161 12 yrs. S/L 1.948 **b** 12-year 1,959 6,860 **c** 30-year 30 yrs. MM S/L 6.860 ММ d 40-year 23.509 3.148 40 yrs. S/L 3,131 Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 2,075,723 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 10,046,960 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs .

4562

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service Attachment Sequence No. **179** Go to www.irs.gov/Form4562 for instructions and the latest information. Name(s) shown on return

Total Forms Filed = 10,316,054 Business or activity to which this form relates Identifying number

	Iotai	Forms Filea =	10,310,034											
Pa	Note: If you	have any liste	rtain Property U ed property, com	plete Part V be	efore you con	•								
1							1							
2	Total cost of section		· ·				2	59,320,391						
3	Threshold cost of se						3							
4	Reduction in limitati	ion. Subtract lir	ne 3 from line 2. If a	zero or less, ent	er -0		4							
5	Dollar limitation for separately, see instr	•				-0 If married filing	5	2,750,575,851						
6														
	6 (a) Description of property (b) Cost (business use only) (c) Elected cost													
7 Listed property. Enter the amount from line 29 7 2,374,005														
8														
9	Tentative deduction						9	60,017,656 59,955,076						
10							10	3,559,403						
11						line 5. See instructions	11	559,845,265						
						11	12	59,642,702						
	Carryover of disallor				r	13		00,042,702						
	: Don't use Part II o													
Pa	t II Special Dep	reciation All	owance and Oth	ner Depreciat	ion (Don't ind	clude listed property	. See	instructions.)						
14						ty) placed in service								
							14	61,066,786						
	Property subject to						15	38,242						
16	Other depreciation ((including ACR	S)				16	8,227,919						
Par	t III MACRS Dep	oreciation (D	on't include liste	d property. Se Section A	e instructions	s.)								
17	MACRS deductions	for assets plac	ced in service in ta		na hefore 2022		17 57,650,127							
						one or more general								
	asset accounts, che													
						General Depreciation	Svet	em						
(a)	Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment us only—see instructions)	(d) Recovery	(e) Convention	(f) Method		epreciation deduction						
198	3-year property		2,755,126					777,921						
b	- '- '- '-		23,612,300					3,981,916						
	_		20,962,571					2,525,661						
	10-year property		2,951,127					214,665						
	15-year property		7,215,442					301,100						
	20-year property		2,646,234					83,978						
	25-year property		767,623	25 yrs.		S/L		46,675						
	Residential rental		260,010,248	27.5 yrs.	MM	5/L		5,642,677						
'		ermined type	49,531	27.5 yrs.	MM	5/L		31,097						
	1 1 1		83,597,029	39 yrs.	MM	5/L		1,375,141						
	Nonresidential real	al GDS cost	404,567,233	00 yrs.	MM	5/L	1							
	.' ' '		·					1,980,831						
		-ASSETS PIACE		y 2022 Tax Ye	ar Using the A	Iternative Depreciation	on Sy: □							
	Class life		817,556	10.		5/L		40,917						
	12-year		101,131	12 yrs.	1.11.1	5/L		23,328						
	30-year		4,362,328	30 yrs.	MM	5/L		84,874						
		46,255	1,865,240	40 yrs.	MM	S/L		32,460						
Par		See instructio	•											
21	Listed property. Ent						21	19,637,530						
22	Total. Add amount here and on the app					(g), and line 21. Enter see instructions	22	221,425,716						
23	For assets shown a	•		•	· .			221,120,110						
23	portion of the basis				ar, enter the	23 *								
	portion of the basis	attributable to	Section 200A COST	· · · ·		20		4500						

Form 4562 (2022) Page **2**

															90 -
Pa	rt V Listed Property (entertainment, rec Note: For any vehicl	reation, or amu	semen	t.)										ly 24a	ı,
	24b, columns (a) three														
044	Section A—Depreciation					See the							omobiles	_	
246	a Do you have evidence to supp	(c)	esimeni	use ciaii	(e)	Yes L				S trie evi		writtei	1! L Y6	es 🗀 r	No
	e of property (list Date placed inve	Business/ (e	d) ther basis		for depre- less/inves use only)	stment	(f) Recovery period	Me	(g) ethod/ vention		(h) preciation eduction		Elected s	(i) ection [·] ost	179
25	Special depreciation allow the tax year and used mo								25	410),554				
26	Property used more than 5		d busine	_											
		%		1	,803,54	18				1,42	8,177				
		% %				-									
27	Property used 50% or less		ısiness ı	ISE.											
<u></u> -	Troporty acod 5070 or look	% %	10111000 (122,468	3		S/L -	_	367	,457				
		%						S/L -	_						
		%			,162,85			S/L-							
	•								28		5,723				
_29	Add amounts in column (i)				<u>, i o</u>		of Vel					29	136,24	15	
Com	plete this section for vehicles								er" or i	related r	nerson	If you	ı provide	d vehi	cles
	our employees, first answer th														0.00
30				(a) (b) Vehicle 1 Vehicle 2				(c) Vehicle 3 Ve		(d) (e) ehicle 4 Vehicle					;
31	Total commuting miles drive	en during the year													
32	Total other personal (miles driven	(noncommuting)													
33	Total miles driven during lines 30 through 32	the year. Add													
34	Was the vehicle available tuse during off-duty hours?	•	Yes	No	Yes	No	Yes	No	Yes	No	Yes	N ₁	o Ye	s N	lo
	Was the vehicle used prim than 5% owner or related	person?													
36	Is another vehicle available f	<u>'</u>							L						
	Section C wer these questions to dete e than 5% owners or related		t an exc	eption					-				es who	aren'i	t
37	Do you maintain a written your employees?	policy statemen								ding co		-	-	s N	lo
38	Do you maintain a written employees? See the instr														
39	Do you treat all use of veh	icles by employe	es as pe	ersona	l use?										
	use of the vehicles, and re	etain the informat	ion rece	ived?					٠						
41	Do you meet the requirem														
	Note: If your answer to 37	7, 38, 39, 40, or 4	l1 is "Ye	es," do	n't com	plete S	Section E	3 for th	e cove	red vehi	icles.				
Par	rt VI Amortization								T	1-1	1				
	(a) Description of costs	(b) Date amortiza begins	ation	Amor	(c) tizable ar	nount	Co	(d) ode section		(e) Amortization period or percentage		(f) Amortization for this year		ear	
42	Amortization of costs that	begins during yo	ur 2022	tax ye	ar (see	instruc	tions):								
					074.00										
40	Amortization of acets that	hogon bofore ::-	UK 2020		274,220						42		572,34	10	
43	Amortization of costs that	began before yo	ui 2022	iax ye	ai						43		012,32		

44 Total. Add amounts in column (f). See the instructions for where to report .

778,471

Form 4562 (2022) Page **2**

Pai		d Property ainment, r					n other	vehic	les, cei	tain	aircraf	t, ar	nd pro	perty	used ⁻	for	
		For any vel				,	tandarc	d milea	ge rate	or de	ducting	j lea:	se exp	oense, d	comple	ete only	24a,
		olumns (a)		,							•						
		-Depreci															
24a	Do you have e	evidence to s	upport the (c)	business/inv	estment/	use clai	med? _	」Yes		24b	If "Yes	,″ is 1	the evi	dence w	/ritten?	☐ Yes	∐ No
	(a) e of property (list vehicles first)	(b) Date placed in service	Rusiness/	se Cost or d	d) other basis		for depre ness/inver use only	stment	(f) Recover period		(g) Method/ Convention			(h) reciation duction	E	(i) ected sec cos	
25	Special dep the tax year											25	11,08	86,628			
26	Property use	ed more tha	an 50% ir	n a qualifie	d busine	ess use	e:										
				%		7	5,929,1	05		_		_	8,30	0,460			
				% %													
27	Property use	 ed 50% or l			ısiness	IISO.											
	1 Topolty doc	0070 01 1		%	20111000		,858,49	98		SI	′L –		630	,195			
				%			,, -				′L –			<u> </u>			
			1	%		8	1,787,6	603		SI	′L –						
	Add amount											28		37,530			
29	Add amount	s in colum	n (i), line 2											.	29 2	,374,00	5
Com	plete this sect	ion for vehic	cles used						se of Ve ore than			or rel	ated p	erson. I	f you p	rovided	vehicles
to yo	to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.																
						a)		b)		(c)		(d)			e)		(f)
30	30 Total business/investment miles driven during the year (don't include commuting miles) . Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6								icie 6								
	Total commu	_															
32 Total other personal (noncommuting) miles driven																	
33	Total miles lines 30 thro																
34	Was the veh		•		Yes	No	Yes	No	Yes	No	y Ye	s	No	Yes	No	Yes	No
	use during o	~															
	Was the veh than 5% ow	ner or relat	ed perso	ń?													
_36	Is another vel				<u></u>			ļ.,,		Ļ.,							
۸۰۰	war thaaa awa			stions for												. who o w	
	wer these que e than 5% ow						i to con	ibietiri	y Section	11101	or veril	cies	useu	оу епір	noyees	willo ar	ent
37	Do you mair	_	-	y statemer	-			ersonal 	use of	vehic	cles, ind	cludi	ng co	mmutir 	ng, by	Yes	No
38	Do you mair employees?		•	£"			•								•		
39	Do you treat					-	•										
40	Do you prov				•			tain in	formatio	n fro	m you	r em	ploye	es aboi	ut the		
	use of the ve																
41	Do you mee																
Par	Note: If you	r answer to	37, 38,	39, 40, or 4	II IS "Ye	es," ao	n't com	ipiete s	Section	B for	tne co	vere	a veni	cies.			
r ai	Ailloi	uzauon											(e)	Т			
	(a) Description of costs (b) Date amortization begins (c) Amortizable amount Code section Description of costs (d) Code section Period or period or percentage																
42	Amortization	of costs th	nat begin	s during yo	our 2022	tax ye	ear (see	instru	ctions):								
	A						0,104,9							4.5		200 40	2
	Amortization Total Add a		_	_		-							•	43		,298,482 ,967,266	

Form **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

2022
Attachment
Sequence No. 26

Name(s) shown on tax return

Total Forms Filed = 136,072

Identifying number

SEC	TION A-Personal Use Property (Use this see	ction	to report casualt	ies and thefts	of property n	ot us	ed in a trade or
busi	ness or for income-producing purposes. For tax	years	2018 through 20	25, if you are ar	n individual, c	asual	ty or theft losses
	ersonal-use property are deductible only if the los						
	n 4684 (through line 12) for each casualty or thef				y. If reportin	g a q	ualified disaster
loss	, see the instructions for special rules that app	oly be	fore completing	this section.)			
If the	casualty or theft loss is attributable to a federally de	eclare	d disaster, check h	nere 🗌 and ente	r the DR-	0	r EM-
	aration number assigned by FEMA. (See instructions						
	Description of properties (show type, location (city, stat	•	7IP code) and date	a acquired for eac	h property) Lle	A 2 SA	narate line for each
•	property lost or damaged from the same casualty or the						
	enter the ZIP code for the property most affected on the I						
	Type of Property		City and State	•	ZIP Code		Date Acquired
	Property A						
	Property B						
	Property C						
	Property D						
				Pro	perties		
			Α	В	С		D
2	Cost or other basis of each property	2					
	Insurance or other reimbursement (whether or not you						
3	filed a claim) (see instructions)	3					
	Note: If line 2 is more than line 3, skip line 4.						
4	Gain from casualty or theft. If line 3 is more than line 2,						
	enter the difference here and skip lines 5 through 9 for						
	that column. See instructions if line 3 includes insurance or other reimbursement you did not claim, or you						
	received payment for your loss in a later tax year	4					
5	Fair market value before casualty or theft	5					
6	Fair market value after casualty or theft	6					
7	Subtract line 6 from line 5	7					
8	Enter the smaller of line 2 or line 7	8					
9	Subtract line 3 from line 8. If zero or less, enter -0	9					
10	Casualty or theft loss. Add the amounts on line 9 in colum	ns A tl	hrough D		<u> </u>	10	
11	Enter \$100 (\$500 if qualified disaster loss rules apply; see		-			11	
12	Subtract line 11 from line 10. If zero or less, enter -0		•			12	
	Caution: Use only one Form 4684 for lines 13 through 18						
13	Add the amounts on line 4 of all Forms 4684					13	1,230
14	Add the amounts on line 12 of all Forms 4684. If you have	losses	s not attributable to a	federally declared	l disaster see		
	the instructions			•		14	100,600
	Caution: See instructions before completing line 15.						
15	• If line 13 is more than line 14, enter the difference he	re and	on Schedule D. Do	not \			
	complete the rest of this section.		o cocaa.c 2. 20				
	• If line 13 is equal to line 14, enter -0- here. Do not com	plete th	ne rest of this section	١.			
	• If line 13 is less than line 14, and you have no qualified	d disas	ster losses subject to	the			
	\$500 reduction on line 11 on any Form(s) 4684, enter -0	- here	and go to line 16. If	you			
	have qualified disaster losses subject to the \$500 reduction					15	79,469
	and enter the smaller of this difference or the amount or reporting those losses. Enter that result here and on School						
	Schedule A (Form 1040-NR), line 7. If you claim the stand						
	Schedule A (Form 1040), line 16, the amount of your						
	Instructions for Form 1040). Do not complete the res		is section if all of	your			
	casualty or theft losses are subject to the \$500 reduction.			,			
16	Add lines 13 and 15. Subtract the result from line 14 .					16	22,065
17	Enter 10% of your adjusted gross income from Form 10	40, 10	40-SR, or 1040-NR,	line 11. Estates a	nd trusts, see		
	instructions					17	23,059
18	Subtract line 17 from line 16. If zero or less, enter -0 A						
	Schedule A (Form 1040-NR), line 6. Estates and trusts, ent	er the r	result on the "Other d	eductions" line of y	our tax return	18	18,339

Form **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

2022
Attachment Sequence No. 26

Name(s) shown on tax return

Total Forms Filed = 136,072

Identifying number

		Personal Use Property (Use this income-producing purposes. For							
of pe	ersonal-usen 4684 (thr	e property are deductible only if the ough line 12) for each casualty or particular for special rules that	e loss theft	is at even	tributable to a fe t involving perso	ederally declared onal-use propert	d disaster. Yo	u mu	st use a separate
	•	•							
		r theft loss is attributable to a federa	•		disaster, check	nere 🔛 and ente	r the DR	o	r EM
		nber assigned by FEMA. (See instruc		•					
1	property los	of properties (show type, location (city, st or damaged from the same casualty of code for the property most affected on	or theft	t. If yo	u checked the box				
		Type of Property			City and Stat	e	ZIP Code		Date Acquired
	Property A								
	Property B								
	Property C								
	Property D								
				-	Α	B	perties C		D
•	Coot or other	basis of each property	Г		A	В			D
		er basis of each property	Ī	2					
3	filed a claim	r other reimbursement (whether or not) (see instructions)	-	3					
4		asualty or theft. If line 3 is more than line	ne 2						
7		fference here and skip lines 5 through 9							
		. See instructions if line 3 includes insura							
		eimbursement you did not claim, or		4					
_		yment for your loss in a later tax year . value before casualty or theft	1	5					
		value after casualty or theft	- t	6					
7		e 6 from line 5	- 1	7					
8		naller of line 2 or line 7	T I	8					
9		e 3 from line 8. If zero or less, enter -0	- t	9					
10		theft loss. Add the amounts on line 9 in c			rough D	1	-	10	
11	•	\$500 if qualified disaster loss rules apply			ŭ			11	
		e 11 from line 10. If zero or less, enter -0-						12	
-		se only one Form 4684 for lines 13 through							
13		ounts on line 4 of all Forms 4684						13	21,531
		ounts on line 12 of all Forms 4684. If you	have l		not attributable to	a federally declared	l disaster see		
'-		ons					i disaster, see	14	5,433,134
		ee instructions before completing line 15.							
15		is more than line 14, enter the difference		and a	on Schedule D. Do	not \			
		e rest of this section.	70 11010	, and	on concadio B. B e	, 1101			
	• If line 13 is	s equal to line 14, enter -0- here. Do not	compl	ete the	e rest of this section	า.			
	• If line 13 i	s less than line 14, and you have no qu	alified	disast	er losses subject to	o the			
		tion on line 11 on any Form(s) 4684, ent			0	,			
		ed disaster losses subject to the \$500 red ne smaller of this difference or the amo						15	3,152,940
		ose losses. Enter that result here and on							
		(Form 1040-NR), line 7. If you claim the							
		(Form 1040), line 16, the amount of							
		for Form 1040). Do not complete the theft losses are subject to the \$500 reduce		or this	s section if all of	your			
16	·	3 and 15. Subtract the result from line 14				1		16	2,288,850
		of your adjusted gross income from For				. line 11. Estates a	nd trusts, see	10	2,200,000
	instructions							17	573,178
18		e 17 from line 16. If zero or less, enter - (Form 1040-NR), line 6. Estates and trusts				•	, .	18	1,866,629

Form	4684 (2022)	Attac	nment Sequence No	. 20	6				Page 2
Name	(s) shown on tax return. Do not enter name and identifying number i	f show	n on other side.				Identify	ing nur	mber
SEC	CTION D. Business and Income Draducing D		relin e						
	TION B—Business and Income-Producing P rt I Casualty or Theft Gain or Loss (Use a			220	ch casualty or th	oft \			
19	Description of properties (show type, location, and date at						h prop	erty lo	st or damaged from
19	the same casualty or theft. See instructions if claiming a								
	Property A								
	Property B								
	Property C								
	Property D				Duon				
			Α		В	erties	С		
20	Cost or adjusted basis of each property	20							
21	Insurance or other reimbursement (whether or not you								
	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							
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	27							
	Casualty or theft loss. Add the amounts on line 27. Enter the			9 0				28	
Pa	Summary of Gains and Losses (from se	epara	ate Parts I)		(b) Losses from	casualties	s or thef	ts	(c) Gains from
	(a) Identify casualty or theft				(i) Trade, business, rental, or royalty		Income		casualties or thefts includible in income
	Casualty or Theft	of P	roperty Held (On	property e Year or Less			-	
29					()	()	
					()	()	
30	Totals. Add the amounts on line 29		30	0	()	()	
31	Combine line 30, columns (b)(i) and (c). Enter the net gair	or (lo	ss) here and on F	orr	m 4797, line 14. If I	orm 47	97 is		
	not otherwise required, see instructions							31	4,249
32	Enter the amount from line 30, column (b)(ii), here. Individu								
	Schedule A (Form 1040), line 16; or Schedule A (Form 104 an employee.) Estates and trusts, partnerships, and S corp							00	4,881
	Casualty or Theft of						•	32	4,001
33	Casualty or theft gains from Form 4797, line 32		• •					33	1,923
34	custain, or more game norm continuous, more continuous				()	()	.,
					()	()	
35	Total losses. Add amounts on line 34, columns (b)(i) and (b)(ii) .	39	5	(16,649)	(3,	442)	
36	Total gains. Add lines 33 and 34, column (c)							36	7,995
37	Add amounts on line 35, columns (b)(i) and (b)(ii)							37	19,769
38	If the loss on line 37 is more than the gain on line 36:	:	(l) h D-						
č	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	797, I	ine 14. If Form 4					38a	15,352
Ŀ	Enter the amount from line 35, column (b)(ii), here. Individu			rom	n income-producing	proper	ty on		- , -
	Schedule A (Form 1040), line 16; or Schedule A (Form 104	0-NR)	, line 7. (Do not in	clu	de any loss on prop	erty use	ed as		
	an employee.) Estates and trusts, enter on the "Other corporations, see the <i>Note</i> below		•			ships a	nd S	38b	3,116
20	•					 Dorto	hina	JOD	<u> </u>
39	If the loss on line 37 is less than or equal to the gain on line see the <i>Note</i> below. All others, enter this amount on Form 4	797, li	ne 3					39	7,738
	Note: Partnerships, enter the amount from line 38a, 38b, of S corporations, enter the amount from line 38a or 38b on F								

Form 4684 (2022) Attachment Sequence No. 26 Page 2

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

arrio	gy shown on tax rotani. Do not onto maine and too hit ying nambo.	. 0110111	remember side.		lacitary		
EC	TION B—Business and Income-Producing P	rope	rty				
Pa	t I Casualty or Theft Gain or Loss (Use a	separ	rate Part I for eac	ch casualty or th	eft.)		
19	Description of properties (show type, location, and date at the same casualty or theft. See instructions if claiming a						
	Property A						
	Property B						
	Property C						
	Property D						
				Prope	erties		
			Α	В	С		D
20	Cost or adjusted basis of each property	20					
21	Insurance or other reimbursement (whether or not you						
	filed a claim). See the instructions for line 3 Note: If line 20 is more than line 21, skip line 22.	21					
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					
	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	27					
	Casualty or theft loss. Add the amounts on line 27. Enter the			or line 34. See instruc	ctions	28	
Pai	t II Summary of Gains and Losses (from se	epara	ite Parts I)	(b) Losses from o	asualties or the	fts	(c) Gains from
	(a) Identify casualty or theft			(i) Trade, business, rental, or royalty property	(ii) Income producing pro		casualties or thefts includible in income
	Casualty or Theft	of Pr	operty Held On	e Year or Less			
29				()	(
				()	()	
	Totals. Add the amounts on line 29			()	(
31	Combine line 30, columns (b)(i) and (c). Enter the net gain not otherwise required, see instructions	or (lo	ss) here and on Form	m 4797, line 14. If F 	orm 4797 is	31	-315,315
32	Enter the amount from line 30, column (b)(ii), here. Individu	uals, ei	nter the amount fron	n income-producing			
	Schedule A (Form 1040), line 16; or Schedule A (Form 104 an employee.) Estates and trusts, partnerships, and S corp						4 404 004
	Casualty or Theft of					32	1,134,061
	Casualty or theft gains from Form 4797, line 32		<u> </u>			00	74,002
33 34	Casualty of their gains from Form 4797, line 32			(33	74,002
J-T				()	()	
35	Total losses. Add amounts on line 34, columns (b)(i) and (b)(ii)	35	(992,607)	(969,415)	
	Total gains. Add lines 33 and 34, column (c)					36	245,443
	Add amounts on line 35, columns (b)(i) and (b)(ii)					37	1,962,022
	If the loss on line 37 is more than the gain on line 36:						, ,
	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					00-	005.405
	instructions					38a	-985,105
b	Enter the amount from line 35, column (b)(ii), here. Individu Schedule A (Form 1040), line 16; or Schedule A (Form 104	0-NR),	line 7. (Do not inclu	de any loss on prop	erty used as		
	an employee.) Estates and trusts, enter on the "Other					001	923,546
	corporations, see the <i>Note</i> below					38b	323,340
39	If the loss on line 37 is less than or equal to the gain on line see the <i>Note</i> below. All others, enter this amount on Form 4	797, lii	ne 3			39	236,877
	Note: Partnerships, enter the amount from line 38a, 38b, of S corporations, enter the amount from line 38a or 38b on F						

Form	n 4684 (2022) Attachment Sequence	ce No. 26	Page 3
Nam	e(s) shown on tax return		Identifying number
SE(CTION C—Theft Loss Deduction for Ponzi-Type Investment ocedure 2009-20 (Complete this section in lieu of Appendix A in	Scheme Using the Prod Revenue Procedure 200	cedures 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 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	5%) 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 (SIPC) recovery	y 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. Then comp	olete Section B,	
	Part II	51	3,072
Pa	rt II Required Statements and Declarations (See instruction	ons.)	
	am claiming a theft loss deduction pursuant to Revenue Procedure 2009-20 fr dividual or entity.	om a specified fraudulent arra	ngement conducted by the following
	ame of individual or entity		
	expayer identification number (if known)		
	Idress		
	lave written documentation to support the amounts reported in Part I of this Sec	etion C	
	m a qualified investor, as defined in section 4.03 of Revenue Procedure 2009-2		
	have determined the amount of my theft loss deduction using 0.95 on line 46 a		purgued and do not intend to purgue
	y potential third-party recovery, as that term is defined in section 4.10 of Reven		pursued and do not intend to pursue
• I a	gree to comply with the conditions and agreements set forth in Revenue Proced	dure 2009-20 and this Section	C.
ad	I have already filed a return or amended return that does not satisfy the cond ljustments or actions that are necessary to comply with those conditions. The tatte(s) on which they were filed are as follows:		

Form	4684 (2022) Attachment Sequence No. 26	ŕ	Page	3
	e(s) shown on tax return		Identifying number	
SE(CTION C—Theft Loss Deduction for Ponzi-Type Investment Scheme Usin cedure 2009-20 (Complete this section in lieu of Appendix A in Revenue Pro	ng the Pro cedure 20	cedures in Revenue 09-20. See instructions.)	
Pa	rt I Computation of Deduction			Ī
40	Initial investment	40		
41	Subsequent investments (see instructions)	41		
42	Income reported on your tax returns 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	Actual recovery	48		
49	Potential insurance/Securities Investor Protection Corporation (SIPC) 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. Then complete Section B,			
	Part II	51	1,387,984	
Pa	rt II Required Statements and Declarations (See instructions.)			
inc	m claiming a theft loss deduction pursuant to Revenue Procedure 2009-20 from a specified fr lividual or entity. me of individual or entity	audulent arra	angement conducted by the followir	ıç
Ta	xpayer identification number (if known)			
	dress			
	ave written documentation to support the amounts reported in Part I of this Section C.			
	m a qualified investor, as defined in section 4.03 of Revenue Procedure 2009-20.			
	have determined the amount of my theft loss deduction using 0.95 on line 46 above, I declare the potential third-party recovery, as that term is defined in section 4.10 of Revenue Procedure 200 potential third-party recovery, as that term is defined in section 4.10 of Revenue Procedure 200 potential third-party recovery, as that term is defined in section 4.10 of Revenue Procedure 200 potential third-party recovery, as that term is defined in section 4.10 of Revenue Procedure 200 potential third-party recovery, as that term is defined in section 4.10 of Revenue Procedure 200 potential third-party recovery, as that term is defined in section 4.10 of Revenue Procedure 200 potential third-party recovery.		t pursued and do not intend to pursu	ıe
• l a	gree to comply with the conditions and agreements set forth in Revenue Procedure 2009-20 and	this Section	C.	
ad	have already filed a return or amended return that does not satisfy the conditions in section (sustments or actions that are necessary to comply with those conditions. The tax year(s) for which they were filed are as follows:		, ,	

orm	4684 (2022)	Attachment Sequence No. 26	Page 4
Name	e(s) shown on tax	return	Identifying number
		ection To Deduct Federally Declared Disaster Loss in Preceding Tax Yea	r (See instructions.)
Pa	rt I Elect	ion Statement	
	•	e information below, the taxpayer elects, under section 165(i) of the Internal Revenue Code, to dedu If that occurred in a federally declared disaster area in the tax year immediately preceding the tax ye	•
	ch this Section I deduction.	O to your return or amended return for the tax year immediately preceding the tax year the loss w	as sustained to claim the disaster
52	Provide the na	me or a description of the federally declared disaster.	
53	Provide the da	te or dates (mm/dd/yyyy) of the loss or losses attributable to the federally declared disaster.	
54	. ,	dress, including the city or town, county or parish, state, and ZIP code where the damaged or des	stroyed property was located at
Pa	rt II Revo	cation of Prior Election	
attrib	•	ne information below, the taxpayer revokes the prior election under section 165(i) of the Interna erally declared disaster and that occurred in a federally declared disaster area in the tax year im ed.	
	ch this Section ster loss deduct	D to your amended return for the tax year immediately preceding the tax year the loss was sion.	sustained to remove the previous
55		me or a description of the federally declared disaster and the address of the property that was dation was claimed.	maged or destroyed and for
56	. ,	te (mm/dd/yyyy) you filed the prior election, which you are now revoking. (See instructions and no , 2016.)	te that new rules went into effect
57		payment or otherwise provide evidence for, or explanation of, your arrangements for the repayment or received and which resulted from the prior election (which you are now revoking).	·

Form **4684** (2022)

Attachment Sequence No. 26 Page 4 Name(s) shown on tax return Identifying number SECTION D-Election To Deduct Federally Declared Disaster Loss in Preceding Tax Year (See instructions.) **Election Statement** By providing all of the information below, the taxpayer elects, under section 165(i) of the Internal Revenue Code, to deduct a loss attributable to a federally declared disaster and that occurred in a federally declared disaster area in the tax year immediately preceding the tax year the loss was sustained. Attach this Section D to your return or amended return for the tax year immediately preceding the tax year the loss was sustained to claim the disaster loss deduction. **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 disaster. 54 Specify the address, including the city or town, county or parish, state, and ZIP code where the damaged or destroyed property was located at the time of the disaster. **Revocation of Prior Election** Part II By providing all of the information below, the taxpayer revokes the prior election under section 165(i) of the Internal Revenue Code to deduct a loss attributable to a federally declared disaster and that occurred in a federally declared disaster area in the tax year immediately preceding the tax year Attach this Section D to your amended return for the tax year immediately preceding the tax year the loss was sustained to remove the previous disaster loss deduction.

55 Provide the name or a description of the federally declared disaster and the address of the property that was damaged or destroyed and for

56 Specify the date (mm/dd/yyyy) you filed the prior election, which you are now revoking. (See instructions and note that new rules went into effect

57 Enclose your payment or otherwise provide evidence for, or explanation of, your arrangements for the repayment of the amount of any credit or

refund which you received and which resulted from the prior election (which you are now revoking).

which the election was claimed.

on October 13, 2016.)

Form **4684** (2022)

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	otal Forms Filed	= 3,362,30	1		Identifying n	umbe	r
1a	Enter the gross proceeds substitute statement) that				n Form(s) 1099-B or	r 1099-S (or	1a	
b	Enter the total amount o MACRS assets	f gain that you are	e including on line	es 2, 10, and 24 d	ue to the partial dis	spositions of	1b	
С	Enter the total amount of assets	•	-		ne partial dispositions		1c	
Part	Sales or Exchan	ges of Propert	ty Used in a Ti	rade or Busine	ss and Involunta	ary Conver	sions	From Other
	Than Casualty o	r Theft—Most	Property Heio	More Than 1	(see Instruction)	CTIONS) (f) Cost or o	ther	
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	allowed or allowable since acquisition	basis, plu improvements expense of s	s and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
							_	2,182,329
3	Gain, if any, from Form 46	· ·					3	8,017 185,431
4	Section 1231 gain from in		*				4 5	16,176
5 6	Section 1231 gain or (loss Gain, if any, from line 32,		-				6	720,749
7	Combine lines 2 through 6		•				7	2,867,158
	Partnerships and S corp line 10, or Form 1120-S, S	orations. Report t	the gain or (loss) fo	ollowing the instruct		Schedule K,		
	Individuals, partners, Sofrom line 7 on line 11 bel 1231 losses, or they were Schedule D filed with your	ow and skip lines a recaptured in an e	8 and 9. If line 7 is arlier year, enter th	s a gain and you d ne gain from line 7 a	idn't have any prior	year section		
8	Nonrecaptured net section	n 1231 losses from	prior years. See in	structions			8	286,211
9	Subtract line 8 from line 7 line 9 is more than zero, e capital gain on the Schedu	nter the amount fro	m line 8 on line 12	below and enter the	ne gain from line 9 as	a long-term	9	173,888
Part								,
10	Ordinary gains and losses				eld 1 year or less):			
								417,068
11	Loss, if any, from line 7						11	(707,980)
12	Gain, if any, from line 7 or						12	286,211
13	Gain, if any, from line 31						13	608,584
14	Net gain or (loss) from For	· ·					14	9,573
15 16	Ordinary gain from installr		•				15	376 3,405
16 17	Ordinary gain or (loss) from Combine lines 10 through	`	•				16 17	3,405 1,821,973
18	For all except individual rea and b below. For individual	eturns, enter the an	nount from line 17	on the appropriate			1/	1,021,913
а	If the loss on line 11 include from income-producing pro	es a loss from Form	4684, line 35, colu	mn (b)(ii), enter that p				
	employee.) Identify as from						18a	0
b	Redetermine the gain or (Form 1040), Part I, line 4	• •	-	•	. Enter here and on		18b	1,821,973

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

	110101100 0011100							- 4
Name(s) shown on return	otal Forms Filed	= 3,362,30)1		Identifying r	umbe	r
1a	Enter the gross proceeds substitute statement) that				n Form(s) 1099-B o		1a	
b	Enter the total amount o MACRS assets	f gain that you ar	e including on line	es 2, 10, and 24 d	ue to the partial dis	spositions of	1b	
С	Enter the total amount of assets		-				1c	
Pari								From Other
	Than Casualty of							
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or o basis, plu improvements expense of s	s and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
								299,966,028
3	Gain, if any, from Form 46	1 884 line 39					3	233,409
4	Section 1231 gain from in						4	12,217,605
5	Section 1231 gain or (loss						5	4,352,413
6	Gain, if any, from line 32,						6	103,831,652
7	Combine lines 2 through 6	6. Enter the gain or	(loss) here and on	the appropriate line	e as follows		7	420,601,107
	line 10, or Form 1120-S, S Individuals, partners, S from line 7 on line 11 bel 1231 losses, or they were Schedule D filed with your	corporation share ow and skip lines recaptured in an e	eholders, and all 8 and 9. If line 7 i earlier year, enter the	others. If line 7 is is a gain and you dhe gain from line 7 a	idn't have any prior	year section		
8	Nonrecaptured net section	n 1231 losses from	prior years. See ii	nstructions			8	12,000,391
9	Subtract line 8 from line 7 line 9 is more than zero, e capital gain on the Sched	nter the amount fro	om line 8 on line 12	2 below and enter th	ne gain from line 9 as	a long-term	9	69,149,242
Part				,				
10	Ordinary gains and losses	not included on lir	nes 11 through 16	(include property he	eld 1 year or less):	1		
								10.962.400
	Loop if any from Pro 7							19,863,496
11 12	Loss, if any, from line 7 Gain, if any, from line 7 or						11 12	(12,252,968) 4,527,745
13	Gain, if any, from line 7 or Gain, if any, from line 31						13	20,822,027
14	Net gain or (loss) from For						14	-360,950
15	Ordinary gain from installr						15	135,298
16	Ordinary gain or (loss) from		•				16	411,396
17	Combine lines 10 through		0				17	33,146,043
18	For all except individual re a and b below. For individual	eturns, enter the ar	mount from line 17	on the appropriate				
а	from income-producing pro	operty on Schedule	A (Form 1040), lin	e 16. (Do not include	e any loss on propert	y used as an		
	employee.) Identify as from	•					18a	0
b	Redetermine the gain or (Form 1040), Part I, line 4	•	-	•	. Enter here and on		18b	33,146,043

Form 4797 (2022) Page **2**

Par	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 1255	5 prope	rty:			(b) Date acq (mo., day, y		(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
0	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						
4	Total gain. Subtract line 23 from line 20	24						
25	If section 1245 property:						\neg	
а	Depreciation allowed or allowable from line 22	25a						
b	Enter the smaller of line 24 or 25a	25b	591,865					
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	18,472					
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	Soil, water, and land clearing expenses	27a						
b	Line 27a multiplied by applicable percentage. See instructions	27b						
С	Enter the smaller of line 24 or 27b	27c	*					
8	If section 1254 property:							
	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a	500					
	Enter the smaller of line 24 or 28a	28b	522				\longrightarrow	
29	If section 1255 property:						}	
а	Applicable percentage of payments excluded from income under section 126. See instructions	29a						
h	Enter the smaller of line 24 or 29a. See instructions	29a	*				$\overline{}$	
	mary of Part III Gains. Complete property colum		through D through	gh line 29b	before	e going to lir	ie 30.	
								4 000 007
80	Total gains for all properties. Add property columns A thro	•					30	1,089,237
1	Add property columns A through D, lines 25b, 26g, 27c, 26						31	608,585
32		<u></u>					32	722,415
ar'	Recapture Amounts Under Sections 17 (see instructions)	9 and	l 280F(b)(2) Wh	en Busine	ss Us	se Drops to	50%	
						(a) Section 179	n	(b) Section 280F(b)(2)
3	Section 179 expense deduction or depreciation allowable	in prior	years		33			
4	Recomputed depreciation. See instructions				34			
35	Recapture amount, Subtract line 34 from line 33. See the i	nstructi	ons for where to re	port	35			

Form 4797 (2022) Page **2**

Par	t III Gain From Disposition of Property Und (see instructions)	ler Se	ctions 1245, 12	250, 1252, 1	254,	and 1255		
19	(a) Description of section 1245, 1250, 1252, 1254, or 125	5 prope	rty:			(b) Date acque (mo., day,)		(c) Date sold (mo., day, yr.)
Α								
В								
С								
D								
	These columns relate to the properties on lines 19A through 19D		Property A	Property	В	Property	С	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	20,299,330					
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						
e	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
g	Add lines 26b, 26e, and 26f	26g	434,437					
 27	If section 1252 property: Skip this section if you didn't	1 5	,					
	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	88,584					
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	*	1 11 651				
Sun	nmary of Part III Gains. Complete property colur	nns A	through D throug	gh line 29b b	efore	e going to lin	e 30.	
								404 700 004
30	Total gains for all properties. Add property columns A thro	-					30	124,726,884
31	Add property columns A through D, lines 25b, 26g, 27c, 2						31	20,822,027
32							32	103,904,857
Par	Recapture Amounts Under Sections 17 (see instructions)	79 and	I 280F(b)(2) Wh	en Busines	ss Us	se Drops to	50%	or Less
						(a) Section 179	n	(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				35			

Department of the Treasury Internal Revenue Service

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 Attachment Sequence No. 37

Name(s	shown on tax return						Your soc	ial secu	urity numl	ber	
	Total Forms File	d = 4	431,424				Employe	· ID nur	mber (EIN	l), if any	 '
Α	Did you actively participate in the operati	ion of	this farm during	2022?	See instr	uctions			☐ Ye	s 🗌	No
Part											nt.
1	Income from production of livestock, pro	duce,	grains, and oth	er crops				1	18	1,088	
2a	Cooperative distributions (Form(s) 1099-l	PATR)	2a	75,3	314	2b Taxable an	nount	2b			
3a	Agricultural program payments (see instr	uction	ns) 3a	110,	206	3b Taxable an	nount	3b	108	8,805	
4	Commodity Credit Corporation (CCC) loa	ans (se	ee instructions):								
а	CCC loans reported under election .		1 1					4a		*	
b	CCC loans forfeited			*		4c Taxable am	nount	4c			
5	Crop insurance proceeds and federal cro	-		•	•	l .					
а	Amount received in 2022			32.6		5b Taxable an		5b	28	3,714	
C	If election to defer to 2023 is attached, cl					rom 2021		5d	21	1,112	
6 7	Other income, including federal and state Gross farm rental income. Add amount							6		1,112	
	and on Schedule E (Form 1040), line 42							7	410	3,104	
Part	II Expenses—Farm Rental Prope	erty.	Do not include	e perso	nal or liv	ving expenses.					
8	Car and truck expenses (see			21	Pensio	n and profit-	sharing				
	Schedule F (Form 1040) instructions).				•			21		*	
_	Also attach Form 4562	8	34,736	22	Rent or						
9	Chemicals	9	65,218 4,615	а	Vehicle	es, machinery, nent (see instruct		00	l.		
10	Conservation expenses (see instructions)	10	33,366	_				22a			
11 12	Custom hire (machine work)	11	33,300	b	-	and, animals, etc and maintenan		22b 23	10	2 270	
12	deduction not claimed elsewhere	12	121,704	24		and maintenan		24		3,278 7,450	
13	Employee benefit programs other than	12	121,701	25		e and warehousi		25		,430	
13	on line 21 (see Schedule F (Form 1040)			26	_	es	_	26	62	3,505	
	instructions)	13	*	27				27		8,879	
14	Feed	14	7,900	28		3		28		0,0.0	
15	Fertilizers and lime	15	64,646	29	Veterin						
16	Freight and trucking	16			medicii	ne		29			
17	Gasoline, fuel, and oil	17	70,272	30	Other e	expenses (specif	y):				
18	Insurance (other than health)	18	178,819	a				30a			
19	Interest (see instructions):			b				30b			
a	Mortgage (paid to banks, etc.)	19a	37,363	c				30c			
b	Other	19b	11,426	d				30d			
20	Labor hired (less employment credits) (see Schedule F (Form 1040)			e				30e			
	instructions)	20	14,415	f				30f 30g			
31	Total expenses. Add lines 8 through 30g			g				31	37	1,956	
32	Net farm rental income or (loss). Subtra	-						- 01		1,000	
52	on Schedule E (Form 1040), line 40. If the							32	42	0,290	
33	Reserved for future use							33			
34	If line 32 is a loss, check the I	box 1	that describes	vour	investme	ent in this ac	tivity.	34a	All inve	stment is	at risk
	See instructions						}	34b	Some in	nvestmer	
_						rryover (-) = 42,			at risk.		
С	You may have to complete Form 8582 you checked. If you checked box 34b, y										
	either case, enter the deductible loss he							34c	65	3,550	
			5050010 L	۱. ٠	,			UTU	00	,,,,,,,,,,	

Department of the Treasury Internal Revenue Service

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 Attachment Sequence No. **37**

Name(s)	shown on tax return						Your soci	ial secu	urity number	•
	Total Forms File	d = 4	431,424				Employer	r ID nur	mber (EIN), in	f any
Α	Did you actively participate in the operati	on of	this farm during	2022? \$	See instr	uctions			Yes	☐ No
Part									the equiv	/alent.
1	Income from production of livestock, pro	duce,	grains, and othe	r crops				1	7,039,	,975
2a	Cooperative distributions (Form(s) 1099-l			2,146		2b Taxable an	nount	2b		
3a	Agricultural program payments (see instr	uction	ns) 3a	872,		3b Taxable an	nount	3b	837,8	315
4	Commodity Credit Corporation (CCC) loa	ans (se	ee instructions):							
а	CCC loans reported under election .							4a	*	
b	CCC loans forfeited		4b	*		4c Taxable an	nount	4c		
5	Crop insurance proceeds and federal cro			see inst	ructions)	:				
а	Amount received in 2022			528.		5b Taxable an		5b	382,0)12
С	If election to defer to 2023 is attached, cl					rom 2021		5d	0.750	4.40
6	Other income, including federal and state							6	3,750,	149
7	Gross farm rental income. Add amount and on Schedule E (Form 1040), line 42							7	13,762	!,177
Part	II Expenses—Farm Rental Prope	erty.	Do not include	perso	nal or liv	ing expenses.				
8	Car and truck expenses (see			21		n and profit-				
	Schedule F (Form 1040) instructions).				-			21	*	
_	Also attach Form 4562	8	40,054	22	Rent or					
9	Chemicals	9	681,790 37,860	a	Vehicle	s, machinery ent (see instruc		00		
10	Conservation expenses (see instructions)	10	218,519			•		22a		
11 12	Custom hire (machine work) Depreciation and section 179 expense	11	210,519	b		and, animals, etc and maintenan		22b	245.0	240
12	deduction not claimed elsewhere	12	1,455,795	23 24	•	and maintenan		23	345,8 441,8	
13	Employee benefit programs other than	12	1,400,700	25		e and warehousi		25	441,0)44
13	on line 21 (see Schedule F (Form 1040)			26		es		26	126,9	200
	instructions)	13	*	27				27	1,125,	
14	Feed	14	22,327	28				28	1,120,	000
15	Fertilizers and lime	15	998,274	29	Veterin					
16	Freight and trucking	16	,			ne		29		
17	Gasoline, fuel, and oil	17	137,284	30	Other e	expenses (specif	y):			
18	Insurance (other than health)	18	491,875	а				30a		
19	Interest (see instructions):			b				30b		
а	Mortgage (paid to banks, etc.)	19a	417,849	С				30c		
b	Other	19b	98,620	d				30d		
20	Labor hired (less employment credits)			е				30e		
	(see Schedule F (Form 1040)		00.000	f				30f		
-04	instructions)	20	82,303	g				30g	9.022	266
31	Total expenses. Add lines 8 through 30g							31	8,033,	200
32	Net farm rental income or (loss). Subtraction Schedule E (Form 1040), line 40. If the							32	5,728	,911
33	Reserved for future use							33		
34	If line 32 is a loss, check the I	oox 1	that describes	your	investme	ent in this ac	tivity.	34a	All investm	ent is at risk
	See instructions		ible loss (+) / su	-			1	34b	Some investat risk.	stment is no
С	You may have to complete Form 8582									
	you checked. If you checked box 34b, y									
	either case, enter the deductible loss he	re and	d on Schedule E	(Form	1040), lin	e 40. See instruc	ctions.	34c	682,2	210

* 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

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

2022
Attachment
Sequence No. 51

Form **4952** (2022)

Identifying number Name(s) shown on return 1,365,945 Total Forms Filed = Part I **Total Investment Interest Expense** Investment interest expense paid or accrued in 2022 (see instructions) 987,884 2 Disallowed investment interest expense from 2021 Form 4952, line 7 2 578,669 3 1,353,106 Part II **Net Investment Income** Gross income from property held for investment (excluding any net gain from 4a 4a 1,254,072 Qualified dividends included on line 4a 4b 1,046,690 4c 1,208,653 **d** Net gain from the disposition of property held for investment 4d 491,757 Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions 459,887 4e Subtract line 4e from line 4d 4f f 150,749 Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 137,330 1,226,239 h 4h 355.476 5 5 **Net investment income.** Subtract line 5 from line 4h. If zero or less, enter -0- . 6 1,185,301 6 Part III **Investment Interest Expense Deduction** 7 Disallowed investment interest expense to be carried forward to 2023. Subtract line 6 from line 7 681.059 Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions 8 1,172,616

Cat. No. 13177Y

Form **4952**

Department of the Treasury Internal Revenue Service

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

2022
Attachment
Sequence No. 51

Form **4952** (2022)

Identifying number Name(s) shown on return Total Forms Filed = 1,365,945 Part I **Total Investment Interest Expense** Investment interest expense paid or accrued in 2022 (see instructions) 32,756,456 2 Disallowed investment interest expense from 2021 Form 4952, line 7 2 35,458,650 3 **Total investment interest expense.** Add lines 1 and 2 68,215,106 Part II **Net Investment Income** Gross income from property held for investment (excluding any net gain from 220,490,210 4a Qualified dividends included on line 4a 107,949,870 4c 112,540,340 **d** Net gain from the disposition of property held for investment 370,068,529 Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions 329,596,910 4f 40,471,619 Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 4,795,653 157,807,612 4h 10,600,826 5 5 **Net investment income.** Subtract line 5 from line 4h. If zero or less, enter -0- 6 149,457,431 6 Part III **Investment Interest Expense Deduction** 7 Disallowed investment interest expense to be carried forward to 2023. Subtract line 6 from line 7 39.581.548 8 28,633,558 Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions

Cat. No. 13177Y

Form **5329**

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

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Fo

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

2022

Attachment
Sequence No. 29

Name of individual subject to additional tax. If married filing jointly, see instructions. Your social security number Total Forms Filed = 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 spaces if You Are Filing This 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. 1 Early distributions includible in income (see instructions). For Roth IRA distributions, see instructions. 1,667,143 2 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: 658.908 3 3 1,255,846 Additional tax. Enter 10% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040), line 8 . . . 1,241,259 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 8q, from an ABLE account. Distributions included in income from a Coverdell ESA, a QTP, or an ABLE account 5 248,827 6 Distributions included on line 5 that are not subject to the additional tax (see instructions) 6 7 7 173,607 8 Additional tax. Enter 10% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040), line 8. 8 169,285 Additional Tax on Excess Contributions to Traditional IRAs. Complete this part if you contributed more to your Part III traditional IRAs for 2022 than is allowable or you had an amount on line 17 of your 2021 Form 5329. 9 Enter your excess contributions from line 16 of your 2021 Form 5329. See instructions. If zero, go to line 15 If your traditional IRA contributions for 2022 are less than your maximum 10 allowable contribution, see instructions. Otherwise, enter -0- 10 11 2022 traditional IRA distributions included in income (see instructions) . . . 12 2022 distributions of prior year excess contributions (see instructions) . . . 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 56,944 Additional tax. Enter 6% (0.06) of the smaller of line 16 or the value of your traditional IRAs on December 31, 2022 (including 2022 contributions made in 2023). Include this amount on Schedule 2 (Form 1040), line 8 17 45.928 Part IV Additional Tax on Excess Contributions to Roth IRAs. Complete this part if you contributed more to your Roth IRAs for 2022 than is allowable or you had an amount on line 25 of your 2021 Form 5329. Enter your excess contributions from line 24 of your 2021 Form 5329. See instructions. If zero, go to line 23 18 18 76.907 19 If your Roth IRA contributions for 2022 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0- 19 20 2022 distributions from your Roth IRAs (see instructions) 5,416 21 21 22 Prior year excess contributions. Subtract line 21 from line 18. If zero or less, enter -0-. 22 23 Excess contributions for 2022 (see instructions) 23 75,771 24 24 122,622 Additional tax. Enter 6% (0.06) of the smaller of line 24 or the value of your Roth IRAs on December 31,

2022 (including 2022 contributions made in 2023). Include this amount on Schedule 2 (Form 1040), line 8

Form **5329**

Department of the Treasury Internal Revenue Service

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

2022

Attachment Sequence No. 29

Name of individual subject to additional tax. If married filing jointly, see instructions. Your social security number Total Forms Filed = 2,679,325 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 spaces if You Are Filing This 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. 28,327,509 1 2 Early distributions included on line 1 that are not subject to the additional tax (see instructions). Enter the appropriate exception number from the instructions: 9,985,273 3 3 18,339,225 Additional tax. Enter 10% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040), line 8 . . . 4 1.848.451 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 8q, from an ABLE account. 5 Distributions included in income from a Coverdell ESA, a QTP, or an ABLE account 943,654 6 Distributions included on line 5 that are not subject to the additional tax (see instructions) 6 7 7 647,094 8 Additional tax. Enter 10% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040), line 8 . . . 8 64,804 Additional Tax on Excess Contributions to Traditional IRAs. Complete this part if you contributed more to your Part III traditional IRAs for 2022 than is allowable or you had an amount on line 17 of your 2021 Form 5329. 9 Enter your excess contributions from line 16 of your 2021 Form 5329. See instructions. If zero, go to line 15 If your traditional IRA contributions for 2022 are less than your maximum 10 allowable contribution, see instructions. Otherwise, enter -0- 10 11 2022 traditional IRA distributions included in income (see instructions) . . . 12 2022 distributions of prior year excess contributions (see instructions) . . . 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 16 371,472 Additional tax. Enter 6% (0.06) of the smaller of line 16 or the value of your traditional IRAs on December 31, 2022 (including 2022 contributions made in 2023). Include this amount on Schedule 2 (Form 1040), line 8 17 21,658 Part IV Additional Tax on Excess Contributions to Roth IRAs. Complete this part if you contributed more to your Roth IRAs for 2022 than is allowable or you had an amount on line 25 of your 2021 Form 5329. Enter your excess contributions from line 24 of your 2021 Form 5329. See instructions. If zero, go to line 23 18 18 347.982 19 If your Roth IRA contributions for 2022 are less than your maximum allowable 19 2022 distributions from your Roth IRAs (see instructions) 20 50,324 21 21 22 Prior year excess contributions. Subtract line 21 from line 18. If zero or less, enter -0-. . . 22 23 23 303,964 24 569,359 Additional tax. Enter 6% (0.06) of the smaller of line 24 or the value of your Roth IRAs on December 31, 2022 (including 2022 contributions made in 2023). Include this amount on Schedule 2 (Form 1040), line 8 108,656

Form 53	29 (202	2)						Page 2
Part				ntributions to Coverdell ESAs. On the control of th	•	•		•
26	Enter	the excess c	contributions from line 32	of your 2021 Form 5329. See instruction	ns. If zero, g	o to line 31	26	
27			,	ESAs for 2022 were less than the ructions. Otherwise, enter -0	27			
28	2022	distributions	s from your Coverdell ES	As (see instructions)	28			
29	Add I	ines 27 and 2	28				29	
30	Prior	year excess	contributions. Subtract	line 29 from line 26. If zero or less, ente	er -0 .		30	
31				etions)			31	
32	Total	excess cont	tributions. Add lines 30 a	ınd 31			32	*
33	Dece	mber 31, 20	22 (including 2022 conti	smaller of line 32 or the value of yor ibutions made in 2023). Include this a	amount on S	Schedule 2	33	*
Part '				ributions to Archer MSAs. Comple		•		•
		more to your	r Archer MSAs for 2022	than is allowable or you had an amoun	t on line 41	of your 2021	Form	າ 5329.
34	Enter	the excess c	contributions from line 40	of your 2021 Form 5329. See instructio	ns. If zero, g	o to line 39	34	
35				for 2022 are less than the maximum otherwise, enter -0	35			
36			•	from Form 8853, line 8	36			
37	Add I	ines 35 and 3	36				37	
38		•		line 37 from line 34. If zero or less, ente			38	
39				etions)			39	
40	Total	excess cont	tributions. Add lines 38 a	ınd 39			40	7,253
41				smaller of line 40 or the value of y				
				ributions made in 2023). Include this a				
Part \				ntributions to Health Savings A			41	5,033
42		amount on li	ine 49 of your 2021 Form	mployer contributed more to your H n 5329. 8 of your 2021 Form 5329. If zero, go			lowab	le or you had an
43				2022 are less than the maximum				
				Otherwise, enter -0	43			
44	2022	distributions	s from your HSAs from F	orm 8889, line 16	44			
45	Add I	ines 43 and	44				45	
46		•		line 45 from line 42. If zero or less, ente			46	
47				etions)			47	
48				ınd 47			48	515,604
49	2022			naller of line 48 or the value of your Fig. 2023). Include this amount on Schedul			49	401,258
Part \				ributions to an ABLE Account. (Complete th	is part if con	tributi	ons to your ABLE
			2022 were more than is					
50			•	ctions)			50	*
51	Dece	mber 31, 202	22. Include this amount	smaller of line 50 or the value of your schedule 2 (Form 1040), line 8 .			51	*
Part				imulation in Qualified Retirement equired distribution from your qualified			As). C	Complete this part
52	Minin	num required	d distribution for 2022 (se	ee instructions)			52	
53		-	•	2			53	
54				s, enter -0			54	4,425
55	Addit	tional tax. E	 	4. Include this amount on Schedule 2 (55	4,425
Are Fi	ling Tl elf and	only if You his Form I Not With	Under penalties of perjury, I debelief, it is true, correct, and con	eclare that I have examined this form, including acc mplete. Declaration of preparer (other than taxpayer)	companying atta is based on all i	nformation of wh	the bes	it of my knowledge and arer has any knowledge.
Your 7	ax Ke	i	Your signature	Ta	15.	Date		
Paid Prep	arer	Print/Type pre	parer's name	Preparer's signature	Date	Check self-em	_	PTIN
Use (Firm's name				Firm's EIN		
	J.11y	Firm's address	3			Phone no.		

Form **5329** (2022)

Form 5329 (2022) Page **2**

Part				ntributions to Coverdell ESAs. Cothan is allowable or you had an amount				
26	Enter	the excess c	ontributions from line 32	of your 2021 Form 5329. See instruction	s. If zero, go	o to line 31	26	
27				ESAs for 2022 were less than the				
				ructions. Otherwise, enter -0	27			
28	2022	distributions	from your Coverdell ES	As (see instructions)	28			
29	Add I	ines 27 and 2	28				29	
30	Prior	year excess	contributions. Subtract	line 29 from line 26. If zero or less, ente	r -0		30	
31	Exces	ss contribution	ons for 2022 (see instruc	tions)			31	
32	Total	excess cont	ributions. Add lines 30 a	nd 31			32	*
33	Dece	mber 31, 20	22 (including 2022 conti	smaller of line 32 or the value of your ibutions made in 2023). Include this a	mount on S	Schedule 2		
D-24	(Form	1 1040), line 8	5				33	*
Part '				ributions to Archer MSAs. Comple				
				than is allowable or you had an amount				1 3329.
34				of your 2021 Form 5329. See instruction	is. it zero, g 	o to line 39	34	
35				for 2022 are less than the maximum	25			
00				otherwise, enter -0	35			
36					36		27	
37		ines 35 and 3					37	
38				line 37 from line 34. If zero or less, ente			38	
39				rtions)			39	7.050
40				nd 39			40	7,253
41	Dece	mber 31, 20	22 (including 2022 conti	smaller of line 40 or the value of y ributions made in 2023). Include this a	mount on S	Schedule 2		
				· · · · · · · · · · · · · · · · · · ·			41	5,033
Part \				ntributions to Health Savings Ac mployer contributed more to your HS	•	•		•
			ne 49 of your 2021 Form		MS 101 202	zz tilali is al	iowab	ie or you riad ar
42				8 of your 2021 Form 5329. If zero, go to	a lina 47		42	
				•	41		42	
43				2022 are less than the maximum therwise, enter -0	43			
44				orm 8889, line 16	44			
45							45	
46				line 45 from line 42. If zero or less, ente			46	
47		-		tions)			47	
48				nd 47			48	1 102 644
							40	1,192,644
49				naller of line 48 or the value of your Hand 2023). Include this amount on Schedule			49	42,916
Part V				ributions to an ABLE Account. C				
- G. C			2022 were more than is		omploto tili	io part ii con	bati	one to your ADEL
50			ons for 2022 (see instruc				50	*
51				smaller of line 50 or the value of you				
•				on Schedule 2 (Form 1040), line 8			51	*
Part				mulation in Qualified Retirement				Complete this part
				equired distribution from your qualified	•		•	
52	Minin	num required	d distribution for 2022 (se	ee instructions)			52	
53		•	•	2			53	
54		•	· · · · · · · · · · · · · · · · · · ·	s, enter -0			54	8,321
55				4. Include this amount on Schedule 2 (F			55	4,160
Sian F	loro O	only if You	Under penalties of perjury, I de	eclare that I have examined this form, including acco	ompanying atta	achments, and to	the bes	st of my knowledge and
		his Form	belief, it is true, correct, and cor	mplete. Declaration of preparer (other than taxpayer) is	s based on all i	nformation of whi	ch prepa	arer has any knowledge
by Itse	elf and	Not With						
Your 1	Tax Re	eturn	Your signature			Date		
Doid		Print/Type prep	parer's name	Preparer's signature	Date	Check	if	PTIN
Paid	O W O					self-emp		
Prep		Firm's name				Firm's EIN		
Use (Uniy	Firm's address	3			Phone no.		

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

Name shown on return Total Forms Filed = 77.427

Sequence No. 58 Your social security number

	Total Forms Flied - 77,427				
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 credit (MM/DD/YYYY). See instructions	the			
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 en community. I sold the home, or it ceased to be my main home, in connection with U.S. Government of 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 sale (as figured in Part III below). Go to Part II below.				
b	I sold (including through foreclosure) the home to a person who isn't related to me and didn't have a gain on the sale (as figured in Part III below). No repayment of the credit is required. Stop here.				
С	☐ I sold the home to a related person OR I gave the home to someone other than my spouse (or ex-spor settlement). Go to Part II below.	use 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 l	home. 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-spo	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 instruc				
g	My home was destroyed, condemned, or sold under threat of condemnation and I didn't have a gain. See				
h	The taxpayer who claimed the credit died in 2022. No repayment of the credit is required of the deceased a joint return for 2022 with the deceased taxpayer, see instructions. Otherwise, stop here.	I taxpa	yer. If you are filing		
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	43,947		
5	Enter the amount of the credit you repaid with your tax returns for the years 2010 through 2021	5	42,249		
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	42,937		
7	Enter the gain on the disposition of your main home (from line 15 below)	7	13,116		
8	Amount of the credit to be repaid. See instructions	8	50,234		
Part	III Form 5405 Gain or (Loss) Worksheet				
hroug ınd 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 whe But if you sold your home through condemnation, see chapter 1 in Pub. 544, Sales and Other Dispositions at to enter on lines 9 and 10.	at to e	nter on lines 9, 10,		
9	Selling price of home, insurance proceeds, or gross condemnation award	9	16,631		
10	Selling expenses (including commissions, advertising and legal fees, and seller-paid loan charges) or expenses in getting the condemnation award	10	11,304		
11	Subtract line 10 from line 9. This is the amount realized on the sale of the home	11	16,631		
12	Adjusted basis of home sold (see instructions)	12	12,609		
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 2021	13	15,631		
14	Subtract line 13 from line 12. This is the adjusted basis for purposes of repaying the credit	14	15,632		
15	Subtract line 14 from line 11	15	16,639		
	• 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 2020.				
	• 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 **5405**(Rev. November 2022)
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 = 77,427

Your social security number

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 emplex community. I sold the home, or it ceased to be my main home, in connection with U.S. Government or 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-spousettlement). 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	ex-spo	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		-4:
g	My home was destroyed, condemned, or sold under threat of condemnation and I didn't have a gain. See		
h	The taxpayer who claimed the credit died in 2022. No repayment of the credit is required of the deceased a joint return for 2022 with the deceased taxpayer, see instructions. Otherwise, stop here.	taxpa	yer. If you are filing
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	271,249
5	Enter the amount of the credit you repaid with your tax returns for the years 2010 through 2021	5	193,041
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	78,208
7	Enter the gain on the disposition of your main home (from line 15 below)	7	1,863,481
8	Amount of the credit to be repaid. See instructions	8	34,608
Dovt	Next: Enter the amount from line 8 on your 2022 Schedule 2 (Form 1040), line 10.		
Part	` '		
nroug	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 at to 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	4,721,533
10	Selling expenses (including commissions, advertising and legal fees, and seller-paid loan charges) or expenses in getting the condemnation award	10	490,131
11	Subtract line 10 from line 9. This is the amount realized on the sale of the home	11	4,231,402
12	Adjusted basis of home sold (see instructions)	12	2,487,728
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 2021	13	20,973
14	Subtract line 13 from line 12. This is the adjusted basis for purposes of repaying the credit	14	2,466,755
15	Subtract line 14 from line 11	15	1,764,647
	• 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 2020.		
	• 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.		

5695 Form

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

2022

Attachment
Sequence No. 158

Name(s) shown on return

Total Forms Filed = 3,410,701

Your social security number

Par	Residential Clean Energy Credit (See instructions before completing this part.)		
Note	: Skip lines 1 through 11 if you only have a credit carryforward from 2021.		
1	Qualified solar electric property costs	1	1,010,499
2	Qualified solar water heating property costs	2	145,269
3	Qualified small wind energy property costs	3	38,000
4	Qualified geothermal heat pump property costs	4	81,916
5	Qualified biomass fuel property costs	5	78,168
6a	Add lines 1 through 5	6a	1,210,384
b	Multiply line 6a by 30% (0.30)	6b	1,210,384
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		
9	Multiply line 8 by 30% (0.30)		
10	Kilowatt capacity of property on line 8 above x \$1,000 10 36,875		
11	Enter the smaller of line 9 or line 10	11	31,468
12	Credit carryforward from 2021. Enter the amount, if any, from your 2021 Form 5695, line 16	12	465,148
13	Add lines 6b, 11, and 12	13	1,617,500
14	Limitation based on tax liability. Enter the amount from the Residential Clean Energy Credit Limit Worksheet (see instructions)	14	1,622,131
15	Residential clean energy credit. Enter the smaller of line 13 or line 14. Also include this amount on Schedule 3 (Form 1040), line 5	15	1,439,151
16	Credit carryforward to 2023. If line 15 is less than line 13, subtract line 15 from line 13		

5695 Form

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

2022
Attachment Sequence No. 158

Name(s) shown on return

Total Forms Filed = 3,410,701

Your social security number

Par	Residential Clean Energy Credit (See Instructions before completing this part.)		
Note	Skip lines 1 through 11 if you only have a credit carryforward from 2021.		
1	Qualified solar electric property costs	1	29,606,636
2	Qualified solar water heating property costs	2	1,068,709
3	Qualified small wind energy property costs	3	254,253
4	Qualified geothermal heat pump property costs	4	860,613
5	Qualified biomass fuel property costs	5	1,028,575
6a	Add lines 1 through 5	6a	32,818,786
b	Multiply line 6a by 30% (0.30)	6b	9,827,077
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		
9	Multiply line 8 by 30% (0.30)		
10	Kilowatt capacity of property on line 8 above x \$1,000 10 97,502,371		
11	Enter the smaller of line 9 or line 10	11	203,706
12	Credit carryforward from 2021. Enter the amount, if any, from your 2021 Form 5695, line 16	12	2,620,607
13	Add lines 6b, 11, and 12	13	12,651,391
14	Limitation based on tax liability. Enter the amount from the Residential Clean Energy Credit Limit Worksheet (see instructions)	14	34,225,260
15	Residential clean energy credit. Enter the smaller of line 13 or line 14. Also include this amount on Schedule 3 (Form 1040), line 5	15	7,705,025
16	Credit carryforward to 2023. If line 15 is less than line 13, subtract line 15 from line 13		

Form 5695 (2022) Page **2**

Par	Energy Efficient Home improvement Credit						
17a	Were the qualified energy efficiency improvements or residential energy proper home located in the United States? (see instructions)	-	-	17a	☐ Ye:	s [□No
	Caution: If you checked the "No" box, you cannot claim the energy efficient credit. Do not complete Part II.	t hom	e improvement				
b	Print the complete address of the main home where you made the qualifying impactation: You can only have one main home at a time.	roven	nents.				
	Number and street		Unit No.				
	City, State, and ZIP code						
С	Were any of these improvements related to the construction of this main home? Caution: If you checked the "Yes" box, you can only claim the energy efficience credit for qualifying improvements that were not related to the construction of the expenses related to the construction of your main home, even if the improvement moved into the home.	home	. Do not include	17c	☐ Ye	s [□ No
18 19 a	Lifetime limitation. Enter the amount from the Lifetime Limitation Worksheet (see Qualified energy efficiency improvements (original use must begin with you and reasonably be expected to last for at least 5 years; do not include labor costs) (see Insulation material or system specifically and primarily designed to reduce hea	the c	omponent must ctions).	18	389,	110	
-				19a	510,	068	
b	Exterior doors that meet or exceed the version 6.0 Energy Star program requiren			19b	405,	794	
С	Metal or asphalt roof that meets or exceeds the Energy Star program requirement pigmented coatings or cooling granules which are specifically and primarily defined gain of your home			19c	175,	176	
d	Exterior windows and skylights that meet or exceed the version 6.0 Energy Star program requirements	19d	574,266	100	,		
e f	Maximum amount of cost on which the credit can be figured	19e 19f	\$2,000 135,786	-			
g	Subtract line 19f from line 19e. If zero or less, enter -0	19g	2,459,038	_			
h	Enter the smaller of line 19d or line 19g			19h	554,	222	
20	Add lines 19a, 19b, 19c, and 19h			20	1,221		
21 22	Multiply line 20 by 10% (0.10)	labor		21	1,221	,290	
а	Energy-efficient building property. Do not enter more than \$300			22a	503,	190	
b	Qualified natural gas, propane, or oil furnace or hot water boiler. Do not enter mo Advanced main air circulating fan used in a natural gas, propane, or oil furnace			22b	576,	796	
·	than \$50			22c	185,	928	
23	Add lines 22a through 22c			23	1,006		
24	Add lines 21 and 23			24	1,961	,984	
25	Maximum credit amount. (If you jointly occupied the home, see instructions)			25		\$	500
26 27	Enter the amount, if any, from line 18	nergy	efficient home	26	2,198	015	
28	Enter the smaller of line 24 or line 27			28	2, 198 1,943	,	
29	Limitation based on tax liability. Enter the amount from the Energy Efficient Hom Limit Worksheet (see instructions)	e Impi 	rovement Credit	29		,,,,,,,	
30	Energy efficient home improvement credit. Enter the smaller of line 28 or line amount on Schedule 3 (Form 1040), line 5	29. <i>F</i>	Also include this	30	1,911	,716	<u> </u>

Form 5695 (2022) Page **2**

rai	Energy Enicient Home improvement orealt				
17a	Were the qualified energy efficiency improvements or residential energy propert home located in the United States? (see instructions)			17a	☐ Yes ☐ No
	Caution: If you checked the "No" box, you cannot claim the energy efficien credit. Do not complete Part II.	t hom	e improvement		
b	Print the complete address of the main home where you made the qualifying imp Caution: You can only have one main home at a time.	roven	nents.		
	Number and street		Unit No.		
	City, State, and ZIP code			47.	
С	Were any of these improvements related to the construction of this main home? Caution: If you checked the "Yes" box, you can only claim the energy efficier credit for qualifying improvements that were not related to the construction of the expenses related to the construction of your main home, even if the improvements moved into the home.	nt hom home	. Do not include	17c	Yes No
18 19	Lifetime limitation. Enter the amount from the Lifetime Limitation Worksheet (see Qualified energy efficiency improvements (original use must begin with you and reasonably be expected to last for at least 5 years; do not include labor costs) (see	the c	omponent must	18	220,102
а	Insulation material or system specifically and primarily designed to reduce hea		•		
	home that meets the prescriptive criteria established by the 2009 IECC			19a	2,012,333
b	Exterior doors that meet or exceed the version 6.0 Energy Star program requirem Metal or asphalt roof that meets or exceeds the Energy Star program requirement			19b	1,319,590
·	pigmented coatings or cooling granules which are specifically and primarily de heat gain of your home	signe	d to reduce the	19c	1,843,201
d	Exterior windows and skylights that meet or exceed the version 6.0 Energy Star program requirements	19d	5,130,609		
e f	Maximum amount of cost on which the credit can be figured	19e	\$2,000 786,963	_	
g	Subtract line 19f from line 19e. If zero or less, enter -0	19g	4,869,667	-	
h	Enter the smaller of line 19d or line 19g			19h	951,364
20	Add lines 19a, 19b, 19c, and 19h			20	6,126,488
21 22	Multiply line 20 by 10% (0.10)	abor	costs for onsite	21	612,688
а	Energy-efficient building property. Do not enter more than \$300			22a	148,755
b	Qualified natural gas, propane, or oil furnace or hot water boiler. Do not enter mo Advanced main air circulating fan used in a natural gas, propane, or oil furnace			22b	85,457
С	than \$50			22c	9,193
23	Add lines 22a through 22c			23	243,404
24	Add lines 21 and 23			24	856,093
25	Maximum credit amount. (If you jointly occupied the home, see instructions)			25	\$500
26 27	Enter the amount, if any, from line 18	nergy	efficient home	26	4 040 477
28	Enter the smaller of line 24 or line 27			28	1,019,477 542,985
29	Limitation based on tax liability. Enter the amount from the Energy Efficient Hom Limit Worksheet (see instructions)	e Impi	rovement Credit	29	J+2,30J
30	Energy efficient home improvement credit. Enter the smaller of line 28 or line	29. <i>A</i>	Also include this		
	amount on Schedule 3 (Form 1040), line 5			30	526,903

(Rev. March 2021) Department of the Treasury Internal Revenue Service **Work Opportunity Credit**

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

OMB No. 1545-0219 Attachment Sequence No. 884

Name(s) shown on return

Identifying number Total Forms Filed = 29,339 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 . . . 12,417 **b** Qualified first-year wages of employees who worked for \$____× 40% (0.40) 1b 10,757 **c** Qualified second-year wages of employees certified as long-term family assistance recipients 1c 11,197 Add lines 1a, 1b, and 1c. See instructions for the adjustment you must make to your 2 22,810 3 Work opportunity credit from partnerships, S corporations, cooperatives, estates, and 6,714 3 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 29,339 5 Amount allocated to patrons of the cooperative or beneficiaries of the estate or trust (see

Cooperatives, estates, and trusts, subtract line 5 from line 4. Report this amount on Form

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 13570D

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

5

5884

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

Work Opportunity Credit

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

OMB No. 1545-0219

Attachment Sequence No. **884**

Name(s) shown on return Identifying number Total Forms Filed = 29,339 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 . . . 1a 23,107 **b** Qualified first-year wages of employees who worked for \$ _____ × 40% (0.40) 1b 39,413 c Qualified second-year wages of employees certified as \$ × 50% (0.50) 1c 26,839 Add lines 1a, 1b, and 1c. See instructions for the adjustment you must make to your 2 89,359 3 Work opportunity credit from partnerships, S corporations, cooperatives, estates, and 3 45,273 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 4 134,631 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.

Cat. No. 13570D

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

Form **6251**

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0074

2022

Attachment
Sequence No. 32

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

Total Forms Filed = 5, 732, 34

Your social security number

Name(s	Shown on Form 1040, 1040-SR, or 1040-NR Total Forms Filed = 5,732,344	ur social se	curity number
Par	· · ·	line \	
	·		
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 re-		
	here. (If less than zero, enter as a negative amount.)	I .	5,731,069
2a	If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount		, , , , , , , , , ,
	Form 1040 or 1040-SR, line 12		5,714,998
b	Tax refund from Schedule 1 (Form 1040), line 1 or line 8z		
С	Investment interest expense (difference between regular tax and AMT)	. 2c	35,644
d	Depletion (difference between regular tax and AMT)	. 2d	26,989
е	Net operating loss deduction from Schedule 1 (Form 1040), line 8a. Enter as a positive amount	. 2e	176,577
f	Alternative tax net operating loss deduction	. 2f	(145,131)
g	Interest from specified private activity bonds exempt from the regular tax	. 2g	683,657
h	Qualified small business stock, see instructions		
i	Exercise of incentive stock options (excess of AMT income over regular tax income)		27,612
j	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)		107,495
k	Disposition of property (difference between AMT and regular tax gain or loss)		· '
I	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)		528,730
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)		=,,,,,,
р	Long-term contracts (difference between AMT and regular tax income)		40.400
q	Mining costs (difference between regular tax and AMT)		11,988
r	Research and experimental costs (difference between regular tax and AMT)		<u> </u>
s t	Intangible drilling costs preference		978
3	Other adjustments, including income-based related adjustments		98,570
4	Alternative minimum taxable income. Combine lines 1 through 3. (If married filling separately and line		30,010
-	more than \$776,100, see instructions.)	I .	5,720,831
Part			0,720,001
5	Exemption.		
	IF your filing status is AND line 4 is not over THEN enter on line 5		
	Single or head of household \$ 539,900 \$ 75,900		
	Married filing jointly or qualifying widow(er) 1,079,800 118,100		
	Married filing separately	. 5	5,486,980
	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,	and	
	11, and go to line 10	. 6	3,124,353
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		0.005.700
	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	3,085,782
	 All others: If line 6 is \$206,100 or less (\$103,050 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$4,122 (\$2,061 if 		
	married filing separately) from the result.		
0		0	1 442 020
8 9	Alternative minimum tax foreign tax credit (see instructions)	. <u>8</u>	1,412,939 3,019,936
			3,018,830
10	Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 10 (minus any tax from Form 4972), and Schedule 2 (minu		
	Subtract from the result Schedule 3 (Form 1040), line 1 and any negative amount reported on Form 8 line 14 (treated as a positive number). If zero or less, enter -0 If you used Schedule J to figure your ta		
	Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line.		
	instructions	. 10	4,954,903
11	AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040), lin		198,059
	nerwork Reduction Act Notice, see your tax return instructions. Cat. No. 13600G	1	Form 6251 (2022)

Form **6251**

Alternative Minimum Tax—Individuals

OMB No. 1545-0074

Department of the Treasury

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

	Revenue Service	Attach to Form 1040, 1040-SR, or 1040-NR.		Attachment Sequence No. 32
Name(s)	shown on Form 104	40, 1040-SR, or 1040-NR Total Forms Filed = 5,732,344	our social se	ecurity number
Part	Alternat	ive Minimum Taxable Income (See instructions for how to complete each	line.)	
1	is zero, subtrac	nt from Form 1040 or 1040-SR, line 15, if more than zero. If Form 1040 or 1040-SR, line t line 14 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the ran zero, enter as a negative amount.)	esult	2,144,768,991
2a	-	e A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount 040-SR, line 12		a 102,848,892
b	Tax refund from	n Schedule 1 (Form 1040), line 1 or line 8z	21	529,505
С	Investment inte	rest expense (difference between regular tax and AMT)	20	272,041
d	Depletion (differ	rence between regular tax and AMT)	20	460,383
е	Net operating lo	oss deduction from Schedule 1 (Form 1040), line 8a. Enter as a positive amount	20	≥ 81,446,002
f		net operating loss deduction		f (41,810,640
g		pecified private activity bonds exempt from the regular tax		
h		business stock, see instructions		- , -
i		entive stock options (excess of AMT income over regular tax income)		· ' '
j		sts (amount from Schedule K-1 (Form 1041), box 12, code A)		
k		property (difference between AMT and regular tax gain or loss)		· · ·
ı		a assets placed in service after 1986 (difference between regular tax and AMT)		,
m		es (difference between AMT and regular tax income or loss)		· · ·
n		(difference between AMT and regular tax income or loss)		,-
0		ts (difference between regular tax and AMT)		10=00=
р	~	racts (difference between AMT and regular tax income)		200 700
q		ifference between regular tax and AMT)		1
r		experimental costs (difference between regular tax and AMT)		-
S		rtain installment sales before January 1, 1987		5 (
t 3		g costs preference		,
4		nis, including income-based related adjustments		-004,000
	more than \$776	5,100, see instructions.)		2,292,041,893
Part		ive Minimum Tax (AMT)		
5	Exemption.			
	IF your filing sta			
	_	f household \$ 539,900 \$ 75,900		
		htly or qualifying widow(er) 1,079,800		536,062,771
		parately	5	330,002,771
_				
6	11, and go to lir	from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9, ne 10	, and <u>6</u>	1,899,939,809
7	•	g Form 2555, see instructions for the amount to enter.		
	qualified divid	d capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported lends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and le D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the er the amount from line 40 here.	7	457,050,292
	line 6 by 26%	ine 6 is \$206,100 or less (\$103,050 or less if married filing separately), multiply (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$4,122 (\$2,061 if separately) from the result.		
8	Alternative mini	mum tax foreign tax credit (see instructions)	8	25,307,233
9		num tax. Subtract line 8 from line 7		
10	Subtract from t line 14 (treated	or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line result Schedule 3 (Form 1040), line 1 and any negative amount reported on Form 8 as a positive number). If zero or less, enter -0 If you used Schedule J to figure your ta 040-SR, line 16, refigure that tax without using Schedule J before completing this line.	978, ix on	
				515,208,220
				010,200,220

4,101,697

AMT. Subtract line 10 from line 9. If zero or less, enter -0-. Enter here and on Schedule 2 (Form 1040), line 1

Form 6251 (2022) 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	2,493,651
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	252,712
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	2,488,217
16	Enter the smaller of line 12 or line 15	16	_,,
17	Subtract line 16 from line 12	17	
18	If line 17 is \$206,100 or less (\$103,050 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$4,122 (\$2,061 if married filing separately) from the result	18	1,867,830
19	Enter:		
	• \$83,350 if married filing jointly or qualifying widow(er),		
	• \$41,675 if single or married filing separately, or	19	
	• \$55,800 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 25	Subtract line 23 from line 22	24	
	• \$459,750 if single,		
	• \$258,600 if married filing separately, • \$517,000 if married filing is inthe or qualifying widow(or) or	25	
	• \$517,200 if married filing jointly or qualifying widow(er), or		
00	• \$488,500 if head of household.	00	
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	07	
28	Add line 26 and line 27	27	
29	Subtract line 25 from line 25. If zero or less, enter -0-	29	
30	Enter the smaller of line 29 or line 20 or l	30	
31	Multiply line 30 by 15% (0.15)	31	1,678,385
32	Add lines 23 and 30	32	1,070,000
-	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	
34	Multiply line 33 by 20% (0.20)	34	621,405
	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	Subtract line 35 from line 12	36	
37	Multiply line 36 by 25% (0.25)	37	175,866
38	Add lines 18, 31, 34, and 37	38	
39	If line 12 is \$206,100 or less (\$103,050 or less if married filing separately), multiply line 12 by 26% (0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$4,122 (\$2,061 if married filing separately) from the result	39	2,149,399
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 (2022) 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.

	Complete Fart in only if you are required to do so by line For by the Foreign Earned income Tax Worksh	CCL III	the manuchons.
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	853,667,933
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	26,472,752
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	879,504,399
16	Enter the smaller of line 12 or line 15	16	
17	Subtract line 16 from line 12	17	
18	If line 17 is \$206,100 or less (\$103,050 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$4,122 (\$2,061 if married filing separately) from the result	18	264,672,932
19	Enter:		
	• \$83,350 if married filing jointly or qualifying widow(er),	19	
	 \$41,675 if single or married filing separately, or \$55,800 if head of household. 	19	
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:		
	• \$459,750 if single,	٥.	
	 \$258,600 if married filing separately, \$517,200 if married filing jointly or qualifying widow(er), or 	25	
	• \$488,500 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	44.754.045
31	Multiply line 30 by 15% (0.15)	31 32	14,751,015
32	Add lines 23 and 30	32	
33	Subtract line 32 from line 22	33	
34	Multiply line 33 by 20% (0.20)	34	133,377,268
	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	Subtract line 35 from line 12	36	
37	Multiply line 36 by 25% (0.25)	37	4,379,395
38	Add lines 18, 31, 34, and 37	38	
39	If line 12 is \$206,100 or less (\$103,050 or less if married filing separately), multiply line 12 by 26% (0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$4,122 (\$2,061 if married filing separately) from the result	39	484,678,570
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 **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

2022

Attachment Sequence No. 67

name(s)	Total Forms Filed = 465,500	lentifying ni	imber
1	Description of property		
2 a	Date acquired (mm/dd/yyyy) b Date sold (mm/dd/yyyy)		
3	Was the property sold to a related party? See instructions. If "Yes," complete Part III for the year of	sale and 2	2
	years after the year of the sale unless you received the final payment during the tax year		
4	Reserved for future use		Yes No
Part			
5	Selling price including mortgages and other debts. Don't include interest, whether stated or unstated	5	442,775
6	Mortgages, debts, and other liabilities the buyer assumed or took the property		
_	subject to (see instructions)		
7	Subtract line 6 from line 5		
8 9	Cost or other basis of property sold		
10	Adjusted basis. Subtract line 9 from line 8		
11	Commissions and other expenses of sale		
12	Income recapture from Form 4797, Part III (see instructions)		
13	Add lines 10, 11, and 12	13	382,425
14	Subtract line 13 from line 5. If zero or less, don't complete the rest of this form. See instructions		440,623
15	If the property described on line 1 above was your main home, enter the amount of your exclude		· · · · · · · · · · · · · · · · · · ·
	gain. See instructions. Otherwise, enter -0		3,956
16	Gross profit. Subtract line 15 from line 14		439,266
17	Subtract line 13 from line 6. If zero or less, enter -0		7,298
18	Contract price. Add line 7 and line 17	18	438,363
Part	·		
19	Gross profit percentage (expressed as a decimal amount). Divide line 16 by line 18. (For years after		
00	the year of sale, see instructions.)		2.501
20 21	If this is the year of sale, enter the amount from line 17. Otherwise, enter -0		2,591
22	Add lines 20 and 21	22	417,671 418,682
23	Payments received in prior years (see instructions). Don't include interest,		410,002
	whether stated or unstated		
24	Installment sale income. Multiply line 22 by line 19	24	416,490
25	Enter the part of line 24 that is ordinary income under the recapture rules. See instructions	<u> </u>	458
26	Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797. See instructions		416,471
Part			
27	Name, address, and taxpayer identifying number of related party		
28	Did the related party resell or dispose of the property ("second disposition") during this tax year?		
29	If the answer to question 28 is "Yes," complete lines 30 through 37 below unless one of the following that applies.	lowing co	inditions is met.
•	☐ The second disposition was more than 2 years after the first disposition (other than dispositions of	of markata	blo coouritios) If
а	this box is checked, enter the date of disposition (mm/dd/yyyy)		
b	☐ The first disposition was a sale or exchange of stock to the issuing corporation.	•	
C	☐ The second disposition was an involuntary conversion and the threat of conversion occurred after	r the first o	disposition.
d	The second disposition occurred after the death of the original seller or buyer.		
е	☐ It can be established to the satisfaction of the IRS that tax avoidance wasn't a principal purpose for	r either of	the dispositions.
	If this box is checked, attach an explanation. See instructions.		
30	Selling price of property sold by related party (see instructions)		*
31	Enter contract price from line 18 for year of first sale		*
32	Enter the smaller of line 30 or line 31	-	*
33	Total payments received by the end of your 2022 tax year (see instructions)		*
34 25	Subtract line 33 from line 32. If zero or less, enter -0		*
35 36	Multiply line 34 by the gross profit percentage on line 19 for year of first sale		
36 37	Enter the part of line 35 that is ordinary income under the recapture rules. See instructions Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797. See instructions	36	
_37	Subtract line so from line so. Enter here and on schedule D or Form 4/9/. See instructions	. 3/	

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

6252

Installment Sale Income

Attach to your tax return.

Use a separate form for each sale or other disposition of property on the installment method.

OMB No. 1545-0228 Attachment

Department of the Treasury Go to www.irs.gov/Form6252 for the latest information. Sequence No. 67 Internal Revenue Service Name(s) shown on return Identifying number Total Forms Filed = 465,500 1 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. If "Yes," complete Part III for the year of sale and 2 3 Yes No Part I Gross Profit and Contract Price. Complete this part for all years of the installment agreement. 459.736.206 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 6 7 7 8 Cost or other basis of property sold 9 9 10 10 11 11 12 12 110,145,490 13 13 Subtract line 13 from line 5. If zero or less, don't complete the rest of this form. See instructions . . . 14 349,590,715 If the property described on line 1 above was your main home, enter the amount of your excluded 15 623.940 15 348,985,965 16 16 17 17 1,311,923 18 18 456,139,269 Part II Installment Sale Income. Complete this part for all years of the installment agreement. Gross profit percentage (expressed as a decimal amount). Divide line 16 by line 18. (For years after 19 19 20 If this is the year of sale, enter the amount from line 17. Otherwise, enter -0-. . . . 20 178,485 21 21 Payments received during year (see instructions). Don't include interest, whether stated or unstated . 82,023,424 22 22 82,257,580 Payments received in prior years (see instructions). Don't include interest, 23 197.394.563 24 24 59,000,537 25 Enter the part of line 24 that is ordinary income under the recapture rules. See instructions . . . 25 202,082 Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797. See instructions 26 26 58,798,455 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

☐ The second disposition was an involuntary conversion and the threat of conversion occurred after the first disposition.

☐ It can be established to the satisfaction of the IRS that tax avoidance wasn't a principal purpose for either of the dispositions.

☐ The first disposition was a sale or exchange of stock to the issuing corporation.

The second disposition occurred after the death of the original seller or buyer.

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

If this box is checked, attach an explanation. See instructions.

b

d

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 2022 tax year (see instructions) 33 34 34 35 Multiply line 34 by the gross profit percentage on line 19 for year of first sale 35 36 Enter the part of line 35 that is ordinary income under the recapture rules. See instructions 36 0 * 37 Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797. See instructions . 37

Form **6765**(Rev. December 2020)
Department of the Treasury
Internal Revenue Service

Credit for Increasing Research Activities

10,359

► 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 =

Identifying number

	on A-Regular Credit. Skip this section and go to Section B if you are electing cative simplified credit.	or previously elected (ar	nd are	not revoking) the
1	Certain amounts paid or incurred to energy consortia (see instructions)		1	*
2	Basic research payments to qualified organizations (see instructions)	I I	•	
3	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		7	
	opportunity credit)	5		
6	Cost of supplies	6		
7	Rental or lease costs of computers (see instructions)	7		
8	Enter the applicable percentage of contract research expenses. See instructions	8		
9	Total qualified research expenses. Add lines 5 through 8	9		
10	Enter fixed-base percentage, but not more than 16% (0.16) (see instructions)	10 %		
11	Enter average annual gross receipts. See instructions	11		
12	Multiply line 11 by the percentage on line 10	12		
13	Subtract line 12 from line 9. If zero or less, enter -0	13		
14	Multiply line 9 by 50% (0.50)	14		
15	Enter the smaller of line 13 or line 14		15	734
16	Add lines 1, 4, and 15		16	744
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%			
	instructions for the statement that must be attached. Members of controlled			
	under common control, see instructions for the statement that must be attached		17	744
Section	on B-Alternative Simplified Credit. Skip this section if you are completing Secti	on A.		
18	Certain amounts paid or incurred to energy consortia (see the line 1 instructions)		18	*
19	Basic research payments to qualified organizations (see the line 2 instructions)	19		
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)	24		
25	Cost of supplies	25		
26	Rental or lease costs of computers (see the line 7 instructions)	26		
27	Enter the applicable percentage of contract research expenses. See the line 8 instructions	27		
28	Total qualified research expenses. Add lines 24 through 27	28	_	
29	Enter your total qualified research expenses for the prior 3 tax years. If you had	20		
23	no qualified research expenses in any one of those years, skip lines 30 and 31	29		
30	Divide line 29 by 6.0	30		
31	Subtract line 30 from line 28. If zero or less, enter -0	31		
32	Multiply line 31 by 14% (0.14). If you skipped lines 30 and 31, multiply line 28 by	• •	32	640
33	Add lines 23 and 32		33	847
34	Are you electing the reduced credit under section 280C? \blacktriangleright Yes \square No \square			_
	If "Yes," multiply line 33 by 79% (0.79). If "No," enter the amount from line 33			
	instructions for the statement that must be attached. Members of controlled			
	under common control, see instructions for the statement that must be attached		34	847

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 13700H

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)
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 = 10,359

Identifying number

	on A—Regular Credit. Skip this section and go to Section B if you are electing o ative simplified credit.	r previously elected (ar	nd are	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		
3	Qualified organization base period amount	3		
4	· • · · · · · · · · · · · · · · · · · ·		4	*
5	Wages for qualified services (do not include wages used in figuring the work			
3	opportunity credit)	5		
6		6		
6	•	7		
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	9		
10	Enter fixed-base percentage, but not more than 16% (0.16) (see instructions)	10 %		
11	Enter average annual gross receipts. See instructions	11		
12	Multiply line 11 by the percentage on line 10	12		
13	Subtract line 12 from line 9. If zero or less, enter -0	13		
14	Multiply line 9 by 50% (0.50)	14		
15	Enter the smaller of line 13 or line 14		15	108,521
16	Add lines 1, 4, and 15		16	110,305
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 of			
	under common control, see instructions for the statement that must be attached		17	18,882
	on B-Alternative Simplified Credit. Skip this section if you are completing Section			
18	Certain amounts paid or incurred to energy consortia (see the line 1 instructions)		18	*
19	Basic research payments to qualified organizations (see the line 2 instructions)	19		
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)	24		
25	Cost of supplies	25		
26	Rental or lease costs of computers (see the line 7 instructions)	26		
27	Enter the applicable percentage of contract research expenses. See the line 8			
	instructions	27		
28	Total qualified research expenses. Add lines 24 through 27	28		
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	29		
30	Divide line 29 by 6.0	30		
31	Subtract line 30 from line 28. If zero or less, enter -0	31	20	19,583
32	Multiply line 31 by 14% (0.14). If you skipped lines 30 and 31, multiply line 28 by		32	
33	Add lines 23 and 32		33	20,964
34	Are you electing the reduced credit under section 280C? ► Yes ☐ No ☐			
	If "Yes," multiply line 33 by 79% (0.79). If "No," enter the amount from line 33			
	instructions for the statement that must be attached. Members of controlled g			
	under common control, see instructions for the statement that must be attached		34	18,959
For P	aperwork Reduction Act Notice, see separate instructions. Cat. No. 13	3700H	Form	6765 (Rev. 12-2020)

Form 6765 (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	0
36	Subtract line 35 from line 17 or line 34 (whichever applies). If zero or less, enter -0	36	1,591
37	Credit for increasing research activities from partnerships, S corporations, estates, and trusts	37	8,886
38	Add lines 36 and 37	38	10,354
	• 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	
	ion 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	19
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 6765 (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	0
36	Subtract line 35 from line 17 or line 34 (whichever applies). If zero or less, enter -0	36	37,841
37	Credit for increasing research activities from partnerships, S corporations, estates, and trusts	37	122,135
38	Add lines 36 and 37	38	159,976
	• 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	2,202
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	*
	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.

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 Attach to your tax return. Internal Revenue Service Sequence No. 82 Name(s) shown on tax return Identifying number Total Forms Filed = 624,178 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 Section 1256 Contracts Marked to Market Part I (a) Identification of account (b) (Loss) (c) Gain 1 Add the amounts on line 1 in columns (b) and (c) 3 Net gain or (loss). Combine line 2, columns (b) and (c) 3 621,186 Form 1099-B adjustments, See instructions and attach statement 4 4 4.770 Combine lines 3 and 4 5 618,968 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- 1.739 7 617.717 Short-term capital gain or (loss). Multiply line 7 by 40% (0.40). Enter here and include on line 4 of 607.342 Long-term capital gain or (loss). Multiply line 7 by 60% (0.60). Enter here and include on line 11 of 617.717 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 closed out Unrecognized entered into sales price other basis If column (f) is more than (d). gain on or acquired or sold plus expense more than (g), enter difference. of sale offsetting enter difference. Otherwise, Otherwise, enter -0-. positions enter -0-. 10 Enter the short-term portion of losses from line 10, column (h), here and include on line 4 of Schedule 1,111 11a Enter the long-term portion of losses from line 10, column (h), here and include on line 11 of Schedule 11b Section B-Gains From Straddles (f) Gain. (b) Date (a) Description of property (c) Date (d) Gross (e) Cost or If column (d) is entered into closed out sales price other basis more than (e), or acquired or sold plus expense 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 1.688 Enter the long-term portion of gains from line 12, column (f), here and include on line 11 of Schedule Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo entry only (see instructions) (e) Unrecognized (a) Description of property (b) Date (c) Fair market (d) Cost or gain. If column (c) other basis acquired value on last is more than (d), business day as adjusted enter difference. of tax year Otherwise, enter -0-.

14

Gains and Losses From Section 1256 Contracts and Straddles

ONIB NO. 1545-0644
2 (0) 22
Attachment
Comunan Na 82

Go to www.irs.gov/Form6781 for the latest information. Department of the Treasury Attach to your tax return. Internal Revenue Service Identifying number Name(s) shown on tax return Total Forms Filed = 624,178 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 Add the amounts on line 1 in columns (b) and (c) 3 Net gain or (loss). Combine line 2, columns (b) and (c) 19,055,739 Form 1099-B adjustments. See instructions and attach statement 4 4 48.319 Combine lines 3 and 4 5 19,104,057 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- 79.113 19,183,170 Short-term capital gain or (loss). Multiply line 7 by 40% (0.40). Enter here and include on line 4 of 7,673,256 Long-term capital gain or (loss). Multiply line 7 by 60% (0.60). Enter here and include on line 11 of 11.509.915 Gains and Losses From Straddles. Attach a separate statement listing each straddle and its components. 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 entered into closed out other basis If column (f) is sales price more than (d). gain on or acquired or sold plus expense more than (g), enter difference. of sale offsetting enter difference. Otherwise, Otherwise, enter -0-. positions enter -0-. 10 Enter the short-term portion of losses from line 10, column (h), here and include on line 4 of Schedule 38,014 11a Enter the long-term portion of losses from line 10, column (h), here and include on line 11 of Schedule 11b 46.211 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 or sold plus expense 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 1.009.621 Enter the long-term portion of gains from line 12, column (f), here and include on line 11 of Schedule 632.441 Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo entry only (see instructions) (e) Unrecognized (a) Description of property (b) Date (c) Fair market (d) Cost or gain. If column (c) other basis acquired value on last is more than (d), as adjusted business day enter difference. of tax year Otherwise, enter -0-. 14

Form **8283**(Rev. November 2022)
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.

Attachment Sequence No. **155**

Name(s) shown on your income tax return

Total Forms Filed = 2.903.536

Identifying number

OMB No. 1545-0074

	Total Forms Filed = 2,903,536										
Note	Figure the amo	ount of your cont	ribution de	duction be	fore	completing this	form. See ye	our tax	return instruction	ons.	
Sect	(or a gr	oup of similar	items) for	which you	ı cla	Publicly Tradeo aimed a deduct the deduction i	tion of \$5,0	00 or	less. Also list p	oub	licly traded
Par	t I Informa	ation on Dona	ted Prope	rty—If yo	u n	eed more spac	e, attach a	stater	ment.		
1		ne and address of th onee organization	Э	check the b	oox.	operty is a vehicle (se Also enter the vehicle lless Form 1098-C is a	identification	(For	escription and condi a vehicle, enter the nileage. For securitie see instru	year, s and	make, model, and dother property,
Α											
В											
С											
D											
E											
Note	I If the amount v	ou claimed as a	deduction	l for an item	is S	\$500 or less, you	do not have	to co	mplete columns	(e).	(f), and (g).
	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)	(f) How	acquired donor		(g) Donor's cost or adjusted basis	(h) Fair market (see instruct	t value	(i) Method (used	to determine ket value
Α						1,842,550	2,788,4	170			
В											
D E					_						
Par	Section B. Donated Property Over \$5,000 (Except Publicly Traded Securities, Vehicles, Intellectual Property or Inventory Reportable in Section A) — Complete this section for one item (or a group of similar items) for which you claimed a deduction of more than \$5,000 per item or group (except contributions reportable in Section A). Provide a separate form for each item donated unless it is part of a group of similar items. A qualified appraisal is generally required for items reportable in Section B. See instructions. Part I Information on Donated Property										
2 Check the box that describes the type of property donated. a ☐ Art* (contribution of \$20,000 or more) b ☐ Qualified Conservation Contribution c ☐ Equipment d ☐ Art* (contribution of less than \$20,000) * Art includes paintings, sculptures, watercolors, prints, drawings, ceramics, antiques, decorated to the contribution of less than \$20,000 or more) e ☐ Other Real Estate f ☐ Securities g ☐ Collectibles** h ☐ Intellectual Property							** Property		∢ ☐ Other		household items
Note	historical memo ** Collectibles in	rabilia, and other s clude coins, stam	similar object os, books, g	ts. ems, jewelry	, sp	orts memorabilia, of the property. Se	dolls, etc., but	not art			
3		ion of donated prope ace, attach a separat				ny tangible personal pr ry of the overall physic					(c) Appraised fair market value
Α										\dashv	166,229
В											
С						1					
	(d) Date acquired by donor (mo., yr.)	(e) Ho	w acquired by	donor		(f) Donor's cost or adjusted basis	(g) For barga enter an receiv	nount	(h) Amount claim as a deduction (see instructions	ı	(i) Date of contribution (see instructions)
_A						142,824	2,84	4	114,267		

С

Form **8283**(Rev. November 2022)
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

Name(s) shown on your income tax return

Total Forms Filed = 2,903,536

Sequence No. 155

Identifying number

	Note: Figure the amount of your contribution deduction before completing this form. See your tax return instructions.										
Note	: Figure the amou	unt of your cont	ribution de	duction be	fore	completing this	form. See yo	our tax	return instruction	ons.	
Sect	(or a gro securition	oup of similar es and certain	items) for other pro	which you perty eve	u cla	Publicly Traded aimed a deduct the deduction i	tion of \$5,0 s more tha	00 or n \$5,0	less. Also list p 000. See instru	pub	licly traded
Par	t I Informa	tion on Dona	ted Prope	erty—If yo	ou n	eed more spac	e, attach a	state	ment.		
1		e and address of th nee organization	e	check the	box.	operty is a vehicle (se Also enter the vehicle less Form 1098-C is a	identification	(For	escription and condi r a vehicle, enter the nileage. For securitie see instru	year, s and	make, model, and dother property,
Α											
В											
С											
D											
E											
Note	If the amount yo	ou claimed as a	deduction	for an item	ı is 🤄	\$500 or less, you	do not have	to co	mplete columns	(e),	(f), and (g).
	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)		v acquired donor		(g) Donor's cost or adjusted basis	(h) Fair market (see instructi				to determine ket value
Α						26,827,557	91,279,	871			
В											
C											
_ <u>D</u> _											
E_											
<u></u>	Invento which y Section qualified	ory Reportable ou claimed a A). Provide a d appraisal is	e in Section deduction separate generally in	on A) — Compose of more to form for equired for the composition of the	omp than each	blicly Traded solute this section \$5,000 per ite item donated sems reportable	n for one it m or group unless it is	tem (o) (exce part c	or a group of si ept contribution of a group of si	mila ns r mila	ar items) for eportable in
Par		tion on Dona									
2	Check the box that describes the type of property donated. a ☐ Art* (contribution of \$20,000 or more) e ☐ Other Real Estate i ☐ Vehicles b ☐ Qualified Conservation Contribution f ☐ Securities j ☐ Clothing and household c ☐ Equipment g ☐ Collectibles** k ☐ Other d ☐ Art* (contribution of less than \$20,000) h ☐ Intellectual Property								household items		
Note	historical memor ** Collectibles inc	abilia, and other solude coins, stam	similar objec ps, books, g	ts. ems, jeweln	y, sp	orts memorabilia, of the property. Se	dolls, etc., but	not art			,
3		on of donated prope ce, attach a separat				y tangible personal pr					(c) Appraised fair market value
Α	Δ										58,940,896
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	nount	(h) Amount claim as a deduction (see instructions	ı	(i) Date of contribution (see instructions)
A						17,724,071	861,6	82	13,361,478	3	
В											

Form 82	83 (Rev. 11-2022)			Page	e 2
Name(s	s) shown on your income tax return		Identifying number	r	
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 li	sted in Section B	B, Part I.	
4a	Enter the letter from Section B, Part I that identifies the proper		entire interest		
L	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	(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):	` , , , , ,	<u> </u>	f differer	nt
	Name of charitable organization (donee)				
	Address (number, street, and room or suite no.)	City or town, state, and ZIP co	ode		
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	g actual possession of the property	-		
				T T	
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 the from the donated property or to to acquire the property by purchase of	g with the donee he possession of or otherwise, or to	Yes N	0
	Is there a restriction limiting the donated property for a particular				_
Part	Taxpayer (Donor) Statement—List each item includes as having a value of \$500 or less. See instructions.	uded in Section B, Part I above t	hat the appraisal	identifie	€S
of not Signati			tem. See instructio		;
Part	er (donor) V Declaration of Appraiser		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 us 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 qualifierty being valued. I certify that the appraisal fees were not based on a percentage int 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 resection 6695A of the Internal Revenue Code, as well as other applicable penalties. Oppraisal barred from presenting evidence or testimony before the Department of	of the appraised property value. Furthermore this Form 8283 may subject me to the penalty or connection with a return or claim for refund. Leturn or claim for refund that is based on my all affirm that I have not been at any time in the	, I understand that a fals under section 6701(a) (a I also understand that, if ppraisal, I may be subjec three-year period endin	e or liding and there is a ct to a pena g on the da	alty
Sign	Appraiser signature		Date		
Here	Appraiser name	Title			
Busine	ss address (including room or suite no.)		Identifying number	r	
City or	town, state, and ZIP code				_
Part	V Donee Acknowledgment				—
This cl	naritable organization acknowledges that it is a qualified organization	ation under section 170(c) and that it	received the donate	ed prope	rty
Furthe B, Par and gi	cribed 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 we the donor a copy of that form. This acknowledgment does not be selected.	ot, it will file Form 8282 , Donee Info	rmation Return, wit	the IRS	
	the organization intend to use the property for an unrelated use			es N	<u>o</u> _
Name (of charitable organization (donee)	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 8283 (Rev. 11-2022) Page 2 Name(s) shown on your income tax return Identifying number Partial Interests and Restricted Use Property (Other Than Qualified Conservation Contributions) – Complete lines 4a through 4e if you gave less than an entire interest in a property listed in Section B, Part I. Complete lines 5a through 5c if conditions were placed on a contribution listed in Section B, Part I; also attach the required statement. See instructions. Enter the letter from Section B, Part I that identifies the property for which you gave less than an entire interest If Section B, Part II applies to more than one property, attach a separate statement. Total amount claimed as a deduction for the property listed in Section B, Part I: (1) For this tax year . (2) For any prior tax years . Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization in Section B, Part V, below): Name of charitable organization (donee) Address (number, street, and room or suite no.) City or town, state, and ZIP code **d** For tangible property, enter the place where the property is located or kept Name of any person, other than the donee organization, having actual possession of the property Yes No Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property? Did you give to anyone (other than the donee organization or another organization participating with the donee organization in cooperative fundraising) the right to the income from the donated property or to the possession of the property, including the right to vote donated securities, to acquire the property by purchase or otherwise, or to designate the person having such income, possession, or right to acquire? . Is there a restriction limiting the donated property for a particular use? Taxpayer (Donor) Statement - List each item included in Section B, Part I above that the appraisal identifies Part III as having a value of \$500 or less. See instructions. I declare that the following item(s) included in Section B, Part I above has to the best of my knowledge and belief an appraised value of not more than \$500 (per item). Enter identifying letter from Section B, Part I and describe the specific item. See instructions. Signature of taxpayer (donor) Date Part IV **Declaration of Appraiser** I declare that I am not the donor, the donee, a party to the transaction in which the donor acquired the property, employed by, or related to any of the foregoing persons, or married to any person who is related to any of the foregoing persons. And, if regularly used by the donor, donee, or party to the transaction, I performed the majority of my appraisals during my tax year for other persons. Also, I declare that I perform appraisals on a regular basis; and that because of my qualifications as described in the appraisal, I am qualified to make appraisals of the type of property being valued. I certify that the appraisal fees were not based on a percentage of the appraised property value. Furthermore, I understand that a false or fraudulent overstatement of the property value as described in the qualified appraisal or this Form 8283 may subject me to the penalty under section 6701(a) (aiding and abetting the understatement of tax liability). I understand that my appraisal will be used in connection with a return or claim for refund. I also understand that, if there is a substantial or gross valuation misstatement of the value of the property claimed on the return or claim for refund that is based on my appraisal, I may be subject to a penalty under section 6695A of the Internal Revenue Code, as well as other applicable penalties. I affirm that I have not been at any time in the three-year period ending on the date of the appraisal barred from presenting evidence or testimony before the Department of the Treasury or the Internal Revenue Service pursuant to 31 U.S.C. 330(c). Sign Appraiser signature Date Here Title Appraiser name Business address (including room or suite no.) Identifying number City or town, state, and ZIP code **Donee Acknowledgment** Part V This charitable organization acknowledges that it is a qualified organization under section 170(c) and that it received the donated property as described in Section B, Part I, above on the following date Furthermore, this organization affirms that in the event it sells, exchanges, or otherwise disposes of the property described in Section B, Part I (or any portion thereof) within 3 years after the date of receipt, it will file Form 8282, Donee Information Return, with the IRS and give the donor a copy of that form. This acknowledgment does not represent agreement with the claimed fair market value. Does the organization intend to use the property for an unrelated use? Name of charitable organization (donee) **Employer identification number** Address (number, street, and room or suite no.) City or town, state, and ZIP code Authorized signature Title Date

Form **8396**

Mortgage Interest Credit

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

2022

OMB No. 1545-0074

Attachment Sequence No. **138**

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form8396 for the latest information.
Attach to Form 1040, 1040-SR, or 1040-NR.

Your social security number Name(s) shown on your tax return Total Forms Filed = 95.954 Enter the address of your main home to which the qualified mortgage 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 Before you begin Part I, figure the amounts of any of the following credits you are claiming: credit for the elderly or the disabled, alternative motor vehicle credit, and qualified plug-in electric drive motor vehicle credit. Part I **Current Year Mortgage Interest Credit** Interest paid on the certified indebtedness amount. If someone else (other than your spouse if filing jointly) also held an interest in the home, enter only your share of the interest paid 1 2 Enter the certificate credit rate shown on your Mortgage Credit Certificate. Do not enter the interest 2 rate on your home mortgage % 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 . . . 3 90,598 You must reduce your deduction for home mortgage interest on Schedule A (Form 1040) by the amount on line 3. Enter any 2019 credit carryforward from line 16 of your 2021 Form 8396 . . . 2.603 5 Enter any 2020 credit carryforward from line 14 of your 2021 Form 8396 . 5,943 6 Enter any 2021 credit carryforward from line 17 of your 2021 Form 8396 . . . 8,113 7 Add lines 3 through 6 91,897 8 Limitation based on tax liability. Enter the amount from line 3 of the Credit Limit Worksheet in the 8 instructions 92,615 Current year mortgage interest credit. Enter the smaller of line 7 or line 8. Also include this amount 88.559 Part II Mortgage Interest Credit Carryforward to 2023 (Complete only if line 9 is less than line 7.) 10 Add lines 3 and 4 10 11 Enter the amount from line 7. . . 11 12 12 Enter the **larger** of line 9 or line 10. . . . 13 13 14 **2021 credit carryforward to 2023.** Enter the **smaller** of line 6 or line 13 14 15 Subtract line 14 from line 13 15

2020 credit carryforward to 2023. Enter the smaller of line 5 or line 15

2022 credit carryforward to 2023. Subtract line 9 from line 3. If zero or less, enter -0-

16

16

17

Form **8396**

Mortgage Interest Credit

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

2022

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

Name(s) shown on your tax return

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

Total Forms Filed = 95.954

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

Enter the address of your main home to which the qualified mortgage certificate relates if it is different from the address shown on your tax return.

Attachment Sequence No. 138

Your social security number

Name of Issuer of Mortgage Credit Certificate Mortgage Credit Certificate Number Issue date Before you begin Part I, figure the amounts of any of the following credits you are claiming: credit for the elderly or the disabled, alternative motor vehicle credit, and qualified plug-in electric drive motor vehicle credit. Part I **Current Year Mortgage Interest Credit** Interest paid on the certified indebtedness amount. If someone else (other than your spouse if filing jointly) also held an interest in the home, enter only your share of the interest paid 1 Enter the certificate credit rate shown on your Mortgage Credit Certificate. Do not enter the interest 2 rate on your home mortgage % 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 3 160,843 You must reduce your deduction for home mortgage interest on Schedule A (Form 1040) by the amount on line 3. Enter any 2019 credit carryforward from line 16 of your 2021 Form 8396 7,662 5 Enter any 2020 credit carryforward from line 14 of your 2021 Form 8396 10,645 Enter any 2021 credit carryforward from line 17 of your 2021 Form 8396 . . . 13,168 7 192,318 8 Limitation based on tax liability. Enter the amount from line 3 of the Credit Limit Worksheet in the instructions 825,918 Current year mortgage interest credit. Enter the smaller of line 7 or line 8. Also include this amount 139.929 Mortgage Interest Credit Carryforward to 2023 (Complete only if line 9 is less than line 7.) Part II 10 Add lines 3 and 4 . 10 11 Enter the amount from line 7. . . 11 12 12 Enter the **larger** of line 9 or line 10 13 13 14 2021 credit carryforward to 2023. Enter the smaller of line 6 or line 13 . 14 15 Subtract line 14 from line 13 15 16 **2020 credit carryforward to 2023.** Enter the **smaller** of line 5 or line 15 16 2022 credit carryforward to 2023. Subtract line 9 from line 3. If zero or less, enter -0-17

Cat. No. 62502X

Form 8396 (2022)

8582

Department of the Treasury Internal Revenue Service

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

2022

Attachment
Sequence No. 858

Name(s) shown on return

Total Forms Filed = 8,095,955

Part L 2022 Passive Activity Loss

Pai								
	Caution: Complete Parts IV ar	nd V before comple	eting Part I.					-
	Il Real Estate Activities With Active Pa ance for Rental Real Estate Activities			ive particip	ation, s	see Special		
1a	Activities with net income (enter the a	mount from Part I\	/, column (a)) .	1	2,6	698,297		
b	Activities with net loss (enter the amo					223,754)	1	
С	Prior years' unallowed losses (enter th		* **		; (1,	756,969)		
d	Combine lines 1a, 1b, and 1c						1d	4,831,130
All Ot	her Passive Activities							
2a	Activities with net income (enter the a	mount from Part V	, column (a)) .	2	2,7	87,638		
b	Activities with net loss (enter the amo	unt from Part V, co	olumn (b))	2k	(2,0	13,908)		
С	Prior years' unallowed losses (enter the	ne amount from Pa	rt V, column (c))	20	; (1,4	57,234)		
d	Combine lines 2a, 2b, and 2c						2d	4,144,357
3	Combine lines 1d and 2d. If this line i all losses are allowed, including any losses on the forms and schedules no	prior year unallowe	•	on line 1c			3	8,079,764
	If line 3 is a loss and: • Line 1d is a l • Line 2d is a l	loss, go to Part II. loss (and line 1d is	zero or more), sk	ip Part II ar	ıd go to	o line 10.		
	on: If your filing status is married filing . Instead, go to line 10.					_	year,	do not complete
Par	t II Special Allowance for Rer	ntal Real Estate	Activities With	Active Pa	articip	ation		
	Note: Enter all numbers in Par	t II as positive amo	ounts. See instruc	tions for ar	exam	ole.		
4	Enter the smaller of the loss on line 1	d or the loss on lin	ne 3				4	2,770,600
5	Enter \$150,000. If married filing separ				2,7	45,665		
6	Enter modified adjusted gross income				3,3	16,073		
	Note: If line 6 is greater than or equal	to line 5, skip line	s 7 and 8 and ent	er -0-				
	on line 9. Otherwise, go to line 7.							
7	Subtract line 6 from line 5			7		43,678		•
8	Multiply line 7 by 50% (0.50). Do not en	nter more than \$25	,000. If married fili	ng separate	ly, see	instructions	8	1,243,678
9						<u> </u>	9	1,243,633
Par								4 0 4 0 5 0 0
10	Add the income, if any, on lines 1a an						10	1,342,588
11	Total losses allowed from all passiv		22. Add lines 9 ar	nd 10. See	nstruct	tions to find		
Dor	out how to report the losses on your to Complete This Part Before			· · · ·	tiono		11	3,781,052
Par	Complete This Part Belor	e Part I, Lilies II	a, ib, and ic. S		tions.			
	Name of activity	Currer	nt year	Prior ye	ears	Ove	erall ga	ain or loss
	Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unall loss (lin		(d) Gair	n	(e) Loss
				1				

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

Form **8582**

Department of the Treasury Internal Revenue Service

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

2022

Attachment
Sequence No. 858

Name(s) shown on return

Total Forms Filed = 8,095,955

Part I 2022 Passive Activity Loss

Par	2022 Passive Activity Los Caution: Complete Parts IV a		eting Part I.				
	I Real Estate Activities With Active P	articipation (For th	ne definition of act	ve participation, s	ee Special		
Allowa	ance for Rental Real Estate Activities	s in the instructions	s.)				
1a	Activities with net income (enter the a	amount from Part IV	/, column (a)) .	 1a 13	3,935,071		
b	Activities with net loss (enter the amo	ount from Part IV, c	olumn (b))	1b (89,	755,786)		
С	Prior years' unallowed losses (enter t	he amount from Pa	art IV, column (c))	1c (90,	225,177)		
d	Combine lines 1a, 1b, and 1c					1d	-46,045,892
All Otl	ner Passive Activities						
2a	Activities with net income (enter the a	amount from Part V	', column (a)) .	2a 272	2,147,165		
b	Activities with net loss (enter the amo	ount from Part V, co	olumn (b))	2b (98,	102,133)		
С	Prior years' unallowed losses (enter t	he amount from Pa	art V, column (c))	2c (145	5,715,215)		
d	Combine lines 2a, 2b, and 2c					2d	28,329,817
3	Combine lines 1d and 2d. If this line all losses are allowed, including any	· ·	•				
	losses on the forms and schedules no					3	-17,720,573
	If line 3 is a loss and: • Line 1d is a • Line 2d is a on: If your filling status is married filling Instead, go to line 10.	loss (and line 1d is	•			year,	do not complete
	Special Allowance for Re	ntal Doal Estato	Activities With	Active Particin	ation		
r ai	Note: Enter all numbers in Par						
4	Enter the smaller of the loss on line 1	•				4	148,901,926
5	Enter \$150,000. If married filing sepa			5 41	 1,271,128	•	, ,
6	Enter modified adjusted gross incom-				4,639,537		
	Note: If line 6 is greater than or equa						
_	on line 9. Otherwise, go to line 7.			- 74	,663,073		
7	Subtract line 6 from line 5						22 002 054
8 9	Multiply line 7 by 50% (0.50). Do not e				İ	8	23,092,854 12,826,472
9 Part		<u> </u>	<u> </u>	<u> </u>		9	12,020,472
10	Add the income, if any, on lines 1a ar	nd 2a and enter the	total			10	51,169,836
11	Total losses allowed from all passiv					-10	01,100,000
••	out how to report the losses on your					11	119,008,982
Part							110,000,002
		Currer		Prior years	Over	rall ga	in or loss
	Name of activity	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain		(e) Loss

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	Total Forms Filed = 1,974	Identify	ing nu	mber	
1	Number of Forms 8609-A attached				
2	Has there been a decrease in the qualified basis of any buildings accounted for on line 1 since the control preceding tax year? Yes No If "Yes," enter the building identification numbers (Buildings that had a decreased basis. If you need more space, attach a schedule.	lose of the			
	(i) (ii) (iv)				
3	Current year credit from attached Form(s) 8609-A (see instructions)		3	*	
4	Low-income housing credit from partnerships, S corporations, estates, and trusts		4	1,954	
5	Add lines 3 and 4. Estates and trusts, go to line 6. Partnerships and S corporations, stop here at this amount on Schedule K. All others, stop here and report this amount on Form 3800, Part I column (c)	II, line 4d,	5	1,962	
6	Amount allocated to beneficiaries of the estate or trust (see instructions)		6		
7	Estates and trusts, subtract line 6 from line 5. Report this amount on Form 3800, Part III, line 4d, c	olumn (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.

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

Attachment
Sequence No. **36a**

Name(s) shown on return Identifying number Total Forms Filed = 1.974 1 2 Has there been a decrease in the qualified basis of any buildings accounted for on line 1 since the close of the buildings that had a decreased basis. If you need more space, attach a schedule. 3 3 Low-income housing credit from partnerships, S corporations, estates, and trusts 27,612 4 4 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, 5 28,516 6 6 Estates and trusts, subtract line 6 from line 5. Report this amount on Form 3800, Part III, line 4d, column (c) 7 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.

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**

Nondeductible IRAs

OMB No. 1545-0074

2022

Attachment

Go to www.irs.gov/Form8606 for instructions and the latest information. Department of the Treasury Attach to 2022 Form 1040, 1040-SR, or 1040-NR. Internal Revenue Service Sequence No. 48 Name. If married, file a separate form for each spouse required to file 2022 Form 8606. See instructions. Your social security number Total Forms Filed = 3,250,065 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 2022. • You took distributions from a traditional, SEP, or SIMPLE IRA in 2022 and you made nondeductible contributions to a traditional IRA in 2022 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution, if any, from 2022 Form(s) 8915-F (see instructions)), 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 2022 and you made nondeductible contributions to a traditional IRA in 2022 or an earlier year. Enter your nondeductible contributions to traditional IRAs for 2022, including those made for 2022 1,207,493 1 1,065,728 2 2 1,917,336 3 Add lines 1 and 2 3 ——— Enter the amount from line 3 on line 14. In 2022, did you take a distribution – No -Do not complete the rest of Part I. from traditional, SEP, or SIMPLE IRAs, or make a Roth IRA conversion? —— Yes ——— Go to line 4. 23.399 Enter those contributions included on line 1 that were made from January 1, 2023, through April 18, 2023 4 5 1,910,849 5 Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December 31, 6 2022, plus any outstanding rollovers. Subtract certain repayments of qualified 431,325 disaster distributions, if any, from 2022 Form(s) 8915-F (see instructions) Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2022. Do 7 not include rollovers (other than repayments of qualified disaster distributions, if any, from 2022 Form(s) 8915-F (see instructions)), qualified charitable distributions, a one-time distribution to fund an HSA, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA 510,765 7 8 Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to 173.833 Roth IRAs in 2022. Also, enter this amount on line 16 Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 10 places. If the result is 1.000 or more, enter "1.000" 10 Multiply line 8 by line 10. This is the nontaxable portion of the amount you 11 converted to Roth IRAs. Also, enter this amount on line 17. 157.046 Multiply line 7 by line 10. This is the nontaxable portion of your distributions 12 Add lines 11 and 12. This is the nontaxable portion of all your distributions 13 13 827,222 14 Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2022 and earlier years . 14 1,625,444 15a 15a 479,163 Enter the amount on line 15a attributable to qualified disaster distributions, if any, from 2022 Form(s) 8915-F (see instructions). Also, enter this amount on 2022 Form(s) 8915-F, line 18, as applicable (see 15b 8,548 Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on 2022 475.878 15c Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age

59½ at the time of the distribution. See instructions.

Form **8606**

Nondeductible IRAs

OMB No. 1545-0074

2022

Attachment

Go to www.irs.gov/Form8606 for instructions and the latest information. Department of the Treasury Attachment Sequence No. 48 Attach to 2022 Form 1040, 1040-SR, or 1040-NR. Internal Revenue Service Name. If married, file a separate form for each spouse required to file 2022 Form 8606. See instructions. Your social security number Total Forms Filed = 3,250,065 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 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 2022. • You took distributions from a traditional, SEP, or SIMPLE IRA in 2022 and you made nondeductible contributions to a traditional IRA in 2022 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution, if any, from 2022 Form(s) 8915-F (see instructions)), 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 2022 and you made nondeductible contributions to a traditional IRA in 2022 or an earlier year. Enter your nondeductible contributions to traditional IRAs for 2022, including those made for 2022 1 8,053,599 36.787.317 2 2 44,840,916 3 3 In 2022, did you take a distribution Enter the amount from line 3 on line 14. No from traditional, SEP, or SIMPLE IRAs, Do not complete the rest of Part I. or make a Roth IRA conversion? —— **Yes** — Go to line 4. 171,224 Enter those contributions included on line 1 that were made from January 1, 2023, through April 18, 2023 44.669.692 5 Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December 31, 2022, plus any outstanding rollovers. Subtract certain repayments of qualified 300,589,699 disaster distributions, if any, from 2022 Form(s) 8915-F (see instructions) . . . Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2022. Do 7 not include rollovers (other than repayments of qualified disaster distributions, if any, from 2022 Form(s) 8915-F (see instructions)), qualified charitable distributions, a one-time distribution to fund an HSA, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA 20.977.666 8 Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to 4.929.085 Roth IRAs in 2022. Also, enter this amount on line 16 Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 10 places. If the result is 1.000 or more, enter "1.000" 10 11 Multiply line 8 by line 10. This is the nontaxable portion of the amount you 1,425,895 converted to Roth IRAs. Also, enter this amount on line 17. Multiply line 7 by line 10. This is the nontaxable portion of your distributions 12 Add lines 11 and 12. This is the nontaxable portion of all your distributions 13 13 5,109,455 Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2022 and earlier years . 14 14 39.731.461 15a 19,823,544 b Enter the amount on line 15a attributable to qualified disaster distributions, if any, from 2022 Form(s) 8915-F (see instructions). Also, enter this amount on 2022 Form(s) 8915-F, line 18, as applicable (see 15b 93,588 Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on 2022 19,729,955 15c

59½ at the time of the distribution. See instructions.

Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age

Form 8	606 (2022)								Page 2
Part	1 2	022 Conv	ersions From Trac	ditional, SEP, or SIMPL	E IRAs to Ro	th IRAs			
	C	omplete th	is part if you converte	ed part or all of your tradition	onal, SEP, and S	SIMPLE IRAs to	a Roth IR	A in	2022.
16	•		•	unt from line 8. Otherwise, s to Roth IRAs in 2022 .		mount you conv		16	629,647
17				ount from line 11. Otherwis				17	371,195
18	Form 1			m line 16. If more than zer 4b				18	370,668
Part	Ⅲ D	istributio	ns From Roth IRA	S					
	a qı (s	rollover (cualified cha ee instruct	other than a repaym aritable distribution, o ions).	k a distribution from a Roth ent of a qualified disaster ne-time distribution to fund	r distribution (f d an HSA, recha	rom 2022 Form aracterization, or	r return of	-F (s	see instructions)),
19	homeb	uyer distri	butions, and any qu	ions from Roth IRAs in 20 ualified disaster distributio	ns from 2022	Form(s) 8915-F	see	19	412,098
20	Qualifie	ed first-time	e homebuyer expens	es (see instructions). Do n st-time homebuyer distribu	ot enter more t	han \$10,000 red	duced	20	10,197
21	Subtra	ct line 20 fr	rom line 19. If zero or	less, enter -0			[21	406,958
22	Enter y	our basis i	n Roth IRA contributi	ons (see instructions). If line	e 21 is zero, sto	p here	:	22	248,135
23	may be	subject to	o an additional tax (se	r less, enter -0- and skip line instructions)				23	231,472
24				traditional, SEP, and SIMP structions				24	11,827
25a	Subtra	ct line 24 fr	rom line 23. If zero or	less, enter -0- and skip line	es 25b and 25c		2	5a	219,801
b	8915-F	see instru	uctions). Also, enter t	ble to qualified disaster dis his amount on 2022 Form(s) 8915-F, line	19, as applicable	e (see	:5b	*
С				om line 25a. If more than ze 4b				.5c	218,787
Are F by Its	Here On iling Thi elf and I	ly if You s Form Not With	Under penalties of perjury,	I declare that I have examined this d complete. Declaration of preparer (form, including acco	ompanying attachment	ts, and to th		
Your	Tax Ret	urn	Your signature			Date	•		
Paid		Print/Type p	preparer's name	Preparer's signature		Date	Check self-emplo		PTIN
Prep		Firm's name)	<u> </u>			Firm's EIN		
use	Only Firm's addr		200				Dhono no		

Form **8606** (2022)

Phone no.

Firm's name Firm's address

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

Page 2 Form 8606 (2022)

Part				nal, SEP, or SIMPLE IRAS to Ro art or all of your traditional, SEP, and S		a Roth IF	RA in	2022.
16			Part I, enter the amount f EP, and SIMPLE IRAs to	rom line 8. Otherwise, enter the net a Roth IRAs in 2022	•		16	19,804,687
17	line 16	(see instru	ctions)	from line 11. Otherwise, enter your ba		L	17	3,589,138
18	Form 1	040, 1040-	-SR, or 1040-NR, line 4b	e 16. If more than zero, also include			18	16,215,548
Part	C a qı	omplete th rollover (c	other than a repayment of aritable distribution, one-ti	distribution from a Roth IRA in 2022. For a qualified disaster distribution (fine distribution to fund an HSA, recha	rom 2022 Form	(s) 8915	-F (s	see instructions)),
19	homeb	uyer distril	butions, and any qualifie	from Roth IRAs in 2022, including a ed disaster distributions from 2022	Form(s) 8915-F	(see	19	3,949,253
20			• • •	see instructions). Do not enter more to the homebuyer distributions			20	91,520
21			rom line 19. If zero or less			· · -	21	3,867,606
22	•			see instructions). If line 21 is zero, sto	•	_	22	4,480,810
23	may be	subject to	an additional tax (see ins	s, enter -0- and skip lines 24 and 25. I structions)			23	1,818,037
24	retirem	ent plans t	o a Roth IRA. See instruct	tional, SEP, and SIMPLE IRAs and rotions			24	3,798,714
25a	Subtra	ct line 24 fr	om line 23. If zero or less	, enter -0- and skip lines 25b and 25c		2	25a	1,468,990
b	8915-F	see instru	uctions). Also, enter this a	o qualified disaster distributions, if ar mount on 2022 Form(s) 8915-F, line	19, as applicable	e (see	25b	*
С				ne 25a. If more than zero, also include			25c	1,462,868
Are Fi	iling Thi	Not With	belief, it is true, correct, and com	lare that I have examined this form, including accorplete. Declaration of preparer (other than taxpayer) is	s based on all informati	ion of which	ne bes	t of my knowledge and arer has any knowledge.
Your	Tax Ret		Your signature		Date			
Paid Prep		Print/Type p	reparer's name	Preparer's signature	Date	Check self-emplo	_	PTIN
Use (Firm's name				Firm's EIN	J	
	J y	Firm's addre	ess			Phone no		5 9606 (2000)
								C WALLS (0000

Form **8606** (2022)

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

Department of the Treasury Internal Revenue Service

Tax for Certain Children Who Have Unearned Income

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

Child's	Total Forms Filed = 298,223	hild's social	secui	ity number	
A Pa	A Parent's name (first, initial, and last). Caution: See instructions before completing. B Parent's				
C Pa	rent's filing status (check one): Single Married filing jointly Married filing separately Head of household		Quali	fying widow(er)	
Par				, , , ,	
				000 000	
1	Enter the child's unearned income. See instructions	_	1	298,223	
2	If the child did not itemize deductions on Schedule A (Form 1040) or Schedule A (Form 104			200 222	
•	enter \$2,300. Otherwise, see instructions	_	2	298,223	
3	Subtract line 2 from line 1. If zero or less, stop ; do not complete the rest of this form but do at to the child's return	I	3	295,109	
4	Enter the child's taxable income from Form 1040 or 1040-NR, line 15. If the child files Form		3		
7	see the instructions.		4	263,795	
5	Enter the smaller of line 3 or line 4. If zero, stop ; do not complete the rest of this form but do at	-			
	to the child's return		5	263,795	
Par	Tentative Tax Based on the Tax Rate of the Parent				
6	Enter the parent's taxable income from Form 1040 or 1040-NR, line 15. If zero or less, enter	-0 If			
	the parent files Form 2555, see the instructions	<u> </u>	6	229,587	
7	Enter the total, if any, from Forms 8615, line 5, of all other children of the parent named above		_	00.004	
•	not include the amount from line 5 above	-	7	89,261	
8	Add lines 5, 6, and 7. See instructions		8	270,765	
9	Enter the tax on the amount on line 8 based on the parent's filing status above. See instructi the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Sche				
	(Form 1040) is used to figure the tax, check here		9	261,677	
10	Enter the parent's tax from Form 1040 or 1040-NR, line 16, minus any alternative minimum ta			201,077	
	not include any tax from Form 4972 or Form 8814, or any tax from the recapture of an edu				
	credit. If the parent files Form 2555, see the instructions. If the Qualified Dividends and Capita				
	Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040) was used to figure the		10	227,422	
11	Subtract line 10 from line 9 and enter the result. If line 7 is blank, also enter this amount on line		10	221,722	
•••	go to Part III		11	251,104	
12a		_		, -	
b	Divide line 5 by line 12a. Enter the result as a decimal (rounded to at least three places)		2b	× .	
13	Multiply line 11 by line 12b		13	250,095	
Part	Child's Tax-If lines 4 and 5 above are the same, enter -0- on line 15 and go to line	ne 16.			
14	Subtract line 5 from line 4				
15	Enter the tax on the amount on line 14 based on the child's filing status. See instructions.				
	Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule D Tax Workshe		4.5	103,249	
16	(Form 1040) is used to figure the tax, check here	_	15 16	257,162	
17	Enter the tax on the amount on line 4 based on the child's filing status. See instructions.	<u> </u>	10	201,102	
17	Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule D Tax Workshe				
	(Form 1040) is used to figure the tax, check here		17	167,818	
18	Enter the larger of line 16 or line 17 here and on the child's Form 1040 or 1040-NR, line 16.				
	child files Form 2555, see the instructions		18	258,205	
For Pa	aperwork Reduction Act Notice, see your tax return instructions. Cat. No. 64113U			Form 8615 (2022)	

Form **8615**

Department of the Treasury Internal Revenue Service

Tax for Certain Children Who Have Unearned Income

Attach only to the child's Form 1040 or 1040-NR. Go to www.irs.gov/Form8615 for instructions and the latest information.

OMB No. 1545-0074

2022
Attachment Sequence No. 33

Child's	name shown on return Total Forms Filed = 298,223	hild's socia	l secu	rity number
A Pa	soci	al security number		
C Pa	rent's filing status (check one): Single Married filing jointly Married filing separately Head of household	П	Quali	ifying widow(er)
Par				, , , , , , , , , , , , , , , , , , ,
1	Enter the child's unearned income. See instructions	-	1	5,791,793
2	If the child did not itemize deductions on Schedule A (Form 1040) or Schedule A (Form 104 enter \$2,300. Otherwise, see instructions		2	716,081
3	Subtract line 2 from line 1. If zero or less, stop ; do not complete the rest of this form but do at to the child's return		3	5,104,255
4	Enter the child's taxable income from Form 1040 or 1040-NR, line 15. If the child files Form see the instructions		4	5.156.421
5	Enter the smaller of line 3 or line 4. If zero, stop ; do not complete the rest of this form but do at to the child's return.		5	4,567,460
Par	Tentative Tax Based on the Tax Rate of the Parent			
6	Enter the parent's taxable income from Form 1040 or 1040-NR, line 15. If zero or less, enter the parent files Form 2555, see the instructions		6	468,862,252
7	Enter the total, if any, from Forms 8615, line 5, of all other children of the parent named about the control of the parent named about the contro		_	0 444 740
8	not include the amount from line 5 above	-	7 8	3,114,742 476,544,454
9	Add lines 5, 6, and 7. See instructions	-	•	470,344,434
9	the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Sche (Form 1040) is used to figure the tax, check here	edule_J	9	145,566,705
10	Enter the parent's tax from Form 1040 or 1040-NR, line 16, minus any alternative minimum to	ax. Do 🗍		140,000,700
	not include any tax from Form 4972 or Form 8814, or any tax from the recapture of an edu			
	credit. If the parent files Form 2555, see the instructions. If the Qualified Dividends and Capita Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040) was used to figure the			
	check here		10	143,757,403
11	Subtract line 10 from line 9 and enter the result. If line 7 is blank, also enter this amount on line	13 and		
	go to Part III		11	1,809,302
12a	1.00			
b	Divide line 5 by line 12a. Enter the result as a decimal (rounded to at least three places)	<u> </u>	12b	X .
13 Pari	Multiply line 11 by line 12b	 ne 16	13	1,061,344
1 CII	Office 3 Tax If filles 4 and 5 above are the same, effect 6 of fille 15 and go to in	10.		
14	Subtract line 5 from line 4	961		
15	Enter the tax on the amount on line 14 based on the child's filing status. See instructions.	If the		
	Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Sche			40.740
40	(Form 1040) is used to figure the tax, check here	—	15	40,740
16	Add lines 13 and 15		16	1,102,084
17	Enter the tax on the amount on line 4 based on the child's filing status. See instructions. Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Sche			
	(Form 1040) is used to figure the tax, check here		17	672,507
18	Enter the larger of line 16 or line 17 here and on the child's Form 1040 or 1040-NR, line 16 child files Form 2555, see the instructions	. If the	18	1,109,969
For P	aperwork Reduction Act Notice, see your tax return instructions. Cat. No. 64113U		10	Form 8615 (2022)

Department of the Treasury Internal Revenue Service

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 = 232,636

Identifying number

Par	Net Minimum Tax on Exclusion Items		
1	Combine lines 1 and 2e of your 2021 Form 6251. Estates and trusts, see instructions	1	200,675
2	Enter adjustments and preferences treated as exclusion items (see instructions)	2	196,589
3	Minimum tax credit net operating loss deduction (see instructions)	3	(5,804)
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 \$752,800 and you were married filing separately for 2021, see instructions	4	184,811
5	Enter: \$114,600 if married filing jointly or qualifying widow(er) for 2021; \$73,600 if single or head of household for 2021; or \$57,300 if married filing separately for 2021. Estates and trusts, enter \$25,700	5	232,636
6	Enter: \$1,047,200 if married filing jointly or qualifying widow(er) for 2021; \$523,600 if single, head of household, or married filing separately for 2021. Estates and trusts, enter \$85,650	6	232,636
7	Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9	7	48,641
8	Multiply line 7 by 25% (0.25)	8	48,641
9	Subtract line 8 from line 5. If zero or less, enter -0	9	197,610
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	145,932
11	• If for 2021 you filed Form 2555, see instructions for the amount to enter.		
	• If for 2021 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	143,044
	• All others: If line 10 is \$199,900 or less (\$99,950 or less if married filing separately for 2021), multiply line 10 by 26% (0.26). Otherwise, multiply line 10 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately for 2021) from the result.		
12	Minimum tax foreign tax credit on exclusion items (see instructions)	12	55,475
13	Tentative minimum tax on exclusion items. Subtract line 12 from line 11	13	140,925
14	Enter the amount from your 2021 Form 6251, line 10, or 2021 Form 1041, Schedule I, line 53	14	145,960
15	Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0	15	40,614
For Pa	aperwork Reduction Act Notice, see instructions. Cat. No. 10002S		Form 8801 (2022)

Form **8801**

Department of the Treasury Internal Revenue Service

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

2022

Attachment
Sequence No. 801

Form **8801** (2022)

Identifying number

Name(s) shown on return

Total Forms Filed = 232,636

	Total Forms Filed = 232,030			
Par	Net Minimum Tax on Exclusion Items			
1	Combine lines 1 and 2e of your 2021 Form 6251. Estates and trusts, see instructions		1	280,294,608
2	Enter adjustments and preferences treated as exclusion items (see instructions)		2	3,757,452
3	Minimum tax credit net operating loss deduction (see instructions)		3	(2,883,127)
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 \$752,800 and you were married filing separately for 2021, see instructions		4	285,481,579
5	Enter: \$114,600 if married filing jointly or qualifying widow(er) for 2021; \$73,600 if single or he household for 2021; or \$57,300 if married filing separately for 2021. Estates and trusts, enter \$25		5	23,485,132
6	Enter: \$1,047,200 if married filing jointly or qualifying widow(er) for 2021; \$523,600 if single, he household, or married filing separately for 2021. Estates and trusts, enter \$85,650		6	204,602,974
7	Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9		7	207,575,861
8	Multiply line 7 by 25% (0.25)		8	51,893,971
9	Subtract line 8 from line 5. If zero or less, enter -0		9	19,291,080
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	272,652,323
11	 If for 2021 you filed Form 2555, see instructions for the amount to enter. If for 2021 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 \$199,900 or less (\$99,950 or less if married filing separately for 2021), multiply line 10 by 26% (0.26). Otherwise, multiply line 10 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately for 2021) from the result. 		11	58,132,726
12	Minimum tax foreign tax credit on exclusion items (see instructions)		12	2,025,413
13	Tentative minimum tax on exclusion items. Subtract line 12 from line 11		13	56,154,975
14	Enter the amount from your 2021 Form 6251, line 10, or 2021 Form 1041, Schedule I, line 53 .		14	57,608,331
15	Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0		15	1,288,932

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Part	Minimum Tax Credit and Carryforward to 2023		
16	Enter the amount from your 2021 Form 6251, line 11, or 2021 Form 1041, Schedule I, line 54	16	93,793
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	90,831
19	2021 credit carryforward. Enter the amount from your 2021 Form 8801, line 26	19	116,991
20	Enter your 2021 unallowed qualified electric vehicle credit (see instructions)	20	1,024
21	Combine lines 18 through 20. If zero or less, stop here and see the instructions	21	182,451
22	Enter your 2022 regular income tax liability minus allowable credits (see instructions)	22	149,870
23	Enter the amount from your 2022 Form 6251, line 9, or 2022 Form 1041, Schedule I, line 52	23	136,383
24	Subtract line 23 from line 22. If zero or less, enter -0	24	113,847
25	Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2022 Schedule 3 (Form 1040), line 6b; or Form 1041, Schedule G, line 2c	25	113,847
26	Credit carryforward to 2023. Subtract line 25 from line 21. Keep a record of this amount because you may use it in future years	26	125,080

Form **8801** (2022)

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

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Par	Minimum Tax Credit and Carryforward to 2023		
16	Enter the amount from your 2021 Form 6251, line 11, or 2021 Form 1041, Schedule I, line 54	16	3,419,232
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	2,130,301
19	2021 credit carryforward. Enter the amount from your 2021 Form 8801, line 26	19	8,961,902
20	Enter your 2021 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	11,756,159
22	Enter your 2022 regular income tax liability minus allowable credits (see instructions)	22	34,435,634
23	Enter the amount from your 2022 Form 6251, line 9, or 2022 Form 1041, Schedule I, line 52	23	33,041,017
24	Subtract line 23 from line 22. If zero or less, enter -0	24	2,998,952
25	Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2022		
	Schedule 3 (Form 1040), line 6b; or Form 1041, Schedule G, line 2c	25	1,390,197
26	Credit carryforward to 2023. Subtract line 25 from line 21. Keep a record of this amount because you may use it in future years	26	10,365,962

Form **8801** (2022)

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

Form 8801 (2022) Page **3**

Part	III 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	n the instructions.
	Caution: If you didn't complete the 2021 Qualified Dividends and Capital Gain Tax Worksheet, the 2021 Schedule D Tax Worksheet, or Part V of the 2021 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 2021, enter the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions	27	
	Caution: If for 2021 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 2021 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2021 Schedule D Tax Worksheet, or the amount from line 26 of the 2021 Schedule D (Form 1041), whichever applies (as refigured for the AMT, if necessary)*	28	
	If you figured your 2021 tax using the 2021 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 2021 Schedule D (Form 1040), or line 18b, column (2), of the 2021 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 2021 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 \$199,900 or less (\$99,950 or less if married filing separately for 2021), multiply line 32 by 26% (0.26). Otherwise, multiply line 32 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately for 2021) from the result	33	
34	Enter: • \$80,800 if married filing jointly or qualifying widow(er) for 2021, • \$40,400 if single or married filing separately for 2021, • \$54,100 if head of household for 2021, or • \$2,700 for an estate or trust.	34	
35	Enter the amount from line 5 of your 2021 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2021 Schedule D Tax Worksheet, or the amount from line 27 of the 2021 Schedule D (Form 1041), whichever applies. If you didn't complete either worksheet or Part V of the 2021 Schedule D (Form 1041), enter the amount from your 2021 Form 1040, 1040-SR, or 1040-NR, line 15, or 2021 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	 \$445,850 if single for 2021, \$250,800 if married filing separately for 2021, \$501,600 if married filing jointly or qualifying widow(er) for 2021, \$473,750 if head of household for 2021, or 	40	
41	• \$13,250 for an estate or trust. Enter the amount from line 36	41	
		71	
42	Form 1040, 1040-SR, or 1040-NR filers, enter the amount from line 5 of your 2021 Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of your 2021 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 2021 Schedule D (Form 1041) or line 18 of your 2021 Schedule D Tax		

Worksheet, whichever applies. If you didn't complete either the worksheet or Part V of the 2021 Schedule D (Form 1041), enter the amount from your 2021 Form 1041, line 23; if zero or less, enter -0-

^{*} The 2021 Qualified Dividends and Capital Gain Tax Worksheet is in the 2021 Instructions for Form 1040. The 2021 Schedule D Tax Worksheet is in the 2021 Instructions for Schedule D (Form 1040) (or the 2021 Instructions for Schedule D (Form 1041)).

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Part III	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 Ferned Income Tay Workshoot in the instruction

	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 2021 Qualified Dividends and Capital Gain Tax Worksheet, the 2021 Schedule D Tax Worksheet, or Part V of the 2021 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 2021, enter the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions	27	
	Caution: If for 2021 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 2021 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2021 Schedule D Tax Worksheet, or the amount from line 26 of the 2021 Schedule D (Form 1041), whichever applies (as refigured for the AMT, if necessary)*	28	
	If you figured your 2021 tax using the 2021 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 2021 Schedule D (Form 1040), or line 18b, column (2), of the 2021 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 2021 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 \$199,900 or less (\$99,950 or less if married filing separately for 2021), multiply line 32 by 26% (0.26). Otherwise, multiply line 32 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately for 2021) from the result	33	
34	Enter: • \$80,800 if married filing jointly or qualifying widow(er) for 2021, • \$40,400 if single or married filing separately for 2021, • \$54,100 if head of household for 2021, or • \$2,700 for an estate or trust.	34	
35	Enter the amount from line 5 of your 2021 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2021 Schedule D Tax Worksheet, or the amount from line 27 of the 2021 Schedule D (Form 1041), whichever applies. If you didn't complete either worksheet or Part V of the 2021 Schedule D (Form 1041), enter the amount from your 2021 Form 1040, 1040-SR, or 1040-NR, line 15, or 2021 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	Enter: • \$445,850 if single for 2021, • \$250,800 if married filing separately for 2021, • \$501,600 if married filing jointly or qualifying widow(er) for 2021, • \$473,750 if head of household for 2021, or • \$13,250 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 2021 Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of your 2021 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 2021 Schedule D (Form 1041) or line 18 of your 2021 Schedule D Tax Worksheet, whichever applies. If you didn't complete either the worksheet or Part V of the 2021 Schedule D (Form 1041) enter the amount from your 2021 Form 1041 line 23: if zero or less enter -0-	42	

^{*} The 2021 Qualified Dividends and Capital Gain Tax Worksheet is in the 2021 Instructions for Form 1040. The 2021 Schedule D Tax Worksheet is in the 2021 Instructions for Schedule D (Form 1040) (or the 2021 Instructions for Schedule D (Form 1041)).

Form 8801 (2022)

Part III Tax Computation Using Maximum Capital Gains Rates (continued)					
43 44 45 46	Add lines 41 and 42	43 44 45 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 \$199,900 or less (\$99,950 or less if married filing separately for 2021), multiply line 27 by 26% (0.26). Otherwise, multiply line 27 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately for 2021) 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 2021, 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** (2022)

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Part III 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 \$199,900 or less (\$99,950 or less if married filing separately for 2021), multiply line 27 by 26% (0.26). Otherwise, multiply line 27 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately for 2021) 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 2021, 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** (2022)

Form **8814**

Department of the Treasury Internal Revenue Service

Parents' Election To Report Child's Interest and Dividends

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

OMB No. 1545-0074

2022

Attachment
Sequence No. 40

Name(s) shown on your return

Total Forms Filed = 88,8

Your social security number

file a	ion: The federal income tax on your child's income, including qualified dividends all 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 <i>Tax benefits you cannot take</i> in	you c	annot take cert		
	Child's name (first, initial, and last)				
	If more than one Form 8814 is attached, check here				
Par	Child's Interest and Dividends To Report on Your Return				
1a b	Forms 1099-INT and 1099-OID, see the instructions		n on the child's	1a	12,791
2a	Enter your child's ordinary dividends, including any Alaska Permanent Fund di received any ordinary dividends as a nominee, see the instructions		ds. If your child	2a	49,214
ь 3	Enter your child's qualified dividends included on line 2a. See the instructions Enter your child's capital gain distributions. If your child received any capital g nominee, see the instructions	3	13,387		
4					52,376
5	Base amount. Enter 2,300			5	
6 7	Subtract line 5 from line 4			6	39,639
8	places)	7			
9	places)	9	12,414		
10	Multiply line 6 by line 8. Enter the result here. See the instructions for where to report this amount on your return	10	7,216		
11	Add lines 9 and 10				12,944
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 th	e box on line C		36,336
Par	Tax on the First \$2,300 of Child's Interest and Dividends				
13	Amount not taxed. Enter \$1,150			13	
14					51,632
15	 Tax. Is the amount on line 14 less than \$1,150? No. Enter \$115 here and see the Note below. Yes. Multiply line 14 by 10% (0.10). Enter the result here and see the Note be 	alow	}	15	51,632
	: If you checked the box on line C above, see the instructions. Otherwise, include the 1040,1040-SR, or 1040-NR, line 16. Be sure to check box 1 on Form 1040, 1040-SF	he an			tax you enter on

Form **8814**

Department of the Treasury Internal Revenue Service

Parents' Election To Report Child's Interest and Dividends

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

OMB No. 1545-0074

2022
Attachment
Sequence No. 40

Name(s) shown on your return

Total Forms Filed = 88,897

Your social security number

file a	on: The federal income tax on your child's income, including qualified dividends ar 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 <i>Tax benefits you cannot take</i> ir	you c	annot take certai	,	,
	Child's name (first, initial, and last)	1 110 11			
C I	f more than one Form 8814 is attached, check here				
Par	Child's Interest and Dividends To Report on Your Return				
1a	Enter your child's taxable interest. If this amount is different from the amounts Forms 1099-INT and 1099-OID, see the instructions			1a	11,708
b 2a	Enter your child's tax-exempt interest. Do not include this amount on line 1a Enter your child's ordinary dividends, including any Alaska Permanent Fund dividends. If your child received any ordinary dividends as a nominee, see the instructions				198,446
ь 3	Enter your child's qualified dividends included on line 2a. See the instructions [2b] 55,298 Enter your child's capital gain distributions. If your child received any capital gain distributions as a nominee, see the instructions				35,230
4	Add lines 1a, 2a, and 3. If the total is \$2,300 or less, skip lines 5 through 12 and go to line 13. If the total is \$11,500 or more, do not file this form. Your child must file his or her own return to report the income				245,384
5 6	Base amount. Enter 2,300				59,084
	If both lines 2b and 3 are zero or blank, skip lines 7 through 10, enter -0- or line 12. Otherwise, go to line 7.				
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	16,076		
10	Multiply line 6 by line 8. Enter the result here. See the instructions for where to report this amount on your return	10	11,230	11	27 206
11 12	Add lines 9 and 10				27,306
Part	above, see the instructions. Go to line 13 below			12	33,217
13	Amount not taxed. Enter \$1,150			13	
14	Subtract line 13 from line 4. If the result is zero or less, enter -0				92,466
15	Tax. Is the amount on line 14 less than \$1,150? No. Enter \$115 here and see the Note below.	.1		15	9,246
	☐ 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 1040,1040-SR, or 1040-NR, line 16. Be sure to check box 1 on Form 1040, 1040-SR	he am		in the	e tax you enter on

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

2022
Attachment Sequence No. 109

Name(s) shown on tax return Identifying number Total Forms Filed = 72,980 Information on the Like-Kind Exchange Note: Only real property should be described on lines 1 and 2. If the property described on line 1 or line 2 is real property located outside the United States, indicate the country. Description of like-kind property given up: 2 Description of like-kind property received: Date like-kind property given up was originally acquired (month, day, year) 3 Date you actually transferred your property to the other party (month, day, year) MM/DD/YYYY Date like-kind property you received was identified by written notice to another party (month, day, 5 year). See instructions for 45-day written identification requirement Date you actually received the like-kind property from other party (month, day, year). See instructions 6 MM/DD/YYYY 7 Was the exchange of the property given up or received made with a related party, either directly or indirectly Note: Do not file this form if a related party sold property into the exchange, directly or indirectly (such as through an intermediary); that property became your replacement property; and none of the exceptions on line 11 applies to the exchange. Instead, report the disposition of the property as if the exchange had been a sale. If one of the exceptions on line 11 applies to the exchange, complete Part II. **Related Party Exchange Information** Name of related party Relationship to you Related party's identifying number 8 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 part of 9 the exchange), did the related party sell or dispose of any part of the like-kind property received from you (or an intermediary) in the exchange? No 10 During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did you sell or dispose of any part of the like-kind property you received? ☐ 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 are "No" and this is not the year of the exchange, stop here. If either line 9 or line 10 is "Yes," complete Part III and report on this year's tax return the deferred gain or (loss) from line 24 unless one of the exceptions on line 11 applies. If one of the exceptions below applies to the disposition, check the applicable box. The disposition was after the death of either of the related parties. The disposition was an involuntary conversion, and the threat of conversion occurred after the exchange. You can establish to the satisfaction of the IRS that neither the exchange nor the disposition had tax avoidance as one of

its principal purposes. If this box is checked, attach an explanation. See instructions.

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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

2022

Attachment
Sequence No. 109

Name(s) shown on tax return Identifying number Total Forms Filed = 72,980 Information on the Like-Kind Exchange Note: Only real property should be described on lines 1 and 2. If the property described on line 1 or line 2 is real property located outside the United States, indicate the country. Description of like-kind property given up: 2 Description of like-kind property received: 3 Date you actually transferred your property to the other party (month, day, year) 4 Date like-kind property you received was identified by written notice to another party (month, day, 5 5 Date you actually received the like-kind property from other party (month, day, year). See instructions 6 7 Was the exchange of the property given up or received made with a related party, either directly or indirectly Note: Do not file this form if a related party sold property into the exchange, directly or indirectly (such as through an intermediary); that property became your replacement property; and none of the exceptions on line 11 applies to the exchange. Instead, report the disposition of the property as if the exchange had been a sale. If one of the exceptions on line 11 applies to the exchange, complete Part II. **Related Party Exchange Information** Name of related party Relationship to you Related party's identifying number 8 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 was part of the exchange), did the related party sell or dispose of any part of the like-kind property received from you (or an intermediary) in the exchange? No 10 During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did you sell or dispose of any part of the like-kind property you received? ☐ 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 are "No" and this is not the year of the exchange, stop here. If either line 9 or line 10 is "Yes," complete Part III and report on this year's tax return the 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. **a** The disposition was after the death of either of the related parties. The disposition was an involuntary conversion, and the threat of conversion occurred after the exchange. You can establish to the satisfaction of the IRS that neither the exchange nor the disposition had tax avoidance as one of its principal purposes. If this box is checked, attach an explanation. See instructions.

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Form 8824 (2022) Page 2 Name(s) shown on tax return. Do not enter name and social security number if shown on other side. Your social security number 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 . . . 4.573 13 13 14 Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain or 4,386 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 24.831 (but not below zero) by any exchange expenses you incurred. See instructions 15 68,933 16 16 72,034 17 17 Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange 18 18 71,416 19 19 72,523 Enter the smaller of line 15 or line 19, but not less than zero 22.010 20 20 3,056 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 21,408 22 23 22,780 23 Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions . . . 24 24 69,505 Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23. See instructions 25 25 71,234 **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 Description of divested property _____ 27 Description of replacement property ______ 28 ______ 29 Date divested property was sold (month, day, year) . . . 29 30 Sales price of divested property. See instructions 30 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

Basis of replacement property. Subtract line 37 from line 33

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Form 8824 (2022) Page **2**

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. **12** 2,011,623 Fair market value (FMV) of other property given up. See instructions . . . **13** 606,753 13 14 Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain or 1,404,869 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 8.375.518 (but not below zero) by any exchange expenses you incurred. See instructions 15 98,785,023 16 16 107,160,541 17 17 Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange 18 18 53,698,329 53,462,211 19 19 Enter the smaller of line 15 or line 19, but not less than zero 20 20 6.421.337 Ordinary income under recapture rules. Enter here and on Form 4797, line 16. See instructions . . . 190.713 21 21 22 Subtract line 21 from line 20. If zero or less, enter -0-, If more than zero, enter here and on Schedule D 6,294,564 or Form 4797, unless the installment method applies. See instructions 22 23 6.485.277 23 24 Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions . . . 24 46,976,934 Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23. See instructions 25 51,808,089 **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 Description of divested property 27 Description of replacement property ______ 28 29 29 Date divested property was sold (month, day, year) 30 Sales price of divested property. See instructions 30 31 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

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Form **8829**

Department of the Treasury Internal Revenue Service

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

2022

Attachment
Sequence No. 176

Name(s) of proprietor(s) Your social security number 3.496.932 Total Forms Filed = Part I Part of Your Home Used for Business Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory 3,238,600 1 3,242,125 2 2 3 3 Divide line 1 by line 2. Enter the result as a percentage % For daycare facilities not used exclusively for business, go to line 4. All others, go to line 7. 4 Multiply days used for daycare during year by hours used per day . . . If you started or stopped using your home for daycare during the year. 5 5 see instructions; otherwise, enter 8,760 6 6 Divide line 4 by line 5. Enter the result as a decimal amount Business percentage. For daycare facilities not used exclusively for business, multiply line 6 by line 3 (enter the result as a percentage). All others, enter the amount from line 3 7 Part II Figure Your Allowable Deduction Enter the amount from Schedule C. line 29. plus any gain derived from the business use of your home. 3,296,660 8 minus any loss from the trade or business not derived from the business use of your home. See instructions. (a) Direct expenses See instructions for columns (a) and (b) before completing lines 9-22. (b) Indirect expenses 9 Casualty losses (see instructions) 14,107 3,846 10 10 Deductible mortgage interest (see instructions) . 944.521 67.278 11 11 Real estate taxes (see instructions) 58.816 246,576 12 Add lines 9, 10, and 11 110.467 981,537 13 Multiply line 12, column (b), by line 7 979,531 14 Add line 12, column (a), and line 13 14 1,043,998 15 15 Subtract line 14 from line 8. If zero or less, enter -0-2.364.111 16 Excess mortgage interest (see instructions) 16 25,543 654,364 17 Excess real estate taxes (see instructions) . . . 17 148.039 1,165,068 18 18 91,005 1,978,693 19 19 71,855 716,096 20 20 141,381 Repairs and maintenance 960,376 21 21 200,016 2,447,781 22 860,089 Other expenses (see instructions) 103,844 23 Add lines 16 through 22 518.129 2,791,004 24 Multiply line 23, column (b), by line 7 2.783.047 25 Carryover of prior year operating expenses (see instructions) 26 Add line 23, column (a), line 24, and line 25 26 3,018,541 27 Allowable operating expenses. Enter the **smaller** of line 15 or line 26 . . . 27 2,197,632 28 Limit on excess casualty losses and depreciation. Subtract line 27 from line 15 28 2,155,387 29 2,966 Depreciation of your home from line 42 below 30 1,219,858 Carryover of prior year excess casualty losses and depreciation (see instructions) 31 1,254,882 32 32 33 Allowable excess casualty losses and depreciation. Enter the **smaller** of line 28 or line 32 33 803,386 34 34 2,582,437 35 35 Casualty loss portion, if any, from lines 14 and 33. Carry amount to Form 4684. See instructions . 9,999 36 Allowable expenses for business use of your home. Subtract line 35 from line 34. Enter here and on Schedule C, line 30. If your home was used for more than one business, see instructions 36 2,579,433 Part III Depreciation of Your Home Enter the smaller of your home's adjusted basis or its fair market value. See instructions 37 1.195.223 37 38 38 679,529 39 39 Basis of building. Subtract line 38 from line 37 1,185,654 Business basis of building. Multiply line 39 by line 7 40 40 1,178,820 41 41 % 42 Depreciation allowable (see instructions). Multiply line 40 by line 41. Enter here and on line 30 above 42 1,219,858 Part IV Carryover of Unallowed Expenses to 2023 Operating expenses. Subtract line 27 from line 26. If less than zero, enter -0- 43 43 1,068,350 44 Excess casualty losses and depreciation. Subtract line 33 from line 32. If less than zero, enter -0-504.309

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

2022

Attachment
Sequence No. 176

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

Department of the Treasury

Total Forms Filed = 3,496,932

	Total Forms Filed = 3,490,9	132					
Par	Part of Your Home Used for Business				<u> </u>		
1	Area used regularly and exclusively for business, re	egularl	y for daycare, c	r for s	storage of inventory		
	or product samples (see instructions)					1	1,134,908
2	Total area of home					2	6,963,894
3	Divide line 1 by line 2. Enter the result as a percenta					3	%
	For daycare facilities not used exclusively for bu	_					
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			6			
7	Business percentage. For daycare facilities not us	sed ex	clusively for bu	siness	s, multiply line 6 by		
	line 3 (enter the result as a percentage). All others, e	enter t	he amount from	line 3		7	%
Part	II Figure Your Allowable Deduction						
8	Enter the amount from Schedule C, line 29, plus any	gain d	erived from the b	ousines	ss use of your home,		
	minus any loss from the trade or business not derived from	om the	business use of y	our ho	me. See instructions.	8	117,571,773
	See instructions for columns (a) and (b) before completing lines	9–22.	(a) Direct expen	ses	(b) Indirect expenses		
9	Casualty losses (see instructions)	9	13,206		83,070		
10	Deductible mortgage interest (see instructions) .	10	328,311		9,219,466		
11	Real estate taxes (see instructions)	11	115,137		1,383,022		
12	Add lines 9, 10, and 11	12	456,653		10,685,559		
13	Multiply line 12, column (b), by line 7			13	1,516,240		
14	Add line 12, column (a), and line 13					14	1,972,893
15	Subtract line 14 from line 8. If zero or less, enter -0-					15	130,667,329
16	Excess mortgage interest (see instructions)		73,515		4,829,699		
17	Excess real estate taxes (see instructions)		396,325		5,453,215	4	
18	Insurance	18	126,058		3,782,688		
19	Rent		697,083		13,756,636	4	
20	Repairs and maintenance		337,769		5,666,832	4	
21	Utilities		376,412		10,861,535	4	
22	Other expenses (see instructions)		183,481		2,583,656	-	
23	Add lines 16 through 22	23	2,190,643		46,934,261	4	
24	Multiply line 23, column (b), by line 7			24	8,303,486	-	
25	Carryover of prior year operating expenses (see inst			25		-	45 700 000
26	Add line 23, column (a), line 24, and line 25					26	15,728,962
27	Allowable operating expenses. Enter the smaller of Limit on excess casualty losses and depreciation. S					27	8,105,618 122,561,712
28 29	Excess casualty losses (see instructions)					20	122,301,712
30	Depreciation of your home from line 42 below			30		-	
31	Carryover of prior year excess casualty losses and deprec			31	1,413,691 1,578,593	+	
32	Add lines 29 through 31	•	•			32	3,046,540
33	Allowable excess casualty losses and depreciation.					33	1,020,556
34	Add lines 14, 27, and 33					34	11,099,067
35	Casualty loss portion, if any, from lines 14 and 33. (35	34.800
36	Allowable expenses for business use of your he	-					3.,000
	and on Schedule C, line 30. If your home was used					36	11,064,267
Part	III Depreciation of Your Home			<u> </u>			, , , , , , , , , , , , , , , , , , , ,
37	Enter the smaller of your home's adjusted basis or	its fair	market value. S	See in:	structions	37	452,655,315
38	Value of land included on line 37					38	75,475,813
39	Basis of building. Subtract line 38 from line 37 .					39	377,179,502
40	Business basis of building. Multiply line 39 by line 7	٠				40	54,133,559
41	Depreciation percentage (see instructions)					41	%
42	Depreciation allowable (see instructions). Multiply lin		y line 41. Enter	here a	and on line 30 above	42	1,413,691
Part	IV Carryover of Unallowed Expenses to 202						
43	Operating expenses. Subtract line 27 from line 26. I					43	7,623,344
44	Excess casualty losses and depreciation. Subtract I		-	less th	nan zero, enter -0	44	2,025,984
For Pa	perwork Reduction Act Notice, see your tax return instr	ruction	s.		Cat. No. 13232M		Form 8829 (2022)

Form **8839**

Qualified Adoption Expenses

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/Form8839 for instructions and the latest information.

Attachment Sequence No. 38

Name(s) shown on return

Total Forms Filed = 72,910

Pari	Information About Your Eligible Child or Children—You must complete this part. See instructions for details, including what to do if you need more space.										
1		(a) d's name	(b) Child's year of birth	(c) born bef 2005 a	Check if child w (d) fore a child	ras— (e)		(f) Child's identifying nu	mher		(g) Check if adoption became final in
	First	Last	0. 5	disable		child					2022 or earlier
Child 1											
Child 2											
Child 3											
		a foreign child, see Spe							comple	ete Pa	art II or
	-	mployer-provided ado	ption benefit	ts, com	plete Part III o	on the back	k next	•			
Part	Adoption C	redit			Obileta	01:11-1	•	01-11-1-0			
0	Maximum adanti	on credit per child. Er	ator #14.000	. —	Child 1	Child	2	Child 3	-		
2	(see instructions)			2							
3	,	8839 for a prior year									
	child? No. E)								
	☐ Yes. S	ee instructions for the a	mount to					0.000			
	enter.		J	3	37,014	17,69	94	6,386			
4	Subtract line 3 fro			4							
5	-	on expenses (see instru	•	5	37,216	13,47	'3	5,059	-		
		ualified adoption expen doption expenses you p		:							
6	Enter the smaller		alu III 2022.	6	36,911	40.47		E 050			
7		justed gross income (se			30,311	13,47	7	5,059	-		
8	Is line 7 more than	,		,,		• •	-		-		
		s 8 and 9, and enter -0-	on line 10.								
	·	\$223,410 from line 7				[8				
9		40,000. Enter the result	as a decima	l (round	led to at leas	t three plac	ces). D	Do not enter			
	more than 1.000						٠.,		9	×	
10		ount on line 6 by line 9.		10							
11		om line 6			34,953	12,45	-	5,057	10	2	5,268
12 13		on line 11							12	3	J,200
13	•	rd, if any, from prior yea nstructions	•			•	vvork:	SHEEL III LIIE	13	4	8,374
14	Add lines 12 and								14		1,237
15		from line 5 of the Credi	t Limit Works	sheet in	the instruction	ns			15		7,700
16	Adoption Credit.	Enter the smaller of line	e 14 or line 1	5 here a	and on Sched	lule 3 (Forn	n 1040	0), line 6c. If	16	_	7 700
	line 15 is smaller t	than line 14, you may ha	ave a credit c	arrytorv	vard (see inst	ructions)			16	5	7.700

Form **8839**

Department of the Treasury Internal Revenue Service

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

2022

Attachment Sequence No. 38

Name(s) shown on return

Total Forms Filed =

72,910

Part	Information About Your Eligible Child or Children — You must complete this part. See instructions for details, including what to do if you need more space.										
1	Chile First	(a) d's name Last	(b) Child's year of birth	(c) born ber 2005 a disable	nd with special	s— (e) a foreign child	(f) Child's identifying nu	mber		(g) Check if adoption became final 2022 or earli	
Child 1											
Child 2											
Child 3											
Part II	I. If you received er	a foreign child, see Spe mployer-provided ado						compl	ete P	art II or	
Part	Adoption C	redit									
					Child 1	Child 2	Child 3				
2		on credit per child. Er									
3	Did you file Form 8839 for a prior year for the same child? No. Enter -0										
	☐ Yes. Seenter.	ee instructions for the a	mount to	3	440,519	207,47	6 89,647				
4	Subtract line 3 fro	m line 2		4							
5	Qualified adoption	on expenses (see instru		5	412,022	116,93	7 18,368				
		ialified adoption expens	•		,		·				
		loption expenses you p									
6	Enter the smaller	of line 4 or line 5		6	230,717	75.143	18,330				
7	Enter modified adj	usted gross income (see	e instructions)			7				
8	Is line 7 more than										
	•	s 8 and 9, and enter -0-									
		\$223,410 from line 7 .					8	-			
9	-	40,000. Enter the result			ded to at least	three place	es). Do not enter				
40	more than 1.000				 I			9	×	•	_
10 11	* *	ount on line 6 by line 9. om line 6.......			040.500	74.404	/0.000	-			
12		on line 11			218,596	74,494		12	3	13,092	
13		rd, if any, from prior yea						12		10,002	_
		nstructions						13	9	30,242	
14	Add lines 12 and							14		293,335	
15	Enter the amount	from line 5 of the Credit						15		57,701	
16		Enter the smaller of line									
	line 15 is smaller than line 14, you may have a credit carryforward (see instructions)							16	2	57,701	

Form 8839 (2022) Page ${f 2}$

Par	t III Employer-Provided Adoption Benefits						,
			Child 1	Child 2	Child 3		
17	Maximum exclusion per child. Enter \$14,890 (see instructions)	17					
18	Did you receive employer-provided adoption benefits for a prior year for the same child? No. Enter -0						
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 2022. This amount should be shown in box 12 of your 2022 Form(s) W-2 with code T	20				_	
21	Add the amounts on line 20					21	3,244
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 2022, 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 \$223,410? ☐ No. Skip lines 24 and 25, and enter -0- on line 26. ☐ Yes. Subtract \$223,410 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	`		st three	× .		
26	Multiply each amount on line 22 by line 25	26	 I			-	
27	Excluded benefits. Subtract line 26 from line 22	27	3,024	*	*		
28	Add the amounts on line 27					28	3,024
29	Taxable benefits. Is line 28 more than line 21? ☐ No. Subtract line 28 from line 21. Also, include this zero, on line 1f of Form 1040, 1040-SR, or 1040		•	an)			
	☐ Yes. Subtract line 21 from line 28. Enter the result as Also, enter the result on line 1f of Form 1040, 10	a ne	gative number.			29	2,241



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 2021, those expenses were not fully reimbursed by your employer or otherwise, and the adoption was not final by the end of 2021.
- The total adoption expenses you paid in 2022 were not fully reimbursed by your employer or otherwise, and the adoption became final in 2022 or earlier.
- You adopted a child with special needs and the adoption became final in 2022.

Form **8839** (2022)

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

Form 8839 (2022) Page **2**

Part	III Employer-Provided Adoption Benefits						
			Child 1	Child 2	Child 3		
17	Maximum exclusion per child. Enter \$14,890 (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				1	
20	Employer-provided adoption benefits you received in 2022. This amount should be shown in box 12 of your 2022 Form(s) W-2 with code T	20					
21	Add the amounts on line 20					21	21,208
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 2022, enter the amount from line 19.	22					
23	Enter modified adjusted gross income (from the works the instructions)						
24	Is line 23 more than \$223,410? No. Skip lines 24 and 25, and enter -0- on line 26. Yes. Subtract \$223,410 from line 23		. 24				
25	Divide line 24 by \$40,000. Enter the result as a decima 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	21,211	*	*		
28	Add the amounts on line 27					28	23,607
29	Taxable benefits. Is line 28 more than line 21? ☐ No. Subtract line 28 from line 21. Also, include this zero, on line 1f of Form 1040, 1040-SR, or 1040-SR.			an)			2 200
	☐ Yes. Subtract line 21 from line 28. Enter the result as Also, enter the result on line 1f of Form 1040, 10					29	-2,399



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 2021, those expenses were not fully reimbursed by your employer or otherwise, and the adoption was not final by the end of 2021.
- The total adoption expenses you paid in 2022 were not fully reimbursed by your employer or otherwise, and the adoption became final in 2022 or earlier.
- You adopted a child with special needs and the adoption became final in 2022.

Form **8839** (2022)

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

Form **8846**

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

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

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

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

OMB No. 1545-0123	
2022	
Attachment Sequence No. 846	

Name(s) shown on return

Total Forms Filed = 21,898

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

For Paperwork Reduction Act Notice, see instructions.

Identifying number

6

21,892

Form **8846** (2022)

tippir	ng 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	9,543
2	Tips not subject to the credit provisions (see instructions)	2	3,250
3	Creditable tips. Subtract line 2 from line 1	3	9,537
4	Multiply line 3 by 7.65% (0.0765). If you had any tipped employees whose wages (including tips) exceeded \$147,000, see instructions and check here	4	9,537
5	Credit for employer social security and Medicare taxes paid on certain employee tips from partnerships and S corporations	5	13,851
6	Add lines 4 and 5. Partnerships and S corporations, report this amount on Schedule K. All		

Cat. No. 16148Z

Form **8846**

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

2022

Attachment
Sequence No. 846

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

Total Forms Filed =

21,898

Identifying number

others, report this amount on Form 3800, Part III, line 4f
For Paperwork Reduction Act Notice, see instructions.

Cat. No. 16148Z

Form **8846** (2022)

95,549

161.245

256,794

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return

Total Forms Filed = 135,816 Social security number of MSA account holder. If both spouses have MSAs, see instructions

Section A. Archer MSAs. If you have only a Medicare Advantage MSA, skip Section A and complete Section B. Part I 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 coverage, complete a separate Part I for each spouse. Total employer contributions to your Archer MSA(s) for 2022 1 2 Archer MSA contributions you made for 2022, including those made in 2023 by the unextended due date of your return that were for 2022. Don't include rollovers. See instructions 2 5,376 3 Limitation from the Line 3 Limitation Chart and Worksheet in the instructions 3 4,142 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 4 4.148 Archer MSA deduction. Enter the smallest of line 2, 3, or 4 here. Also include this amount on 5 Caution: If line 2 is more than line 5, you may have to pay an additional tax. See instructions. **Archer MSA Distributions** Total distributions you and your spouse received in 2022 from all Archer MSAs (see instructions) . 6a 13,482 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 unextended due date of your return. See instructions 6b 12,429 Subtract line 6b from line 6a 6c 7 7 6,807 8 Taxable Archer MSA distributions. Subtract line 7 from line 6c. If zero or less, enter -0-. Also include 6.625 8 If any of the distributions included on line 8 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 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), 5,593 Section B. Medicare Advantage MSA Distributions. If you are filing jointly and both you and your spouse received distributions in 2022 from a Medicare Advantage MSA, complete a separate Section B for each spouse. See instructions. 8,007 10 Total distributions you received in 2022 from all Medicare Advantage MSAs (see instructions) . . . 10 11 11 7,571 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 8e 12 2,452 13a If any of the distributions included on line 12 meet any of the Exceptions to the Additional 50% Tax (see instructions), check here $\ldots \ldots \ldots \ldots \ldots \ldots \ldots$ 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 2021. Also include this amount in the total on Schedule 2 (Form 1040), line 17f . . . 13b 2.452 Form **8853** (2022) Cat. No. 24091H

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

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

Department of the Treasury Internal Revenue Service

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

2022

Attachment
Sequence No. 39

Name(s) shown on return

Total Forms Filed = 1

135,816

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

	Have Mons, see instructions		
	on A. Archer MSAs. If you have only a Medicare Advantage MSA, skip Section A and comple		
Part	Archer MSA Contributions and Deductions. See instructions before completing this paragraph jointly and both you and your spouse have high deductible health plans with self-only conseparate Part I for each spouse.		
1	Total employer contributions to your Archer MSA(s) for 2022		
2	Archer MSA contributions you made for 2022, including those made in 2023 by the unextended due		
	date of your return that were for 2022. Don't include rollovers. See instructions	2	21,636
3	Limitation from the Line 3 Limitation Chart and Worksheet in the instructions	3	10,998
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	403,236
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			00.070
6a	Total distributions you and your spouse received in 2022 from all Archer MSAs (see instructions)	6a	20,076
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 unextended due date of your return. See instructions	6b	*
С	Subtract line 6b from line 6a	6c	16.086
7	Unreimbursed qualified medical expenses (see instructions)	7	12.647
8	Taxable Archer MSA distributions. Subtract line 7 from line 6c. If zero or less, enter -0 Also include	•	.=,0
_	this amount in the total on Schedule 1 (Form 1040), line 8e	8	7,067
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	9b	1,168
Secti	on B. Medicare Advantage MSA Distributions. If you are filing jointly and both you and your distributions in 2022 from a Medicare Advantage MSA, complete a separate Section B instructions.		ch spouse. See
10	Total distributions you received in 2022 from all Medicare Advantage MSAs (see instructions)	10	16,977
11	Unreimbursed qualified medical expenses (see instructions)	11	21,332
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 8e	12	1,809
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 2021. Also include this amount in the total on Schedule 2 (Form 1040), line 17f	13b	905
For Pa	perwork Reduction Act Notice, see your tax return instructions. Cat. No. 24091H		Form 8853 (2022)

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

orm 88	853 (2022)		Attachment Sequence I	10. 39	Page ∠
Name o	of policyholder (as shown on return)		Social security number of policyholder		
Secti	ion C. Long-Term Care (LTC) Insurance Contracts. See Filing Re- before completing this section.	=			
	If more than one Section C is attached, check here				
14a	Name of insured b So	ocial securi	ty number of insure	d	
15	In 2022, did anyone other than you receive payments on a per diem or ot LTC insurance contract covering the insured or receive accelerated de policy covering the insured?	ath benefit	s under a life insu	rance	
16	Was the insured a terminally ill individual?				☐ Yes ☐ No
	Note: If "Yes" and the only payments you received in 2022 were accelerated you because the insured was terminally ill, skip lines 17 through 25 and er			aid to	
17	Gross LTC payments received on a per diem or other periodic basis. En from box 1 of all Forms 1099-LTC you received with respect to the insur box in box 3 is checked	red on which		17	46,597
	Caution: Don't use lines 18 through 26 to figure the taxable amount of insurance contract that isn't a qualified LTC insurance contract. Insexcludable from your income (for example, if the benefits aren't paid for through accident or health insurance), report the amount not excludable (Form 1040), line 8e, or, for taxpayers filing Form 1040-NR, on Schedule N	stead, if the personal in e as incom	e benefits aren't juries or sickness le on Schedule 1		
18	Enter the part of the amount on line 17 that is from qualified LTC insurance	ce contract	3	18	24,109
19	Accelerated death benefits received on a per diem or other periodic basis you received because the insured was terminally ill. See instructions			19	*
20	Add lines 18 and 19		<u>.</u>	20	26,173
	Note: If you checked "Yes" on line 15 above, see <i>Multiple Payees</i> in instructions before completing lines 21 through 25.	n the			
21	Multiply \$390 by the number of days in the LTC period	21	43,085		
22	Costs incurred for qualified LTC services provided for the insured during LTC period (see instructions)	_	· · · · · · · · · · · · · · · · · · ·		
23	Enter the larger of line 21 or line 22	23	72,937		
24	Reimbursements for qualified LTC services provided for the insured durin LTC period	24	·		
	Caution: If you received any reimbursements from LTC contracts issued instructions.	before Au	gust 1, 1996, see		
25	Per diem limitation. Subtract line 24 from line 23			25	58,784 +/-
26	Taxable payments. Subtract line 25 from line 20. If zero or less, enter -0-the total on Schedule 1 (Form 1040), line 8e, or, for taxpayers filing Form 5 Schedule NEC, line 12. For taxpayers filing Form 1040-NR, on Schedule Nenter "LTC" and the amount	1040-NR, c IEC (Form	n Form 1040-NR, 1040-NR), line 12,	00	4.040
	enter "LTC" and the amount			26	4.912

Form **8853** (2022)

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

Form **8853** (2022)

2022 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

orm 88	\$53 (2022)	Attachment Sequence N	lo. 39	Page 2
	f policyholder (as shown on return)	Social security number of policyholder		
Secti	on C. Long-Term Care (LTC) Insurance Contracts. See Filing Requireme before completing this section.		in th	ne instructions
	If more than one Section C is attached, check here			
14a	Name of insured b Social secur	ity number of insure	d	
15	In 2022, did anyone other than you receive payments on a per diem or other period LTC insurance contract covering the insured or receive accelerated death benefit policy covering the insured?	ts under a life insu	rance	
16	Was the insured a terminally ill individual?	benefits that were pa		☐ Yes ☐ No
17	Gross LTC payments received on a per diem or other periodic basis. Enter the tot from box 1 of all Forms 1099-LTC you received with respect to the insured on whi box in box 3 is checked	ch the "Per diem"	17	2,525,782
	Caution: Don't use lines 18 through 26 to figure the taxable amount of benefits p insurance contract that isn't a qualified LTC insurance contract. Instead, if the excludable from your income (for example, if the benefits aren't paid for personal in through accident or health insurance), report the amount not excludable as income (Form 1040), line 8e, or, for taxpayers filing Form 1040-NR, on Schedule NEC (Form	ne benefits aren't njuries or sickness ne on Schedule 1		
18	Enter the part of the amount on line 17 that is from qualified LTC insurance contract	s	18	1,313,362
19	Accelerated death benefits received on a per diem or other periodic basis. Don't inc you received because the insured was terminally ill. See instructions		19	*
20	Add lines 18 and 19		20	1,591,499
	Note: If you checked "Yes" on line 15 above, see <i>Multiple Payees</i> in the instructions before completing lines 21 through 25.			
21	Multiply \$390 by the number of days in the LTC period	4,932,215		
22	Costs incurred for qualified LTC services provided for the insured during the LTC period (see instructions)	, ,		
23	Enter the larger of line 21 or line 22	6,694,534		
24	Reimbursements for qualified LTC services provided for the insured during the LTC period	2,515,500		
	Caution: If you received any reimbursements from LTC contracts issued before Autinstructions.	igust 1, 1996, see		
25	Per diem limitation. Subtract line 24 from line 23		25	4,872,789+/-
26	Taxable payments. Subtract line 25 from line 20. If zero or less, enter -0 Also include the total on Schedule 1 (Form 1040), line 8e, or, for taxpayers filing Form 1040-NR, of Schedule NEC, line 12. For taxpayers filing Form 1040-NR, on Schedule NEC (Form enter "LTC" and the amount	on Form 1040-NR, 1040-NR), line 12,	26	230.818

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

Form **8863**

Department of the Treasury Internal Revenue Service

Education Credits (American Opportunity and Lifetime Learning Credits)

Attach to Form 1040 or 1040-SR.

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

Complete a separate Part III on page 2 for each student for whom you're claiming either credit before

20**22**

OMB No. 1545-0074

Attachment Sequence No. **50**

Name(s) shown on return

Total Forms Filed = 8,730,136

Your	social	security	number
		i	

CAUT	you complete Parts I and II.					
Par	Refundable American Opportunity Credit					
1	After completing Part III for each student, enter the total of all amounts from all F	arts I	II, line 3	30	1	6,067,568
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse	2	6,067	7,568		
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	3	6,000	0,959		
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit	4	6,06	4,856		
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	5	6,06	4,856		
6	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 (ro at least three places)				6	6,064,856
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 Americ skip line 8, enter the amount from line 7 on line 9, and check this box			🗆	7	6,064,856
8	8 Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the amount here and on Form 1040 or 1040-SR, line 29. Then go to line 9 below.					5,957,083
Part						
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	•		,	9	6,064,856
10	After completing Part III for each student, enter the total of all amounts from zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19				10	2,796,542
11	Enter the smaller of line 10 or \$10,000				11	2,796,542
12	Multiply line 11 by 20% (0.20)				12	2,795,533
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or					
	qualifying surviving spouse	13	2,796	6,542		
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead	14	2.79	5,533		
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		6,542		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse	16		6,223		
17	If line 15 is:		,. 0			
	• 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 (roun				17	
	least three places)					0.705.011
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet	•		•	18	2,795,214
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit	Limit	Works	heet (see		

instructions) here and on Schedule 3 (Form 1040), line 3

Form **8863**

Department of the Treasury Internal Revenue Service

Education Credits (American Opportunity and Lifetime Learning Credits)

Attach to Form 1040 or 1040-SR.

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

OND NO. 1343-0074	
2022	
Attachment Sequence No. 50	

Name(s) shown on return

Total Forms Filed = 8,730,136

Your social security number

A
CAUTION
Part I

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.

CACTI			
Part	Refundable American Opportunity Credit		
1	After completing Part III for each student, enter the total of all amounts from all Parts III, line 30	1	13,524,624
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse		
3	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead		
4	Subtract line 3 from line 2. If zero or less, stop ; you can't take any education credit		
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse		
6	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 (rounded to at least three places)	6	5,923,538
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the year and meet the conditions described in the instructions, you can't take the refundable American opportunity credit; skip line 8, enter the amount from line 7 on line 9, and check this box	7	13,173,749
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter the amount here and on Form 1040 or 1040-SR, line 29. Then go to line 9 below.	8	5,184,485
Part			3, 10 1, 100
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet (see instructions) .	9	7,989,264
10	After completing Part III for each student, enter the total of all amounts from all Parts III, line 31. If		
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19	10	23,102,253
11	Enter the smaller of line 10 or \$10,000	11	14,335,117
12	Multiply line 11 by 20% (0.20)	12	2,867,021
13	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying surviving spouse		
14	Enter the amount from Form 1040 or 1040-SR, line 11. But if you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter instead		
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		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying surviving spouse		
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 (rounded to at least three places)	17	
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) .	18	2,770,229
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit Limit Worksheet (see		7.050.770
	instructions) here and on Schedule 3 (Form 1040), line 3	19	7,850,773

Form 8863 (2022)			Page 2
Name(s) shown on return			Your social security number
	Part III for each student for whor fetime learning credit. Use additi	-	
Part III Student a	nd Educational Institution Informatio	n. See instructions.	
20 Student name (as s	shown on page 1 of your tax return)	21 Student social security number (your tax return)	as shown on page 1 of
22 Educational institut	ion information (see instructions)	1	
a. Name of first educ	, ,	b. Name of second educational ins	titution (if any)
	er and street (or P.O. box). City, town or e, and ZIP code. If a foreign address, see	(1) Address. Number and street (compost office, state, and ZIP codinstructions.	
(2) Did the student from this institut	receive Form 1098-T	(2) Did the student receive Form 1 from this institution for 2022?	098-T Yes No
` '	receive Form 1098-T tion for 2021 with box	(3) Did the student receive Form 1 from this institution for 2021 w 7 checked?	
if you're claimin	tion's employer identification number (EIN) g the American opportunity credit or if you n (2) or (3). You can get the EIN from Form the institution.	(4) Enter the institution's employer if you're claiming the American checked "Yes" in (2) or (3). You 1098-T or from the institution.	opportunity credit or if you
	- — — — — —		
23 Has the American student for any 4	n opportunity credit been claimed for this prior tax years?	Yes — Stop! Go to line 31 for this student.	No — Go to line 24.
academic period in 2022 at an elig leading towards	enrolled at least half-time for at least one that began or is treated as having begun gible educational institution in a program a postsecondary degree, certificate, or postsecondary educational credential?	Voc (=0 to line 26	No — Stop! Go to line 31 for this student.
	omplete the first 4 years of postsecondary 2022? See instructions.	Yes — Stop! Go to line 31 for this student.	No — Go to line 26.
	convicted, before the end of 2022, of a ession or distribution of a controlled		No — Complete lines 27 through 30 for this student.
you complete	te the American opportunity credit and the le lines 27 through 30 for this student, don't		
American Oppo	-		6,067,568 17,724
28 Subtract \$2,000 fr	· · · · · · · · · · · · · · · · · · ·	n't enter more than \$4,000	. 27 312,299 *
enter the result. S	enter the amount from line 27. Otherwise, kip line 31. Include the total of all amounts		
31 Adjusted qualified III, line 31, on Part	education expenses (see instructions). Inc		rts 2,796,542 * . 31 70,333 0
, , ,	<u> </u>		2000

Form 8863 (2022)			Page 2
Name(s) shown on ret	turn	Yo	ur social security number
	plete Part III for each student for whor lit or lifetime learning credit. Use additi		
Part III Stud	dent and Educational Institution Informatio	n. See instructions.	
	me (as shown on page 1 of your tax return)	21 Student social security number (as your tax return)	shown on page 1 of
22 Educationa	I institution information (see instructions)	•	
a. Name of fi	rst educational institution	b. Name of second educational instit	ution (if any)
	. Number and street (or P.O. box). City, town or ce, state, and ZIP code. If a foreign address, see ons.	(1) Address. Number and street (or post office, state, and ZIP code. instructions.	
· •	student receive Form 1098-T	(2) Did the student receive Form 10 from this institution for 2022?	98-T Yes No
(-)	student receive Form 1098-T institution for 2021 with box	(3) Did the student receive Form 10 from this institution for 2021 with 7 checked?	· · ·
if you're checked	e institution's employer identification number (EIN) claiming the American opportunity credit or if you "Yes" in (2) or (3). You can get the EIN from Form or from the institution.	(4) Enter the institution's employer id if you're claiming the American of checked "Yes" in (2) or (3). You of 1098-T or from the institution.	pportunity credit or if you
	merican opportunity credit been claimed for this rany 4 prior tax years?	Yes — Stop! Go to line 31 for this student.	o — Go to line 24.
academic in 2022 at leading to	tudent enrolled at least half-time for at least one period that began or is treated as having begun an eligible educational institution in a program wards a postsecondary degree, certificate, or ognized postsecondary educational credential? ctions.	1 Vac — (=0 to line 25	o — Stop! Go to line 31 r this student.
	udent complete the first 4 years of postsecondary before 2022? See instructions.	Yes — Stop! Go to line 31 for this student.	o — Go to line 26.
	student convicted, before the end of 2022, of a possession or distribution of a controlled?		o — Complete lines 27 rough 30 for this student.
CAUTION YOU CO	an't take the American opportunity credit and the complete lines 27 through 30 for this student, don't		
	n Opportunity Credit		18,917,537 60,138
•	qualified education expenses (see instructions). Do		27 974,937 *
28 Subtract \$	2,000 from line 27. If zero or less, enter -0		28
29 Multiply lin	ne 28 by 25% (0.25)		29
30 If line 28 is	s zero, enter the amount from line 27. Otherwise,	add \$2,000 to the amount on line 29 and	12,812,688 39,996
	esult. Skip line 31. Include the total of all amounts		30 666,934 *
	Learning Credit		
31 Adjusted o	qualified education expenses (see instructions). Incon Part II, line 10		22,717,411 * 31 384,841 0

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

2022

Attachment Sequence No. 54

(b) Your spouse

Name(s) shown on return

Total Forms Filed = 9,436,595

Your social security number

(a) You

A

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 2022. **Do not** include rollover contributions

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$34,000 (\$51,000 if head of household; \$68,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2005; (b) is claimed as a dependent on someone else's 2022 tax return; or (c) was a **student** (see instructions).

designated be	neficiary for 20	022. Do not include ro	llover contributions		1	785,447	7	192,143
		c) or other qualified er						
contributions,	and 501(c)(18)	(D) plan contributions) plan contributions for 2022 (see instructions) 2 8,229,92					
Add lines 1 an	d2				3	8,685,84	13	1,142,883
		ed after 2019 and		` .				
		return (see instruction						
both spouses'	amounts in b o	oth columns. See inst	ructions for an exce _l	ption	4	341,68	1	104,161
Subtract line 4	from line 3. If	zero or less, enter -0-			5	8,672,4	39	1,134,187
In each colum	n, enter the sm	naller of line 5 or \$2,00	00		6	8,675,4	65	1,134,187
Add the amou	nts on line 6. If	f zero, stop ; you can't	take this credit .				7	9,426,216
Enter the amo	unt from Form	1040, 1040-SR, or 10	40-NR, line 11* .	8	9,	426,207		
		amount from the table						
If line	8 is-	Α	nd your filing statu	ıs is—				
Over—	But not	Married filing jointly	Head of household	Single, Marr separate		ng		
	over—	Enter on	line 9—	Qualifying survi	,	ouse		
	\$20,500	0.5	0.5	0.5	i			
\$20,500	\$22,000	0.5	0.5	0.2	!			
\$22,000	\$30,750	0.5	0.5	0.1		1	9	хO.
\$30,750	\$33,000	0.5	0.2	0.1				
\$33,000	\$34,000	0.5	0.1	0.1				
\$34,000	\$41,000	0.5	0.1	0.0)			
\$41,000	\$44,000	0.2	0.1	0.0)			
\$44,000	\$51,000	0.1	0.1	0.0)			
\$51,000	\$68,000	0.1	0.0	0.0)			
\$68,000		0.0	0.0	0.0)			
	Note:	f line 9 is zero, stop ; y	ou can't take this ci	redit.				
Multiply line 7	•						10	9,400,565
		ity. Enter the amount t					11	9,375,657
		ent savings contribu	utions. Enter the sn	naller of line 10	or li	ne 11 here		
and on Sched	ule 3 (Form 104	40), line 4					12	9,350,016

^{*} 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.

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

2022

Attachment
Sequence No. 54

(b) Your spouse

826,768

Name(s) shown on return

Total Forms Filed = 9,436,595

Your social security number

(a) You

2,686,162



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 2022. **Do not** include rollover contributions

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$34,000 (\$51,000 if head of household; \$68,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2005; (b) is claimed as a dependent on someone else's 2022 tax return; or (c) was a **student** (see instructions).

						2,000,10	_	020,700
) or other qualified er						
contributions,	and 501(c)(18)	(D) plan contributions	for 2022 (see instru	ctions)	2	14,993,37	74	3,292,008
Add lines 1 an	d2				3	17,679,5	36	4,118,776
		ed after 2019 and		, ,				
		return (see instruction						
•		oth columns. See inst		•	4	462,51		216,783
		zero or less, enter -0-			5	17,281,2		3,978,024
		naller of line 5 or \$2,0			6	10,467,0	92	1,563,523
		zero, stop ; you can't					7	12,030,615
Enter the amo	unt from Form	1040, 1040-SR, or 10	40-NR, line 11* .	8	343	,719,561		
Enter the appli	icable decimal	amount from the tabl	e below.					
If line	8 is-	A	and your filing statu	us is—				
	But not	Married	Head of		Single, Married filing			
Over—	over—	filing jointly	household	separate				
		Enter on		Qualifying survi		ouse		
	\$20,500	0.5	0.5	0.5				
\$20,500	\$22,000	0.5	0.5	0.2				
\$22,000	\$30,750	0.5	0.5	0.1			9	хO.
\$30,750	\$33,000	0.5	0.2	0.1				
\$33,000	\$34,000	0.5	0.1	0.1				
\$34,000	\$41,000	0.5	0.1	0.0				
\$41,000	\$44,000	0.2	0.1	0.0				
\$44,000	\$51,000	0.1	0.1	0.0				
\$51,000	\$68,000	0.1	0.0	0.0				
\$68,000		0.0	0.0	0.0				
	Note:	f line 9 is zero, stop ;	you can't take this c	redit.				
Multiply line 7	by line 9 .						10	2,156,096
_imitation bas	ed on tax liabil	ity. Enter the amount	from the Credit Limi	it Worksheet in t	he ins	tructions	11	16,960,457
		ent savings contrib				ne 11 here		
and on Sched	ule 3 (Form 104	40), line 4					12	1,810,118

^{*} 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.

Health Savings Accounts (HSAs)

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/Form8889 for instructions and the latest information.

Attachment Sequence No. **52**

Name(s	If both spausos		of HSA beneficiary. SAs, see instructions.
	Total Forms Filed = 16,497,046		
Befo	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, i	f requ	ired.
Par	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 2022.		
	See instructions	☐ Se	elf-only \square Family
2	HSA contributions you made for 2022 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2022. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	2,116,616
3	If you were under age 55 at the end of 2022 and, on the first day of every month during 2022, you were, or were considered, an eligible individual with the same coverage, enter \$3,650 (\$7,300 for family coverage). All others , see the instructions for the amount to enter	3	14,370,369
4	Enter the amount you and your employer contributed to your Archer MSAs for 2022 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2022, also include any amount contributed to your spouse's Archer MSAs	4	30,066
5	Subtract line 4 from line 3. If zero or less, enter -0	5	14,368,641
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 2022, see the instructions for the amount to enter	6	14,115,722
7	If you were age 55 or older at the end of 2022, married, and you or your spouse had family coverage under an HDHP at any time during 2022, enter your additional contribution amount. See instructions.	7	1,663,492
8	Add lines 6 and 7	8	14,117,049
9 10	Employer contributions made to your HSAs for 2022 9 12,906,873 Qualified HSA funding distributions 10 42,935		
11	Add lines 9 and 10	11	12,916,787
12	Subtract line 11 from line 8. If zero or less, enter -0	12	12,557,868
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13 Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.	13	2,041,587
Part	HSA Distributions. If you are filing jointly and both you and your spouse each have separate Part II for each spouse.	arate	HSAs, complete
14a	Total distributions you received in 2022 from all HSAs (see instructions)	14a	9,346,472
b	, ,		
	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	92,567
C 15	Subtract line 14b from line 14a	14c	9,297,666
15 16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this	15	8,945,732
	amount in the total on Schedule 1 (Form 1040), Part I, line 8f	16	465,435
17a	Tax (see instructions), check here		
b	are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b	231,662
Part			
18	Last-month rule	18	10,700
19	Qualified HSA funding distribution	19	*
20	Total income, Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040). Part L line 8f	20	12.713

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

21

Cat. No. 37621P

Form **8889** (2022)

12,713

21

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

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.

OMB No. 1545-0074

2022
Attachment Sequence No. 52

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

Total Forms Filed = 16,497,046

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

	Total Forms Filed = 10,437,040		
	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 and both you and your spouse each have separate HSAs, complete a separate Part I fo		
1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2022. See instructions	□ Se	elf-only Family
2	HSA contributions you made for 2022 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2022. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	6,623,617
3	If you were under age 55 at the end of 2022 and, on the first day of every month during 2022, you were, or were considered, an eligible individual with the same coverage, enter \$3,650 (\$7,300 for family coverage). All others , see the instructions for the amount to enter	3	84,387,865
4	Enter the amount you and your employer contributed to your Archer MSAs for 2022 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2022, also include any amount contributed to your spouse's Archer MSAs	4	72,685
5	Subtract line 4 from line 3. If zero or less, enter -0	5	84,332,443
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 2022, see the instructions for the amount to enter	6	79,832,867
7	If you were age 55 or older at the end of 2022, married, and you or your spouse had family coverage under an HDHP at any time during 2022, enter your additional contribution amount. See instructions.	7	1,723,902
8	Add lines 6 and 7	8	81,556,769
9	Employer contributions made to your HSAs for 2022		0.,000,000
10	Qualified HSA funding distributions		
11	Add lines 9 and 10	11	35,533,569
12	Subtract line 11 from line 8. If zero or less, enter -0	12	47,613,960
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13	6.047.945
	Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.	10	0+0,1+0,0
Part		arate l	HSAs, complete
14a	Total distributions you received in 2022 from all HSAs (see instructions)	14a	24,757,638
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	228,127
С	Subtract line 14b from line 14a	14c	24,529,511
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	23,862,510
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this		20,002,010
	amount in the total on Schedule 1 (Form 1040), Part I, line 8f	16	667,001
	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	69,245
Part	Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instruction completing this part. If you are filing jointly and both you and your spouse each have se complete a separate Part III for each spouse.		
18	Last-month rule	18	14,505
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 8f .	20	16,173
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	1,618

Form **8910**

(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**

Name(s) shown on return

Total Forms Filed =

47,619

Identifying number

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.

Part I Tentative Credit

	separate column for each vehicle. If you need more columns, use onal 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	46,586	2,092

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 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	6,162	
8	Alternative motor vehicle credit from partnerships and S corporation	ns (see instructions) .	8	*	
9	Business/investment use part of credit. Add lines 7 and 8. Partners stop here and report this amount on Schedule K. All others, report this Part III, line 1r	is a	mount on Form 3800,	9	6 167	

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	42,531
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	8,254
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	47,617
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	42,531

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.

Form **8910**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Alternative Motor Vehicle Credit

OMB No. 1545-1998

► Attach to your tax return.

47,619

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

Attachment Sequence No. **68**

Name(s) shown on return

Total Forms Filed =

Identifying number

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.

Part I Tentative 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	246,393	9,316	

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 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	21,243
8	Alternative motor vehicle credit from partnerships and S corporate	tions	(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	ership this a	os and S corporations, amount on Form 3800,	9	21 252

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	234,519
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	10.019
14	Subtract line 13 from line 12. If zero or less, enter -0- and stop here. You cannot claim the		10,010
'-	personal use part of the credit	14	1,348,244
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	189,368

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.

Alternative Fuel Vehicle Refueling Property Credit

OMB No. 1545-0123

(Rev. January 2023)
Department of the Treasury
Internal Revenue Service

Attach to your tax return.

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

Attachment Sequence No. **151**

Name(s) shown on return

Total Forms Filed = 99,289

Par	Total Cost of Refueling Property		
1	Total cost of qualified alternative fuel vehicle refueling property placed in service during the tax		
	year (see What's New in the instructions)	1	99,282
Part	Credit for Business/Investment Use Part of Refueling Property		
2	Business/investment use part (see instructions)	2	3,394
3	Section 179 expense deduction (see instructions)	3	*
4a	Subtract line 3 from line 2	4a	3,394
b	Enter any amount included on line 4a attributable to property placed in service after 2022 as part		
	of a project subject to project requirements that were not met (see instructions)	4b	*
С	Subtract line 4b from line 4a	4c	3,352
5a	Multiply line 4b by 6% (0.06)	5a	*
b	Multiply line 4c by 30% (0.30)	5b	3,393
С	Add lines 5a and 5b	5c	3,353
6			
7		7	3,394
8			40
	,	8	43
9			
		_	
ъ	III, line 1s	9	3,417
10			
		-	
		-	
		$\overline{}$	07.700
		13	97,798
14			
		4.4	
		14	
4-			
_	1 9 11 1 11	-	
	,	45.	74.060
		150	74,063
16		16	07 702
17		10	91,192
17			
		17	84 824
	form or schedule.	17	04,024
18	Subtract line 17 from line 16. If zero or less, stop here; do not file this form unless you are		
		18	97,790
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		
		19	
7 8 9 Parti 10 11 12 13 14 15 a b c 16 17	Subtract line 2 from line 1. If zero, stop here; do not file this form unless you are claiming a credit on line 9		3,838 3,394 43 3,417 97,798 74,063 97,792 84,824 97,790

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 37721Q

Form **8911** (Rev. 1-2023)

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

(Rev. January 2023) 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 99,289 Total Forms Filed = **Total Cost of Refueling Property** Part I Total cost of qualified alternative fuel vehicle refueling property placed in service during the tax year (see What's New in the instructions) 161,656 Credit for Business/Investment Use Part of Refueling Property 8.765 2 3 Section 179 expense deduction (see instructions) 3 * 4a 8,764 Enter any amount included on line 4a attributable to property placed in service after 2022 as part * 4b of a project subject to project requirements that were not met (see instructions) 8.499 4c С b 5b 2,630 C 5с 2,550 Maximum business/investment use part of credit (see instructions) 6 112,095 6 7 2,388 7 Alternative fuel vehicle refueling property credit from partnerships and S corporations (see 501 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 9 2,889 **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 13 42,949 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 15c 295,747 Net regular tax. Subtract line 15c from line 14. If zero or less, enter -0- and stop here; do not file 16 6,906,817 Tentative minimum tax (see instructions): • Individuals. Enter the amount from Form 6251, line 9. 17 5.773.804 Other filers. Enter the tentative minimum tax from your alternative minimum tax form or schedule. 18 Subtract line 17 from line 16. If zero or less, stop here; do not file this form unless you are 18 1.133.089 Personal use part of credit. Enter the smaller of line 13 or line 18 here and on Schedule 3 (Form 19 1040), line 6j; or the appropriate line of your return. If line 18 is smaller than line 13, see 19 42.321

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 37721C

Form 8911 (Rev. 1-2023)

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

Form **8936**

Qualified Plug-in Electric Drive Motor Vehicle Credit

(Including Qualified Two-Wheeled Plug-in Electric Vehicles and New Clean Vehicles)

Attach to your tax return.

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

OMB No. 1545-2137

Attachment Sequence No. **69**

(b) Vehicle 2

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

Tentative Credit

Year, make, and model of vehicle .

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.

Total Forms Filed = 255,551

ed = 255 551

(a) Vehicle 1

Note: This credit is for qualified plug-in electric drive motor vehicles placed in service before 2023, qualified two-wheeled plug-in electric vehicles acquired before but placed in service in 2022, and new clean vehicles placed in service after 2022. See separate instructions for vehicle definitions and other requirements.

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 art II and go to Part III. All others, go to Part II.	purpo	ses and did not have a cred	dit fror	n a partnership or S corporation,
Part	II Credit for Business/Investment Use Part of	Vehic	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	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	7,725
13	Qualified plug-in electric drive motor vehicle credit from p (see instructions)			13	3,664
14	Business/investment use part of credit. Add lines S corporations, stop here and report this amount on Schamount on Form 3800, Part III, line 1y	nedule	e K. All others, report this	14	11,365

Form **8936**

Qualified Plug-in Electric Drive Motor Vehicle Credit

(Including Qualified Two-Wheeled Plug-in Electric Vehicles and New Clean Vehicles)

Attach to your tax return.

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

OMB No. 1545-2137

Sequence No. 69

Attachment

(b) Vehicle 2

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

Tentative Credit

Year, make, and model of vehicle .

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.

Total Forms Filed = 255,551

Identifying number

Note: This credit is for qualified plug-in electric drive motor vehicles placed in service before 2023, qualified two-wheeled plug-in electric vehicles acquired before but placed in service in 2022, and new clean vehicles placed in service after 2022. See separate instructions for vehicle definitions and other requirements.

1

(a) Vehicle 1

2	Vehicle identification number (see instructions)	2			
3	Enter date vehicle was placed in service (MM/DD/YYYY)	3			
4 a	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 art II and go to Part III. All others, go to Part II.	purpo	oses and did not have a cred	dit fron	m a partnership or S corporation,
Part	II Credit for Business/Investment Use Part of	Vehic	cle		
5	Business/investment use percentage (see instructions)	5		%	<u>%</u>
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	33,341
13	Qualified plug-in electric drive motor vehicle credit from p (see instructions)		•	13	19,575
14	Business/investment use part of credit. Add lines S corporations, stop here and report this amount on Schamount on Form 3800, Part III, line 1y	nedule	e K. All others, report this	14	52,916

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

Form 8936 (Rev. 1-2023)

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 placed in service before 2023, enter the amount from line 15. If the vehicle is a two-wheeled vehicle, enter the smaller of line 16 or line 17. For vehicles placed in service after 2022, see instructions	18			
19	Add columns (a) and (b) on line 18			19	250,013
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	100,467
22	Subtract line 21 from line 20. If zero or less, enter -0- an the personal use part of the credit		·	22	253,552
23	Personal use part of credit. Enter the smaller of lin Schedule 3 (Form 1040), line 6f. If line 22 is smaller than li			23	248,052

Form **8936** (Rev. 1-2023)

Form 8936 (Rev. 1-2023) Page **2**

Part	Credit for Personal Use Part of Vehicle							
			(a)	Vehicle 1		(b) \	/ehicle 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 placed in service before 2023, enter the amount from line 15. If the vehicle is a two-wheeled vehicle, enter the smaller of line 16 or line 17. For vehicles placed in service after 2022, see instructions	18						
19	Add columns (a) and (b) on line 18				19	1,915,700		
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 instructions)				21	330,352		
22	Subtract line 21 from line 20. If zero or less, enter -0- an the personal use part of the credit		•		22	20,056,129		
23	Personal use part of credit. Enter the smaller of lin Schedule 3 (Form 1040), line 6f. If line 22 is smaller than li				23	1,652,554		

Form **8936** (Rev. 1-2023)

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		
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) Total Forms Filed = 601,355 3 Type of filer **b** Partnership **c** Corporation **a** Specified individual **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 6 7 8 9 Were any foreign deposit or custodial accounts closed during the tax year? ☐ No Part II Other Foreign Assets Summary 10 \$ 193.514 11 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 (d) Form and line (e) Schedule and line 13 Foreign deposit and \$ 1,351,039 a Interest custodial accounts **b** Dividends \$ 89,652 **c** Royalties \$ 134 d Other income 19,914 \$ e Gains (losses) \$ 40,959 \$ 810 Deductions g Credits \$ 8,985 14 Other foreign assets a Interest \$ 26,852 **b** Dividends \$ 33,459 **c** Royalties \$ 2,015 d Other income \$ 42.581 e Gains (losses) \$ 28,375 f Deductions \$ 9,693 **g** Credits \$ 6,745 **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.

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 Sequence No. **938**

OMB No. 1545-2195

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) Total Forms Filed = 601,355 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 \$ 432,543,948 6 7 \$ 174,714,143 8 Were any foreign deposit or custodial accounts closed during the tax year? 9 Part II Other Foreign Assets Summary 10 \$ 331.915.102 11 12 ☐ Yes Summary of Tax Items Attributable to Specified Foreign Financial Assets (see instructions) Part III (c) Amount reported on (a) Asset category (b) Tax item form or schedule (d) Form and line (e) Schedule and line \$ 1,351,039 13 Foreign deposit and a Interest custodial accounts **b** Dividends \$ 3,320,961 **c** Royalties \$ -6.142 d Other income 1,037,632 e Gains (losses) \$ 856.124 \$ 89,407 Deductions g Credits \$ 250,010 14 Other foreign assets a Interest \$ 945,974 **b** Dividends \$ 4,399,643 **c** Royalties \$ 870,443 d Other income \$ 4,813,975 e Gains (losses) \$ 13,461,949 f Deductions \$ 624,309 **g** Credits \$ 179,536 Part IV **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

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

2022

Attachment Sequence No. 71

Name(s) shown on return

Total Forms Filed = 7.866.995

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
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
Compose Comp
2
3
4 Add lines 1 through 3 5 Enter the following amount for your filing status: Married filing jointly Married filing separately Single, Head of household, or Qualifying surviving spouse Subtract line 5 from line 4. If zero or less, enter -0- Additional Medicare Tax on Medicare Wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II Part II Additional Medicare Tax on Self-Employment Income 8 Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) 9 Enter the following amount for your filing status: Married filing jointly. Single, Head of household, or Qualifying surviving spouse. \$200,000 10 Enter the amount from line 9. If zero or less, enter -0- Subtract line 10 from line 9. If zero or less, enter -0- Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to 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 (see instructions) Married filing separately Single, Head of household, or Qualifying surviving spouse. \$250,000 Single, Head of household, or Qualifying surviving spouse. \$250,000 Subtract line 11 from line 9. If zero or less, enter -0- Subtract line 10 from line 9. If zero or less, enter -0- Subtract line 11 from line 8. If zero or less, enter -0- Subtract line 15 from line 14. If zero or less, enter -0- Subtract line 15 from line 14. If zero or less, enter -0- Subtract line 15 from line 14. If zero or less, enter -0- Subtract line 15 from line 14. If zero or less, enter -0- Subtract line 15 from line 14. If zero or less, enter -0- Subtract line 16 from line 14. If zero or less, enter -0- Subtract line 16 from line 14. If zero or less, enter -0- Subtract line 16 from line 14. If zero or less, enter -0- Subtract line 16 from line 14. If zero or l
Enter the following amount for your filing status: Married filing jointly Single, Head of household, or Qualifying surviving spouse Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions (Form Income Multiply Income I and I form Income I file I
Married filing jointly Married filing separately Single, Head of household, or Qualifying surviving spouse Subtract line 5 from line 4. If zero or less, enter -0- Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II Additional Medicare Tax on Self-Employment Income 8 Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) 9 Enter the following amount for your filing status: Married filing jointly. Married filing separately Single, Head of household, or Qualifying surviving spouse Subtract line 10 from line 4 10 T,594,594 11 Subtract line 10 from line 8. If zero or less, enter -0- 12 Subtract line 11 from line 8. If zero or less, enter -0- 13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to 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 (see instructions) Married filing separately Single, Head of household, or Qualifying surviving spouse Secondor 15 Enter the following amount for your filing status: Married filing separately Single, Head of household, or Qualifying surviving spouse Secondor
Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000 \$5 7,853,738 6 Subtract line 5 from line 4. If zero or less, enter -0-
Single, Head of household, or Qualifying surviving spouse . \$200,000
6 Subtract line 5 from line 4. If zero or less, enter -0- 7 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II
Part
Part
8 Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) 9 Enter the following amount for your filing status: Married filing jointly. Single, Head of household, or Qualifying surviving spouse. 10 Enter the amount from line 4 11 Subtract line 10 from line 9. If zero or less, enter -0- 12 Subtract line 11 from line 8. If zero or less, enter -0- 13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to 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 (see instructions) 15 Enter the following amount for your filing status: Married filing jointly Single, Head of household, or Qualifying surviving spouse. 15 Subtract line 15 from line 4. Self-employment income. Multiply line 16 by 0.9% (0.009).
8 Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) 9 Enter the following amount for your filing status: Married filing jointly. Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) 8 1,780,521 9 Enter the following amount for your filing status: Married filing jointly. Self-employment income status: Married filing jointly. Self-employment income status: Married filing separately Self-employment income status: Married filing separately Self-employment income status: Married filing separately Single, Head of household, or Qualifying surviving spouse 10 7,676,571 11 1,533,378 12 1,607,569 13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to 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 (see instructions) See instructions) Self-employment income. Multiply line 12 by 0.9% (0.009). 15 Enter the following amount for your filing status: Married filing separately Single, Head of household, or Qualifying surviving spouse \$250,000 Single, Head of household, or Qualifying surviving spouse \$250,000 Single, Head of household, or Qualifying surviving spouse \$250,000 Single, Head of household, or Qualifying surviving spouse \$250,000 Single, Head of household, or Qualifying surviving spouse \$250,000 Single, Head of household, or Qualifying surviving spouse \$250,000 Single, Head of household, or Qualifying surviving spouse \$250,000 Single, Head of household, or Qualifying surviving spouse \$250,000 Single, Head of household, or Qualifying surviving spouse \$250,000 Single, Head of household, or Qualifying surviving spouse
had a loss, enter -0- (Form 1040-PR or 1040-PS filers, see instructions.)
9 Enter the following amount for your filing status: Married filing jointly
Married filing jointly
Single, Head of household, or Qualifying surviving spouse . \$200,000
Single, Head of household, or Qualifying surviving spouse . \$200,000
Subtract line 10 from line 9. If zero or less, enter -0
Subtract line 11 from line 8. If zero or less, enter -0
Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III
go to Part III
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 (see instructions)
Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation 14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)
(see instructions)
15 Enter the following amount for your filing status: Married filing jointly
Married filing jointly
Married filing separately
Single, Head of household, or Qualifying surviving spouse \$200,000
16 Subtract line 15 from line 14. If zero or less, enter -0
17 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009).
Enter here and go to Part IV
Part IV Total Additional Medicare Tax
Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR or 1040-SS filers, see instructions), and go to Part V
of 1040-00 filets, see instructions), and go to fait v
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
20 Enter the amount from line 1
21 Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax
withholding on Medicare wages
22 Subtract line 21 from line 19. If zero or less, enter -0 This is your Additional Medicare Tax
withholding on Medicare wages
23 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions) 23 2,868
11 (000 monatorio)
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
1040-SS filers, see 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.

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2022

Attachment
Sequence No. 71

Name(s) shown on return

otal Forms Filed = 7.866.995

(-	Total Forms Filed = 7,866,995				
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	3,071,649,909		
2	Unreported tips from Form 4137, line 6	2	51,460		
3	Wages from Form 8919, line 6	3	125,715	1	
4	Add lines 1 through 3	4	3,071,827,084		
5	Enter the following amount for your filing status:				
	Married filing jointly				
	Married filing separately				
	Single, Head of household, or Qualifying surviving spouse \$200,000	5	1,849,336,643		
6	Subtract line 5 from line 4. If zero or less, enter -0			6	1,383,404,473
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009).				
	Part II			7	12,450,631
Part	II Additional Medicare Tax on Self-Employment Income				
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you		200 400 044		
	had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)	8	396,106,914		
9	Enter the following amount for your filing status:				
	Married filing jointly				
	Married filing separately		4 000 000 400		
	Single, Head of household, or Qualifying surviving spouse \$200,000	9	1,808,362,460 3,071,827,084	-	
10	Enter the amount from line 4	10	162,974,228	- 1	
11	Subtract line 10 from line 9. If zero or less, enter -0	11		10	292,500,991
12 13	Subtract line 11 from line 8. If zero or less, enter -0			12	202,000,001
13				13	2,632,511
Part	go to Part III	Cor	npensation	1.0	
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14				
	(see instructions)	14	1,140,445		
15	Enter the following amount for your filing status:			1	
	Married filing jointly				
	Married filing separately				
	Single, Head of household, or Qualifying surviving spouse \$200,000	15	1,790,745,014		
16	Subtract line 15 from line 14. If zero or less, enter -0			16	396,756
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply lin				
_	Enter here and go to Part IV			17	3,571
Part					
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), lines 12, 2000 and 1000 a				15,086,713
	or 1040-SS filers, see instructions), and go to Part V			18	13,000,713
Part					
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form	40	EE EOG 934		
20	W-2, enter the total of the amounts from box 6	19 20	55,506,824	-	
20		20	3,071,649,909		
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	44,538,913		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Add				
22	withholding on Medicare wages			22	11,058,408
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation				,000,100
20	14 (see instructions)			23	3,173
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also included the control of the				
	federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25				
	1040-SS filers, see instructions)	•		24	11,061,581
Ear D			50475V		Form 8959 (2022)

Form **8960**

Department of the Treasury Internal Revenue Service

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

2022

Attachment
Sequence No. 72

Name(s) shown on your tax return Your social security number or EIN Total Forms Filed = 9,012,236 **Investment Income** Section 6013(g) election (see instructions) ☐ Section 6013(h) election (see instructions) ☐ Regulations section 1.1411-10(g) election (see instructions) 1 7,248,322 2 2 6,302,177 3 3 157,269 4a Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see 4a 4,791,318 Adjustment for net income or loss derived in the ordinary course of a nonb section 1411 trade or business (see instructions) 4b 3,867,989 2,329,638 6,291,636 **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 579,315 5b Adjustment from disposition of partnership interest or S corporation stock (see 22,594 5d 6,165,296 6 Adjustments to investment income for certain CFCs and PFICs (see instructions) . 6 16,752 7 Other modifications to investment income (see instructions) 7 709,493 8 8,242,923 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7. . . . 8 Part II Investment Expenses Allocable to Investment Income and Modifications 556,142 9a Investment interest expenses (see instructions) State, local, and foreign income tax (see instructions) 9b 2,407,268 Miscellaneous investment expenses (see instructions) 186,506 9d 2,618,930 10 10 130,610 Total deductions and modifications. Add lines 9d and 10 11 11 2,693,185 Part III Tax Computation Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. 7.281.302 Estates and trusts, complete lines 18a-21. If zero or less, enter -0- 12 Individuals: 13 13 9,010,865 14 Threshold based on filing status (see instructions) 9,012,236 15 Subtract line 14 from line 13. If zero or less, enter -0-8,959,266 7,247,835 16 16 Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include 17 7,140,565 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

Net Investment Income Tax— Individuals, Estates, and Trusts

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form8960 for instructions and the latest information. Attachment Sequence No. **72**

OMB No. 1545-2227

Name(s)	shown on your tax return Total Forms Filed = 9,012,236			Your so	cial se	curity number or EIN
Part	I Investment Income Section 6013(g) election (see instructions)					
	Section 6013(h) election (see instructions)					
	Regulations section 1.1411-10(g) election (see in	struct	tions)			
1	Taxable interest (see instructions)				1	90,806,316
2	Ordinary dividends (see instructions)				2	284,547,545
3	Annuities (see instructions)				3	5,997,406
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see	ΙÌ				0,007,100
	instructions)	4a	1,236,530	632		
b	Adjustment for net income or loss derived in the ordinary course of a non-		1,200,000	,,,,,,,		
	section 1411 trade or business (see instructions)	4b	-1,114,07	7.588		
С	Combine lines 4a and 4b				4c	122,453,045
5a	Net gain or loss from disposition of property (see instructions)	5a	1,147,376	3,343		
b	Net gain or loss from disposition of property that is not subject to net					
	investment income tax (see instructions)	5b	-342,661	,522		
С	Adjustment from disposition of partnership interest or S corporation stock (see		F= ^==	400		
	instructions)	5с	-57,077,			
d	Combine lines 5a through 5c				5d	747,637,381
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)				6	1,640,461
7	Other modifications to investment income (see instructions)				7	-8,298,075
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7				8	1,244,784,079
	Investment Expenses Allocable to Investment Income and Modif			00		
9a	Investment interest expenses (see instructions)	9a	21,762,22			
b	State, local, and foreign income tax (see instructions)	9b	6,225,17			
C	Miscellaneous investment expenses (see instructions)	9с	1,963,23		0-1	00.050.004
d 10	Add lines 9a, 9b, and 9c				9d	29,950,634
10 11	Additional modifications (see instructions)				10	931,421
	Total deductions and modifications. Add lines 9d and 10				11	30,882,055
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals,	oomol	oto lingo 13	17		
12	Estates and trusts, complete lines 18a–21. If zero or less, enter -0				12	1,241,591,753
	Individuals:				12	, , , , , , , , , ,
13	Modified adjusted gross income (see instructions)	13	5,899,51	3 171		
14	Threshold based on filing status (see instructions)	14	2,111,164			
15	Subtract line 14 from line 13. If zero or less, enter -0	15				
16	Enter the smaller of line 12 or line 15		0,. 00,000		16	1,078,791,601
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). En					
	on your tax return (see instructions)				17	40,994,087
	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					
	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				20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.					
	include on your tax return (see instructions)				21	

Form **8962**

Premium Tax Credit (PTC)

OMB No. 1545-0074

2022

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 return Total Forms Filed = 9,000,908 A. You cannot take the PTC if your filing status is married filing separately unless you qualify for an exception. See instructions. If you qualify, check the box Part I **Annual and Monthly Contribution Amount** Tax family size. Enter your tax family size. See instructions 1 1 2a 8,955,024 2b 96,593 b Enter the total of your dependents' modified AGI. See instructions . . . 8,804,569 3 Household income. Add the amounts on lines 2a and 2b. See instructions . 3 Federal poverty line. Enter the federal poverty line amount from Table 1-1, 1-2, or 1-3. See instructions. Check the 4 9.000.908 appropriate box for the federal poverty table used. a Alaska b Hawaii c Other 48 states and DC 4 5 Household income as a percentage of federal poverty line (see instructions) 6 Applicable figure. Using your line 5 percentage, locate your "applicable figure" on the table in the instructions 7 7 Annual contribution amount. Multiply line 3 by **b** Monthly contribution amount. Divide line 8a 8a 6,135,193 6,134,183 8b line 7. Round to nearest whole dollar amount by 12. Round to nearest whole dollar amount Premium Tax Credit Claim and Reconciliation of Advance Payment of Premium Tax Credit Part II Are you allocating policy amounts with another taxpayer or do you want to use the alternative calculation for year of marriage? See instructions. Yes. Skip to Part IV, Allocation of Policy Amounts, or Part V, Alternative Calculation for Year of Marriage.
No. Continue to line 10. 10 See the instructions to determine if you can use line 11 or must complete lines 12 through 23. No. Continue to lines 12-23. Compute Yes. Continue to line 11. Compute your annual PTC. Then skip lines 12–23 and continue to line 24. your monthly PTC and continue to line 24. (b) Annual applicable (d) Annual maximum (a) Annual enrollment (c) Annual (e) Annual premium tax (f) Annual advance Annual SLCSP premium premium assistance premiums (Form(s) contribution amount credit allowed payment of PTC (Form(s) Calculation (Form(s) 1095-A, (subtract (c) from (b); if 1095-A, line 33C) 1095-A, line 33A) (line 8a) (smaller of (a) or (d)) line 33B) zero or less, enter -0-) 4.024.659 3.985.090 4.208.043 3.687.440 3.939.307 3.689.461 11 Annual Totals (c) Monthly (a) Monthly enrollment (b) Monthly applicable (d) Monthly maximum (f) Monthly advance contribution amount (e) Monthly premium tax Monthly premiums (Form(s) SLCSP premium payment of PTC (Form(s) premium assistance (amount from line 8b credit allowed Calculation (Form(s) 1095-A, lines 1095-A. lines 21-32. (subtract (c) from (b); if 1095-A. lines 21-32. or alternative marriage (smaller of (a) or (d)) column A) 21-32, column B) zero or less, enter -0-) column C) monthly calculation) 2,952,774 2,655,125 12 January 2.808.955 3.101.296 13 February 2,761,989 3,052,231 14 March 2,771,337 3,050,213 15 April 2,792,728 3,063,713 May 16 2,779,678 3.039.224 17 June 3.035.473 18 2,771,718 July 2,784,895 3,033,765 19 August 2,793,364 3,040,316 20 September 3,031,792 2,792,748 21 October 2,791,768 3,031,897 22 November 2,985,825 2,738,887 23 December Total premium tax credit. Enter the amount from line 11(e) or add lines 12(e) through 23(e) and enter the total here 7,869,125 24 24 8,565,821 Advance payment of PTC. Enter the amount from line 11(f) or add lines 12(f) through 23(f) and enter the total here 25 25 Net premium tax credit. If line 24 is greater than line 25, subtract line 25 from line 24. Enter the difference here and 26 on Schedule 3 (Form 1040), line 9. If line 24 equals line 25, enter -0-. Stop here. If line 25 is greater than line 24, 2,318,423 26 Part III Repayment of Excess Advance Payment of the Premium Tax Credit 5,136,566 27 Excess advance payment of PTC. If line 25 is greater than line 24, subtract line 24 from line 25. Enter the difference here 27 3,867,834 28 Repayment limitation (see instructions) 28

Excess advance premium tax credit repayment. Enter the smaller of line 27 or line 28 here and on Schedule 2

29

Premium Tax Credit (PTC)

OMB No. 1545-0074

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

Attach to Form 1040, 1040-SR, or 1040-NR. Go to www.irs.gov/Form8962 for instructions and the latest information.

Sequence No. 73

9,000,908 A. You cannot take the PTC if your filing status is married filing separately unless you qualify for an exception. See instructions. If you qualify, check the box Part I **Annual and Monthly Contribution Amount** 1 1 2a 445,589,199 Enter the total of your dependents' modified AGI. See instructions 884,628 b 2b 458,710,847 Household income. Add the amounts on lines 2a and 2b. See instructions . . . 3 3 Federal poverty line. Enter the federal poverty line amount from Table 1-1, 1-2, or 1-3. See instructions. Check the 4 156,053,148 appropriate box for the federal poverty table used. a \square Alaska b \square Hawaii c \square Other 48 states and DC 4 5 Household income as a percentage of federal poverty line (see instructions) 6 Applicable figure. Using your line 5 percentage, locate your "applicable figure" on the table in the instructions . . . 7 7 Annual contribution amount. Multiply line 3 by **b** Monthly contribution amount. Divide line 8a 8a 27,402,504 2,283,782 line 7. Round to nearest whole dollar amount by 12. Round to nearest whole dollar amount 8b Premium Tax Credit Claim and Reconciliation of Advance Payment of Premium Tax Credit Part II Are you allocating policy amounts with another taxpayer or do you want to use the alternative calculation for year of marriage? See instructions. Yes. Skip to Part IV, Allocation of Policy Amounts, or Part V, Alternative Calculation for Year of Marriage.
No. Continue to line 10. 10 See the instructions to determine if you can use line 11 or must complete lines 12 through 23. Yes. Continue to line 11. Compute your annual PTC. Then skip lines 12–23 No. Continue to lines 12-23. Compute and continue to line 24. your monthly PTC and continue to line 24. (b) Annual applicable (d) Annual maximum (a) Annual enrollment (c) Annual (e) Annual premium tax (f) Annual advance Annual SLCSP premium premium assistance premiums (Form(s) contribution amount credit allowed payment of PTC (Form(s) Calculation (Form(s) 1095-A, (subtract (c) from (b); if 1095-A, line 33C) 1095-A, line 33A) (line 8a) (smaller of (a) or (d)) line 33B) zero or less, enter -0-) 41.125.399 40.611.781 16.398.549 30.526.524 34.172.562 31.478.844 11 Annual Totals (c) Monthly (a) Monthly enrollment (b) Monthly applicable (d) Monthly maximum (f) Monthly advance contribution amount (e) Monthly premium tax Monthly premiums (Form(s) SLCSP premium premium assistance payment of PTC (Form(s) (amount from line 8b credit allowed Calculation (Form(s) 1095-A, lines 1095-A. lines 21-32. (subtract (c) from (b); if 1095-A. lines 21-32. (smaller of (a) or (d)) or alternative marriage column A) 21-32, column B) zero or less, enter -0-) column C) monthly calculation) 1,901,008 2,209,608 12 January 1.982.042 2.293.830 13 February 1,968,396 2,272,674 14 March 1,979,738 2,265,389 15 April 2,275,368 1,991,294 16 May 1,978,031 2,263,534 17 June 2.246.352 18 July 1,962,163 1,960,493 2,240,016 19 August 1,970,143 2,240,485 20 September 2,237,194 1,973,408 21 October 1,958,363 2,224,594 22 November 1,940,033 2,200,325 23 December 24 Total premium tax credit. Enter the amount from line 11(e) or add lines 12(e) through 23(e) and enter the total here 54,010,225 24 61,129,095 Advance payment of PTC. Enter the amount from line 11(f) or add lines 12(f) through 23(f) and enter the total here 25 25 Net premium tax credit. If line 24 is greater than line 25, subtract line 25 from line 24. Enter the difference here and 26 on Schedule 3 (Form 1040), line 9. If line 24 equals line 25, enter -0-. Stop here. If line 25 is greater than line 24, 2,388,657 26 Repayment of Excess Advance Payment of the Premium Tax Credit Part III 9,510,209 27 Excess advance payment of PTC. If line 25 is greater than line 24, subtract line 24 from line 25. Enter the difference here 27 4,768,102 28 28 29 Excess advance premium tax credit repayment. Enter the smaller of line 27 or line 28 here and on Schedule 2 7,004,325 29

Form 8962 (2022) Page 2 **Allocation of Policy Amounts** Part IV Complete the following information for up to four policy amount allocations. See instructions for allocation details. Allocation 1 (a) Policy Number (Form 1095-A, line 2) (b) SSN of other taxpayer (c) Allocation start month 30 (d) Allocation stop month (g) Advance Payment of the PTC Allocation percentage (e) Premium Percentage (f) SLCSP Percentage applied to monthly Percentage amounts Allocation 2 (a) Policy Number (Form 1095-A, line 2) (b) SSN of other taxpayer (c) Allocation start month (d) Allocation stop month (g) Advance Payment of the PTC Allocation percentage (e) Premium Percentage (f) SLCSP Percentage Percentage applied to monthly amounts Allocation 3 (a) Policy Number (Form 1095-A, line 2) (b) SSN of other taxpayer (d) Allocation stop month (c) Allocation start month (g) Advance Payment of the PTC Allocation percentage (f) SLCSP Percentage (e) Premium Percentage Percentage applied to monthly amounts Allocation 4 (a) Policy Number (Form 1095-A, line 2) (b) SSN of other taxpayer (c) Allocation start month (d) Allocation stop month (g) Advance Payment of the PTC Allocation percentage (f) SLCSP Percentage (e) Premium Percentage Percentage applied to monthly amounts 34 Have you completed all policy amount allocations? Yes. Multiply the amounts on Form 1095-A by the allocation percentages entered by policy. Add all allocated policy amounts and nonallocated policy amounts from Forms 1095-A, if any, to compute a combined total for each month. Enter the combined total for each month on lines 12-23, columns (a), (b), and (f). Compute the amounts for lines 12-23, columns (c)-(e), and continue to line 24. **No.** See the instructions to report additional policy amount allocations.

Part V Alternative Calculation for Year of Marriage Complete line(s) 35 and/or 36 to elect the alternative calculation for year of marriage. For eligibility to make the election, see the instructions for line 9. To complete line(s) 35 and/or 36 and compute the amounts for lines 12-23, see the instructions for this Part V. (a) Alternative family size (b) Alternative monthly (c) Alternative start month (d) Alternative stop month 35 Alternative entries contribution amount for your SSN (b) Alternative monthly (a) Alternative family size (c) Alternative start month (d) Alternative stop month **Alternative entries** 36 contribution amount for your spouse's SSN Form **8962** (2022)

Form 8962 (2022) Page **2**

Part	IV Allocation of	f Policy Amoun	ts				
Comp	lete the following inform	ation for up to four p	olicy amount allocation	s. See instruct	ions for allocation details		
Alloc	ation 1						
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) Prei	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) Prei	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) Prei	mium Percentage	(f) SL	CSP Percentage	(g) A	dvance 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) A	dvance Payment of the PTC Percentage
34	allocated policy amou	amounts on Form 1 nts from Forms 1096 (a), (b), and (f). Comp	095-A by the allocation 5-A, if any, to compute a	a combined to es 12–23, colui	entered by policy. Add a tal for each month. Enter mns (c)–(e), and continue	the con	ated policy amounts and non- nbined total for each month on 24.
Par	V Alternative (Calculation for \	ear of Marriage				
Comp		to elect the alternat	ive calculation for year			election,	see the instructions for line 9.
35	Alternative entries for your SSN	(a) Alternative fam	illy size (b) Alternative contribution ar		(c) Alternative start mon	th (d) Alternative stop month
36	Alternative entries for your spouse's SSN	(a) Alternative fam	(b) Alternative contribution are	,	(c) Alternative start mon	th (d) Alternative stop month
							2222

Form **8962** (2022)

Form **8990**(Rev. December 2022)
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

Taxp	ayer name(s) shown on tax return Total Forms Filed = 140,392		Ident	ification	n number
Α	If Form 8990 relates to an information return for a foreign entity (for example, Form Name of foreign entity				
	Reference ID number				
В	Is the foreign entity a CFC group member? See instructions			[🗌 Yes 🗌 No
С	Is this Form 8990 filed by the specified group parent for an entire CFC group? See	instru	ctions	[🗌 Yes 🗌 No
D	Has a CFC or a CFC group made a safe harbor election? If yes, see instructions for	or whic	h lines of Form	8990	
	to complete			[Yes No
Pa	rt I Computation of Allowable Business Interest Expense				
	t I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B new payer is a partner or shareholder of a pass-through entity subject to section 163(j).	ed to b	e completed bef	ore Part	l when the
Sec	tion I—Business Interest Expense				
1	Current year business interest expense (not including floor plan financing interest				
	expense), before the section 163(j) limitation	1	37,712		
2	Disallowed business interest expense carryforwards from prior years. (Does not				
	apply to a partnership)	2	8,850		
3	Partner's excess business interest expense treated as paid or accrued in current				
	year (Schedule A, line 44, column (h))	3	14,751		
4	Floor plan financing interest expense. See instructions	4	45		
	Total business interest expense. Add lines 1 through 4			5	53,768
Sec	tion II – Adjusted Taxable Income				
	Tentative Taxable Income				
6	Tentative taxable income. See instructions			6	68,000
	Additions (adjustments to be made if amounts are taken into	o acco	unt 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	793		
8	Any business interest expense not from a pass-through entity. See instructions	8	30,157		
9	Amount of any net operating loss deduction under section 172	9	2,400		
10	Amount of any qualified business income deduction allowed under section 199A	10	54,053		
11	Reserved for future use	11			
12	Amount of any loss or deduction items from a pass-through entity. See instructions	12	25,689		
13	Other additions. See instructions	13	1,522		
14	Total current year partner's excess taxable income (Schedule A, line 44, column (f))	14	50,794		
15	Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c))	15	8,999		
16	Total. Add lines 7 through 15	_		16	128,801
	Reductions (adjustments to be made if amounts are taken in				
17	Any item of income or gain that is not properly allocable to a trade or business		1,095		
••	of the taxpayer. See instructions	17 (305		
18	Any business interest income not from a pass-through entity. See instructions	18 ()	
19	Amount of any income or gain items from a pass-through entity. See instructions	19 (26,708)	
20	Other reductions. See instructions	20 (112)	
21	Total. Combine lines 17 through 20		•	21	(26,928)
22	Adjusted taxable income. Combine lines 6, 16, and 21. See instructions			22	130,768

Form **8990**(Rev. December 2022)
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

Taxpa	ayer name(s) shown on tax return Total Forms Filed = 140,392			Identific	atio	n number		
Α	A If Form 8990 relates to an information return for a foreign entity (for example, Form 5471), enter: Name of foreign entity Employer identification number, if any							
	Reference ID number							
В	Is the foreign entity a CFC group member? See instructions				. [☐ Yes ☐ No		
С	Is this Form 8990 filed by the specified group parent for an entire CFC group? See	instru	uctions .		. [☐ Yes ☐ No		
D	Has a CFC or a CFC group made a safe harbor election? If yes, see instructions for	r whi	ch lines of F	orm 89	90			
	to complete				. [☐ Yes ☐ No		
Pai	Computation of Allowable Business Interest Expense							
	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 l	be complete	d before	Part	! I when the		
Sect	tion I—Business Interest Expense							
1	Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation	1	4,964,76	2				
2	Disallowed business interest expense carryforwards from prior years. (Does not	-	4,904,70	2				
2	apply to a partnership)	2	963,640					
3	Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h))	3	676,60	5				
4	Floor plan financing interest expense. See instructions	4	11,349					
5	Total business interest expense. Add lines 1 through 4	·			5	6,616,702		
Sect	tion II—Adjusted Taxable Income					· · ·		
	Tentative Taxable Income							
6	Tentative taxable income. See instructions				6	182,163,725		
	Additions (adjustments to be made if amounts are taken into					102,103,723		
				0)				
7	Any item of loss or deduction that is not properly allocable to a trade or business of the taxpayer. See instructions	7	6,981,03	37				
8	Any business interest expense not from a pass-through entity. See instructions	8	2,892,9					
9	Amount of any net operating loss deduction under section 172	9	10,198,7					
10	Amount of any qualified business income deduction allowed under section 199A	10	10,202,3					
11	Reserved for future use	11	,,.					
12	Amount of any loss or deduction items from a pass-through entity. See instructions	40	41,539,5	573				
40		12						
13	Other additions. See instructions	13	1,965,00	04				
14	Total current year partner's excess taxable income (Schedule A, line 44, column (f))	14	56,496,6	17				
15	Total current year S corporation shareholder's excess taxable income (Schedule							
	B, line 46, column (c))	15	56,227,9			40-00-00-		
16	Total. Add lines 7 through 15				16	187,067,295		
	Reductions (adjustments to be made if amounts are taken in	to acc	count on line	e 6)				
17	Any item of income or gain that is not properly allocable to a trade or business		16,671,7					
	of the taxpayer. See instructions	17	457,24	8)				
18	Any business interest income not from a pass-through entity. See instructions	18	()				
19	Amount of any income or gain items from a pass-through entity. See instructions	19	(96,302,7					
20	Other reductions. See instructions		(3,600,03			/ 44 2 004 2 22		
21	Total. Combine lines 17 through 20				_	(117,031,735)		
22	Adjusted taxable income. Combine lines 6, 16, and 21. See instructions				22	253,841,838		

42

2022 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Form 8990 (Rev. 12-2022) Page 2 Section III—Business Interest Income Current year business interest income. See instructions 770 Excess business interest income from pass-through entities (total of Schedule 24 A, line 44, column (g), and Schedule B, line 46, column (d)) 24 13.256 **Total.** Add lines 23 and 24 25 13,769 Section IV – 163(j) Limitation Calculations **Limitation on Business Interest Expense** 26 Multiply the adjusted taxable income from line 22 by the applicable percentage. 26 128,488 27 27 Business interest income (line 25) 28 Floor plan financing interest expense (line 4) 28 29 **Total.** Add lines 26, 27, and 28 128,999 29 **Allowable Business Interest Expense** 30 Total current year business interest expense deduction. See instructions. 45,200 Carryforward Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0-.) 17,062 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-.) 35 36 **Excess taxable income.** Multiply line 35 by line 22 36 **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 37 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** Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.) 38 38 Subtract line 38 from line 26. (If zero or less, enter -0-.) 39 39 40 Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.). 40 41 41 **Excess Business Interest Income**

Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less,

Form 8990 (Rev. 12-2022) Page **2**

Secti	on III-Business Interest Income				
23	Current year business interest income. See instructions	23	1,046,997		
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	10,219,157		
25	Total. Add lines 23 and 24			25	11,266,159
Secti	on IV—163(j) Limitation Calculations				
	Limitation on Business Interest Expense	е			
26	Multiply the adjusted taxable income from line 22 by the applicable percentage. See instructions	26	77,647,618 +/-		
27	Business interest income (line 25)	27	• •		
28	Floor plan financing interest expense (line 4)	28			
29	Total. Add lines 26, 27, and 28			29	88,925,125
	Allowable Business Interest Expense				
30	Total current year business interest expense deduction. See instructions			30	4,666,509
	Carryforward				
31	Disallowed business interest expense. Subtract line 29 from line 5. (If zero or le	ess, e	nter -0)	31	2,014,290
Part	Partnership Pass-Through Items				, ,
	II is only completed by a partnership that is subject to section 163(j). The partnersh are not carried forward by the partnership. See the instructions for more informatio		ns below are alloc	ated	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, sl	kip line	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	S Corporation Pass-Through Items				
Part I See t	II is only completed by S corporations that are subject to section 163(j). The S corporative interesting in the section 163(j). The S corporative interesting in the section 163(j).	ion itei	ms below are alloca	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	

Form **8990** (Rev. 12-2022)

Form 8990 (Rev. 12-2022)

SCHE	DULE A Summary of	Partner's Sect	ion 163(j) Exces	s Items					. ago C	
	Any taxpayer that owns an interest in a partnership subject to section 163(j) should complete Schedule A before completing Part I.									
	(a) Name of partnership	(b) EIN	(c) Current year (see instructions)	(d) Prior year carryforward (see instructions	(e) Total	(f) Current year excess taxable income	(g) Current year excess business interest income	(h) Excess business interest expense treated as paid or accrued (see instructions)	(i) Current year excess business interest expense carryforward (see instructions)	
43										
_										
_										
_										
_										
	Total									
SCHE	DULE B Summary of	S Corporation	Shareholder's I	Excess Taxal	ble Income and	Excess Business	Interest Incom	ie		
	payer that is required to compl completing Part I.	ete Part I and is a	shareholder in an S	Corporation tha	at has excess taxab	le income or excess b	usiness interest ind	come should comple	te Schedule B	
(a) Name of S corporation					(b) EIN	(c) Current yea taxable ind		(d) Current you business inter		
45	·	·			·			·		
_										
_										
-										
-										
46 1	Total									

Form **8990** (Rev. 12-2022)

Form 8990 (Rev. 12-2022)

. 0 0.	000 (1.011 12 2022)								i age o
SCH	EDULE A Summary of	f Partner's Sect	tion 163(j) Exces	s Items					•
Any t	taxpayer that owns an interest ir	a partnership subj	ect to section 163(j	should comple	ete Schedule A befo	ore completing Part I.			
	(a) Name of partnership	rship (b) EIN (c) Current year (d) Pr		(d) Prior year carryforward (see instruction	(f) Current year excess excess taxable income		(g) Current year excess business interest income	(h) Excess business interest expense treated as paid or accrued (see instructions)	(i) Current year excess business interest expense carryforward (see instructions)
43									
44	Total								
SCH	EDULE B Summary of	f S Corporation	Shareholder's	Excess Taxa	ble Income and	Excess Business	Interest Incom	ne	
	axpayer that is required to compecting Part I.	plete Part I and is a	shareholder in an S	Corporation th	at has excess taxab	ole income or excess b	usiness interest ind	come should comple	te Schedule B
		(a) Name of S corporat	ion		(b) EIN	(c) Current ye taxable in		(d) Current y business inte	
45									

Form **8990** (Rev. 12-2022)

Department of the Treasury Internal Revenue Service

Name of person filing this return

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

A Identifying number

Name c	Total Forms Filed = 20,671	A identifying r	umber	
Name o	f U.S. shareholder	B Identifying r	umber	
Pari	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 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 from Schedule B (Form 8992), Part II, column (c), that pertains to the U.S. shareholder.		1	16,313
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 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 from Schedule B (Form 8992), Part II, column (f), that pertains to the U.S. shareholder.		2	(10,950)
3	Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here		3	20,657
Part	` ,			
1	Net CFC Tested Income. Enter amount from Part I, line 3		1	14,968
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). 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 (i), that pertains to the U.S. shareholder.		2	7,535
3a	Sum of Pro Rata Share of Tested Interest Expense			
b	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 (j). If the U.S. shareholder is a member of a U.S. consolidated group, leave line 3a blank. Sum of Pro Rata Share of Tested Interest Income	772		
С	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). If the U.S. shareholder is a member of a U.S. consolidated group, leave line 3b blank. Specified Interest Expense	2,864		
	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 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.		3c	2,869
4	Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0		4	7,212
5	GILTI. Subtract line 4 from line 1. If zero or less, enter -0		5	12,238
For Pa	perwork Reduction Act Notice, see separate instructions. Cat. No. 37816Y		Form	8992 (Rev. 12-2022)

Form **8992**

U.S. Shareholder Calculation of Global Intangible Low-Taxed Income (GILTI)

(Rev. December 2022)
Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/li

Go to www.irs.gov/Form8992 for instructions and the latest information.

OMB No. 1545-0123

Attachment
Sequence No. 992

Name o	f person filing this return Total Forms Filed = 20,671	A Identifying nu	mber	
Name o	f U.S. shareholder	B Identifying nur	mber	
Part	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			
	from Schedule A (Form 8992), line 1, column (e).		1	2,748,654
	If the U.S. shareholder is a member of a U.S. consolidated group, enter the amount			
2	from Schedule B (Form 8992), Part II, column (c), that pertains to the U.S. shareholder. J 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			
	from Schedule A (Form 8992), line 1, column (f).		2	(2,582,607)
	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 (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	166,047
Part 1	Calculation of Global Intangible Low-Taxed Income (GILTI) Net CFC Tested Income. Enter amount from Part I, line 3		1	2,177,985
2	Deemed Tangible Income Return (DTIR)			2,177,303
	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	714,238
	If the U.S. shareholder is a member of a U.S. consolidated group, enter the amount			
0-	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			
		.668		
	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,	60,825		
	column (i).	55,525		
	If the U.S. shareholder is a member of a U.S. consolidated			
	group, leave line 3b blank.			
С	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	175,945
	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	573,830
4 5	Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0	-	5	1,793,830
	perwork Reduction Act Notice, see separate instructions. Cat No. 37816Y			8992 (Rev. 12-2022)

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 =

10,769

Identifying number

or Pa	aperwork Reduction Act Notice, see separate instructions. Cat. No. 37804G	Form	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	10,769				
2	Employer credit for paid family and medical leave from partnerships and S corporations (see instructions)	2	1,394				
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	9,376				
D	 If you employed at least one qualifying employee who was not covered by the Family and Medical Leave Act, did you inc 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 instruction Yes. No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership of						
В	Does the written policy provide paid family and medical leave of at least 50% of the wages normally paid to a qualifying 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).						
A	Do you have a written policy providing for at least 2 weeks of annual paid family and medical leave for your qualifying 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).						

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 = 10,769

Identifying number

or Pap	perwork Reduction Act Notice, see separate instructions. Cat. No. 37804G	Form	n 8994 (Rev. 1-2021)			
	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	71,876			
2	Employer credit for paid family and medical leave from partnerships and S corporations (see instructions)	2	715			
	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	71,161			
	If you employed at least one qualifying employee who was not covered by the Family and Medical Lear 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 of		•			
С	Did you pay family and medical leave to at least one qualifying employee during the tax year? See instructions. Yes. No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).					
	Does the written policy provide paid family and medical leave of at least 50% of the wages normally paid to a qualifying 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).					
	Do you have a written policy providing for at least 2 weeks of annual paid family and medical least 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 of					

Form **8995**

Department of the Treasury Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

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

OMB No. 1545-2294

2022

Attachment
Sequence No. 55

Name(s) shown on return

Total Forms Filed =

40,372,138

Total Forms 8995A Filed =

Your taxpayer identification number 4,234,953

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$170,050 (\$340,100 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number		Qualified business income or (loss)
i				
ii				
iii				
iv				
v				
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2 30,776,401		
3	Qualified business net (loss) carryforward from the prior year	3 (11,026,081)		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4 19,507,096	_	24 240 056
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	21,240,056
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6 12,508,930		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (236,046)		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero	40.005.050		
9	or less, enter -0	8 12,365,850	9	11,351,122
10	Qualified business income deduction before the income limitation. Add lines 5 an		10	30,244,214
11	Taxable income before qualified business income deduction (see instructions)	11 37,768,544		
12	Net capital gain (see instructions)	12 19,034,444		
13	Subtract line 12 from line 11. If zero or less, enter -0			27 404 640
14 15	Income limitation. Multiply line 13 by 20% (0.20)		14	37,104,610
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also the applicable line of your return (see instructions)		15	25,633,928
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than		16	(14,529,183)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a zero, enter -0		17	(221,085)
For Pri	vacy Act and Panerwork Reduction Act Notice see instructions	No. 37806C		Form 8995 (2022)

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

Cat. No. 37806C

Form **8995** (2022)

Form **8995**

Department of the Treasury Internal Revenue Service

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

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

OMB No. 1545-2294
2022
Attachment
Sequence No. 55

Name(s) shown on return

Total Forms Filed =

40,372,138

Total Forms 8995A Filed =

Your taxpayer identification number 4,234,953

Note. You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$170,050 (\$340,100 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)			
i_						
ii						
iii						
iv						
v						
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2 341,844,114				
3	Qualified business net (loss) carryforward from the prior year	3 (701,611,391)				
4 5	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)	4 524,212,920	5	240,525,411		
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss)		3			
	(see instructions)	6 19,141,506				
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7 (4,160,246)				
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	8 19,313,235				
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9	3,862,557		
10	Qualified business income deduction before the income limitation. Add lines 5 an	10	244,387,967			
11 12	Taxable income before qualified business income deduction (see instructions) Net capital gain (see instructions)	11 6,454,895,188 12 1,334,212,995				
13	Subtract line 12 from line 11. If zero or less, enter -0-					
14	Income limitation. Multiply line 13 by 20% (0.20)	14	1,047,265,898			
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also	45	215 085 605			
16	the applicable line of your return (see instructions)	15 16	215,985,605			
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 a zero, enter -0	17	(4,331,583)			
For Dr	For Privacy Act and Paperwork Reduction Act Notice, see instructions. Cat No. 37806C					

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

Cat. No. 37806C

Form **8995** (2022)

Department of the Treasury Internal Revenue Service

Initial and Annual Statement of Qualified Opportunity Fund (QOF) Investments

Attach to your tax return. Go to www.irs.gov/Form8997 for the latest information. OMB No. 1545-0123 Attachment Sequence No. **997**

Tax identification number (see instructions) Total Forms Filed = 37,025

		estment Holdings Due to Deferrals Prior to last year's ending QOF investment holding				
(-)				Deferred gain held in QOF		
(a) Qualified Opportunity Fund (QOF) EIN	(b) Date QOF Investment acquired (MM/DD/YYYY) (c) Description of QOF investment (for example, 100 shares or 25% interest)	(d) Specia gain code		(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 c	columns (e) and (f)		8,179	25,965	
		ear Capital Gains Deferred by Investing in	QOF		_	
(a)	(b)	(c)	(d)	Deferred gain invested in QOF		
Qualified Opportunity Fund (QOF) EIN	Date QOF investment acquired (MM/DD/YYYY)	Description of interest acquired (for example, 100 shares or 25% interest)	Specia gain code	Amount of short-term deferred gain remaining in QOF	(f) Amount of long-term deferred gain remaining in QOF	
		, from continuation sheet		1,804	12,128	
		Rules Regarding the Waiver of Certain Tre				
Are you a fo Yes. Yo question	reign eligible ta u may not elect n.	xpayer? See instructions for more information. to defer tax on an eligible gain by investing in a continuous tion and go to Part III.		check "Yes" in respo	onse to the next	
		s on Future Inclusions by a Foreign Eligibl	e Taxpayer			
Do you here that you are more inform	by irrevocably of deferring by invalid	waive any benefits available under an applicable vesting in a QOF from being subject to federal inc	U.S. income tax			
☐ No. You	may not elect t	al of the eligible gain in Part II and on Form 8949. to defer tax on an eligible gain by investing in a QC	OF. Do not repo	rt the deferral of any	y otherwise eligible	
	Part II or on Fo	Notice, see your tax return instructions.	Cat. No. 3		Form 8997 (2022)	

Form **8997**

Department of the Treasury

Internal Revenue Service

Initial and Annual Statement of Qualified Opportunity Fund (QOF) Investments

Attach to your tax return.

Go to www.irs.gov/Form8997 for the latest information.

OMB No. 1545-0123

2022

Attachment Sequence No. 997

Name

Total Forms Filed = 37 025

Tax identification number (see instructions)

	101	iai Forms Fileu = 37,025			
		estment Holdings Due to Deferrals Prior to Begini a last year's ending QOF investment holdings, attach			
(a)	(b) Date QOF investment acquired (MM/DD/YYYY)	(c)	(d)	Deferred gair	n held in QOF
Qualified Opportunity Fund (QOF) EIN		Description of QOF investment (for example, 100 shares or 25% interest)	Special gain code	(e) Amount of short-term deferred gain remaining in QOF	(f) Amount of long-term deferred gain remaining in QOF
2 Enter t	he totals from c	, from continuation sheet		4,370,677	30,232,495
			(4)	Deferred gain invested 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)	Special gain code	(e) Amount of short-term deferred gain remaining in QOF	(f) Amount of long-term deferred gain remaining in QOF
		, from continuation sheet		771,891	9,108,547
	•	ules Regarding the Waiver of Certain Treaty Bene	efits		
Yes. Yo question	u may not elect n.	xpayer? See instructions for more information. to defer tax on an eligible gain by investing in a QOF unlestion and go to Part III.	ss you c	check "Yes" in respo	onse to the next
Vaiver of T	reaty Benefits	s on Future Inclusions by a Foreign Eligible Taxpa	yer		
Do you here that you are more inform	eby irrevocably of deferring by invalid	waive any benefits available under an applicable U.S. incorvesting in a QOF from being subject to federal income tax	ne tax c		
☐ No. You		al of the eligible gain in Part II and on Form 8949. To defer tax on an eligible gain by investing in a QOF. Do no rm 8949.	t report	t the deferral of any	y otherwise eligibl

Form 8997 (2022) Page **2**

Part III Inclusion Events and Certain Other Transfers During the Current Tax Year						
(a)	(b)	(c)	(d) Special gain code	Deferred gain included due to disposition of QOF interest		
Qualified Opportunity Fund (QOF) EIN	Date of event (MM/DD/YYYY)	Description of event (for example, sale of 100 shares, gift of 25% interest, or distribution of \$1,000, etc.)		(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 ti	ne totals, if any	, from continuation sheet				
2 Enter th	ne totals from o	949 .	279	648		
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	otal QOF Inv	estments Due to Deferrals at Year End (see instruc	tions)	Г		
(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	Deferred gain investe (e) Amount of short-term deferred gain invested in QOF	d in QOF investment (f) Amount of long-term deferred gain invested in QOF	
1 Enter ti	ne totals, if any	, from continuation sheet				
2 Enter th	ne totals from o	columns (e) and (f)		7,244	27,150	
Form 8997 (2022)						

Form **8997** (2022)

2022 Line Item Estimates—All figures are estimates based on samples.

Amounts of selected lines filed (in thousands of dollars)

Form 8997 (2022) Page **2**

					•
Part III Ir	nclusion Eve	nts and Certain Other Transfers During the Curren	t Tax \	Y ear	
(a)	(b) Date of event (MM/DD/YYYY) (for example, sale of 100 shares, gift of 25% interest, or distribution of \$1,000, etc.)		(d)	Deferred gain included due to disposition of QOF interest	
Qualified Opportunity Fund (QOF) EIN		Special gain code	(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 t	he totals, if any	r, from continuation sheet			
2 Enter the totals from columns (e) and (f). See instructions for reporting on Form 8949.				91,991	1,020,259
other third	party. See the	sposed of any investment(s) and didn't receive a Form 109 Instructions for Form 8949 for reporting requirements of an	y gain (porting the disposition loss.	on from the QOF or
Part IV T	otal QOF Inv	estments Due to Deferrals at Year End (see instruc	tions)		
(a) Qualified	(b) Date QOF	(c) Description of interest acquired	(d)	Deferred gain investe	
Opportunity Fund (QOF) EIN	investment acquired (MM/DD/YYYY)	(for example, 100 shares or 25% interest)	Special gain code	(e) Amount of short-term deferred gain invested in QOF	(f) Amount of long-term deferred gain invested in QOF
1 Enter t	he totals, if any	r, from continuation sheet			
2 Enter t	he totals from o	columns (e) and (f)		4,618,527	34,291,485