

### **Statistics of Income**

# Individual Income Tax Returns Line Item Estimates











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Department of the Treasury Internal Revenue Service

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# Individual Income Tax Returns Line Item Estimates, 2020

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This 2020 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 2020 Individual SOI Complete Report weighted file. The estimates presented here are based on returns filed in Processing Year 2021 that were sampled statistically and then weighted to estimate the entire 2020 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.

2020 Complete Report estimates:

164,358,792 Total, all individual returns filed

Estimates of returns filed electronically:

151,569,468 Total, all individual returns filed

#### **Suggested Citation**

Statistics of Income—2020 Individual Income Tax Returns Line Item Estimates Internal Revenue Service Washington, D.C.

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Form 8903, Domestic Production Activities Deduction Returns	Returns 216 Amounts 217
Amounts	Form 8992, U.S. Shareholder Calculation of Global Intangible Low-Taxed Income (GILTI)
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Form 8911, Alternative Fuel Vehicle Refueling Property Credit	Form 8994, Employer Credit for Paid Family and Medical Leave Returns
Returns       198         Amounts       199	Amounts
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### **Totals for Forms and Schedules**

#### **Line Item Estimate Totals for Tax Year 2020**

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 2020

		Electronically
Type of Form	Total	Electronically Filed
All returns filed	164,358,792	151,569,468
Form 1040, U.S. Individual Income Tax Return	147,781,563	137,029,512
Form 1040-SR, U.S. Tax Return for Seniors	16,577,229	14,539,957
Schedule 1, Additional Income and Adjustments to Income	80,009,436	74,516,075
Schedule 2, Additional Taxes	31,373,834	29,045,298
Schedule 3, Additional Credits and Payments	36,919,462	35,029,186
Schedule A, Itemized Deductions	15,812,365	14,628,333
Schedule B, Interest and Ordinary Dividends	21,688,534	19,896,516
Schedule C, Profit or Loss From Business (Sole Proprietorship)	32,004,164	28,965,111
Schedule D, Capital Gains and Losses	25,991,494	24,325,648
Schedule E, Supplemental Income and Loss	19,669,489	18,313,364
Schedule EIC, Earned Income Credit	18,388,995	17,651,268
Schedule F, Profit or Loss From Farming	1,814,583	1,690,300
Schedule R, Credit for the Elderly or the Disabled	47,886	41,369
Schedule SE, Self-Employment Tax	21,612,957	19,469,942
Schedule 8812, Additional Child Tax Credit	19,305,957	18,373,351
Form 965-A, Individual Report of Net 965 Tax Liability	22,726	22,057
Form 982, Reduction of Tax Attributes Due to Discharge of Indebtedness		
(and Section 1082 Basis Adjustment)	98,565	90,093
Form 2106, Employee Business Expenses	395,659	348,183
Form 2439, Notice to Shareholder of Undistributed Long-Term Capital Gains	3,301	3,090
Form 2441, Child and Dependent Care Expenses	5,964,945	5,756,021
Form 3468, Investment Credit	21,232	19,164
Form 3800, General Business Credit	676,768	643,402
Form 3903, Moving Expenses	84,811	79,715
Form 4136, Credit for Federal Tax Paid on Fuels	292,191	271,646
Form 4562, Depreciation and Amortization (Information on Listed Property)	9,962,916	9,422,646
Form 4684, Casualties and Thefts	127,890	118,042
Form 4797, Sales of Business Property	3,169,087	2,999,348
Form 4835, Farm Rental Income and Expenses	461,875	423,686
Form 4952, Investment Interest Expense Deduction	1,323,023	1,255,684
Form 5329, Additional Taxes on Qualified Plans (including IRAs) and Other Tax-Favored Accounts	2,590,504	2,448,391
Form 5405, Repayment of the First-Time Homebuyer Credit	124,793	116,513
Form 5695, Residential Energy Credits	2,416,669	2,263,791
Form 5884, Work Opportunity Credit	17,290	17,217
Form 6251, Alternative Minimum Tax—Individuals	5,597,802	5,288,788

#### Totals for Forms and Schedules from Line Item Estimates for Tax Year 2020—Continued

Totals for Forms and Schedules from Line item Estimates for fax fear 2020	—Continueu	
Type of Form	Total	Electronically Filed
Form 6252, Installment Sale Income	465,993	439,197
Form 6765, Credit for Increasing Research Activities	9,491	9,289
Form 6781, Gains and Losses From Section 1256 Contracts and Straddles	552,813	521,676
Form 8283, Noncash Charitable Contributions	3,080,803	2,857,559
Form 8396, Mortgage Interest Credit	102,226	98,923
Form 8582, Passive Activity Loss Limitations	7,804,876	7,392,760
Form 8586, Low-Income Housing Credit	2,953	2,928
Form 8606, Nondeductible IRAs	2,807,314	2,657,389
Form 8615, Tax for Certain Children Who Have Unearned Income	466,224	433,742
Form 8801, Credit for Prior Year Minimum Tax—Individuals, Estates, and Trusts	292,846	276,878
Form 8814, Parents' Election To Report Child's Interest and Dividends	49,176	45,663
Form 8824, Like-Kind Exchanges	53,238	49,569
Form 8829, Expenses for Business Use of Your Home	3,178,402	2,979,356
Form 8839, Qualified Adoption Expenses	102,188	98,566
Form 8846, Credit for Employer Social Security and Medicare Taxes Paid on		
Certain Employee Tips	22,958	22,167
Form 8853, Archer MSAs and Long-Term Care Insurance Contracts	150,529	139,613
Form 8863, Education Credits (American Opportunity and Lifetime Learning Credits)	8,726,402	8,300,396
Form 8880, Credit for Qualified Retirement Savings Contributions	9,496,452	9,106,390
Form 8889, Health Savings Accounts (HSAs)	15,192,287	14,514,558
Form 8903, Domestic Production Activities Deduction	11,708	8,634
Form 8910, Alternative Motor Vehicle Credit	18,503	18,361
Form 8911, Alternative Fuel Vehicle Refueling Property Credit	30,420	29,387
Form 8917, Tuition and Fees Deduction	1,303,172	1,227,198
Form 8936, Qualified Plug-in Electric Drive Motor Vehicle Credit	63,847	60,233
Form 8938, Statement of Specified Foreign Financial Assets	521,878	462,565
Form 8959, Additional Medicare Tax	6,077,015	5,832,141
Form 8960, Net Investment Income Tax—Individuals, Estates, and Trusts	6,827,426	6,471,317
Form 8962, Premium Tax Credit (PTC)	4,630,532	4,247,151
Form 8990, Limitation on Business Interest Expense Under Section 163(j)	140,958	138,843
Form 8992, U.S. Shareholder Calculation of Global Intangible Low-Taxed Income (GILTI)	14,920	13,383
Form 8994, Employer Credit for Paid Family and Medical Leave	6,692	5,729
Form 8995, Qualified Business Income Deduction Simplified Computation	35,951,550	34,011,044
Form 8997, Initial and Annual Statement of Qualified Opportunity Fund (QOF)	2,221,200	. , ,
Investments	19,520	17,832

# Limitations and Guidelines for the 2020 Line Item Estimates

Since SOI obtained the line counts used in this package from the Tax Year 2020 Individual SOI Complete Report File, they are subject to the same data limitations as the data included in the Complete Report File. These limitations are derived from the fact that these data are statistically sampled, meaning that the line counts are estimates based on samples, and should not be mistaken for actual counts of the entire filing population. While most forms and items are present often enough to provide accurate estimates, some less popular items should be used with a high degree of caution. SOI removed all line items with a sample count of fewer than 10.

The sample used in this study is one of a large number of samples that could have been selected using the same sample design. The estimates calculated from these different samples would vary. The sample estimate and an estimate of its standard error permit the construction of interval estimates with prescribed confidence that the interval includes the population value. Shown below are 95-percent confidence intervals for selected Form 1040 items. (For example, the population value of number of returns for salaries and wages, with 95-percent confidence, is between 129,787,258 and 130,410,206.) These confidence intervals correspond to the estimates for all individual income tax returns filed for Tax Year 2020.

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

Item	95% confidence interval
Salaries and wages	130,098,732 ( 129,787,258 , 130,410,206)
Taxable interest	48,346,274 ( 48,035,182 , 48,657,367)
Tax-exempt interest	6,479,806 (6,360,012 , 6,599,600)
Ordinary dividends	31,086,844 ( 30,832,402 , 31,341,285)
Qualified dividends	29,012,583 (28,766,458 , 29,258,707)
Taxable IRA distributions	13,101,306 (12,901,760 , 13,300,852)
Taxable pensions and annuities	30,412,365 ( 30,125,102 , 30,699,629)
Total social security benefits	31,691,628 (31,394,080 , 31,989,176)
Taxable social security benefits	23,057,234 (22,805,002 , 23,309,465)
Total income	160,981,093 (160,838,996 , 161,123,191)
Adjusted gross income (amount in thousands)	12,591,788,823 ( 12,571,590,040 , 12,611,987,607)
Basic standard deduction	143,550,780 (143,307,318 , 143,794,243)
Additional standard deduction	25,304,324 (25,030,278 , 25,578,370)
Total itemized deductions	15,535,429 (15,340,120 , 15,730,737)
Qualified business income deduction	22,827,118 (22,619,187, 23,035,049)
Taxable income	127,425,325 (127,125,206 , 127,725,443)
Income tax before credits	126,758,953 (126,456,652 , 127,061,253)
Total credits	69,357,133 (68,989,606 , 69,724,660)
Income tax after credits	102,943,986 (102,621,417 , 103,266,554)
Total tax liability	107,545,294 (107,221,394 , 107,869,193)
Tax due at time of filing	32,771,171 (32,488,570 , 33,053,772)
Overpayment	125,949,019 (125,632,978 , 126,265,059)

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 4137

Form 4972

Form 5884-A

Form 8609-A

Form 8834

Form 8941

Form 8978

# 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, and the sampling variability of the estimates.

#### **Domain of Study**

The statistics in this report are estimates from a probability sample of unaudited Individual Income Tax Returns (Form 1040 and 1040-SR (including electronic returns)) filed by U.S. citizens and residents during Calendar Year 2021.

All returns processed during 2021 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 2020. While most of the returns processed during Calendar Year 2021 were filed for Tax Year 2020, the remaining returns were mostly for prior years, and a few for noncalendar years ending during 2018 and 2019.

#### 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.

Tax data processed to the IRS Individual Master File at the Enterprise Computing Center at Martinsburg during Calendar Year 2021 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 eleven-digit number generated by a mathematical transformation of the SSN is less than or equal to the stratum sampling rate times 100,000. (See reference 3 for details.)

#### **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 IRS needed the return at the same time. For Tax Year 2020, about 0.7 percent of the sample returns were unavailable.

Due to the COVID-19 pandemic, delays in processing Tax Year 2020 returns occurred because of the temporary closing of submission processing centers. Approximately 4.5 million returns were ultimately

processed during the beginning of Tax Year 2021. These returns were moved into the Tax Year 2020 study.

#### **Method of Estimation**

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

#### Sampling Variability

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

# Line Item Estimates, by Individual Income Tax Form and Schedule for Tax Year 2020

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 i	returns	filed = 164,358,792 E	ectronic	ally Filed R	eturns	= 151	,569,468				
<b>1040</b>		artment of the Treasury—Internal Revenue So  S. Individual Income Ta		(99) eturn	20	20	OMB No. 1545	5-0074 IRS Use Onl	y—Do not writ	e or staple in this space.	
Check only		916 55,247,969 Single Married filing jointly u checked the MFS box, enter the		919,416 rriea tiling : of your spo				nousehold (HOH) or QW box, enter the	_	ying widow(er) (QW) name if the qualifying	
one box.		on is a child but not your depende	ent ►						1		_
Your first name	and m	ddle initial	Last	name					Your soci	al security number	
If joint return, s	pouse's	first name and middle initial	Last	name					Spouse's	social security number	r -
Home address	(numbe	r and street). If you have a P.O. box, s	ee instru	ctions.				Apt. no.		tial Election Campaign are if you, or your	- 1
City, town, or p	ost offi	ce. If you have a foreign address, also	complete	e spaces be	low.	Sta	ate	ZIP code		,560 Y = ** 4,923,07	6
									_	w will not change	
Foreign country	/ name			Foreign p	rovince	/state/cour	ty	Foreign postal code	your tax o	or refund.  You Spouse	<b>;</b>
At any time du	uring 2	020, did you receive, sell, send, e	change	e, or other	vise a	cquire any	financial inter	est in any virtual c	urrency?	Yes No	
Standard Deduction		eone can claim: You as a Google Spouse itemizes on a separate ret	•		Your	<b>,235</b> spouse as tatus alie		al Currency y	res = 2,30	08,231 no = 157,0	010,9 <sup>,</sup>
Age/Blindness		29,341,119 Were born before January 2		<b>273,0</b> Are bl		Spouse		58,861 rn before January	2, 1956	, <b>823</b> Is blind	
Dependents	s (see	instructions):		(2) 9	Social s	ecurity	(3) Relations	hip (4) 🗸 if o	qualifies for (	see instructions):	
If more	(1) F	rst name Last name		number to you Child			Child tax of	credit Credit for other dependents			
than four								35,198	8,516		
dependents, see instructions	s							21,47	2,739		
and check								7,714	,902		
here ►								2,102	2,625		
	1	Wages, salaries, tips, etc. Attacl	Form(s	s) W-2 .		1* txb	l schirshps	857,783	. 1	130,098,732	
Attach	2a	Tax-exempt interest	2a	6,479,	806	b T	axable interes	st	. 2b	48,346,274	
Sch. B if	За	Qualified dividends	3a	29,012	,583			ends	. 3b	31,086,844	
required.	4a	IRA distributions	4a	14,205	,309		axable amour			13,101,306	
_	5a	Pensions and annuities	5a	33,021	,101	b	axable amour		<u> </u>	30,412,365	
Standard	6a	Social security benefits	6a	31,691		b	axable amour		. 6b	23,057,234	
Deduction for-	7	Capital gain or (loss). Attach Sch							7	25,083,935	
Single or Married filing	8	Other income from Schedule 1,							. 8	66,435,792	
separately,	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7				al income			▶ 9	160,981,093	
\$12,400 Married filing	10	Adjustments to income:	,	, 0						,,,	
jointly or	а	From Schedule 1, line 22					10	a 36,917,699			
Qualifying widow(er),	b	Charitable contributions if you tal	e the st	andard de	ductio	n. See ins					
\$24,800 • Head of	C	Add lines 10a and 10b. These a					_		▶ 10c	66,584,423	
household,	11	Subtract line 10c from line 9. Th	-	-					► 11	161,243,255	-
\$18,650 L If you checked	12	Standard deduction or itemize	,	•	•				. 12	*** See Below	
any box under	13	Qualified business income dedu									-
Standard Deduction,	14	Add lines 12 and 13								22,827,118	-
see instructions.	15	Taxable income. Subtract line								157,516,957 127,425,325	-
					,,						

\*\*\* Standard Deduction = 143,551,783

Cat. No. 11320B

Form **1040** (2020)

\*\*\* Itemized Deductions = 15,535,429

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

Total of all r	eturns	filed = 164,358,792 Elec	ctronica	Illy Filed F	Returns	= 15	57,874,579				
				<i>(</i> )	1		ı		1		
<b>£1040</b>		rtment of the Treasury-Internal Revenue Serv		(99) L	120	<b>)2</b> (	0				
	U.	6. Individual Income Ta	x Rei	turn			OMB No.	. 1545-00	74 IRS Use Only	—Do not writ	e or staple in this space.
Filing Status		single Married filing jointly	Marr	ied filing	separat	tely (M	FS) He	ad of hou	sehold (HOH)	Qualif	ying widow(er) (QW)
Check only	If yo	u checked the MFS box, enter the r	name of	your spo	ouse. If	you ch	ecked the H	OH or Q	W box, enter th	e child's n	ame if the qualifying
one box.	pers	on is a child but not your dependen	t 🕨								
Your first name	and mi	ddle initial	Last n	ame						Your soci	al security number
If joint return, sp	ouse's	first name and middle initial	Last n	ame						Spouse's	social security number
-											
Home address	numbe	r and street). If you have a P.O. box, see	instruc	tions.					Apt. no.		ial Election Campaign
											re if you, or your filing jointly, want \$3
City, town, or po	ost offic	e. If you have a foreign address, also co	omplete	spaces be	elow.		State	ZIF	o code		his fund. Checking a
											v will not change
Foreign country	name			Foreign p	orovince/	state/c	ounty	Fo	reign postal code	your tax o	
											You Spouse
At any time du	ring 20	020, did you receive, sell, send, exc	change,	, or other	wise ac	quire	any financial	interest	in any virtual cu	ırrency?	Yes No
Standard	Som	eone can claim:	epende	nt 🗌	Your s	pouse	as a depend	dent			
<b>Deduction</b>		pouse itemizes on a separate retui	n or yo	u were a	dual-st	tatus a	lien				
Age/Blindness	Vau	Were born before January 2, 1	056	☐ Are b	dind	Spo	uso: \Bar \Wa	e born b	efore January 2	1056	☐ Is blind
Dependents			330						1		see instructions):
-	•	rst name Last name		(2)	Social se		, ,	tionship you	Child tax cr	1	redit for other dependents
If more than four	(,,,,,										
dependents,											
see instructions and check											
here ▶ □											
	1	Wages, salaries, tips, etc. Attach	Form(s)	W-2 .	·	1*	txbl schirshp	s 4	,105,334	. 1	8,416,495,535
Attach	2a	Tax-exempt interest	2a	59,449	,107		Taxable in	terest		. 2b	127,375,994
Sch. B if required.	3a	Qualified dividends	3a	260,24	4,440		Ordinary d	lividends		. 3b	327,876,787
required.	4a	IRA distributions	4a	353,03	4,392	ı	Taxable ar	mount .		. 4b	284,005,168
	5a	Pensions and annuities		1,407,94			Taxable ar	mount .		. 5b	827,597,726
Standard	6a	Social security benefits	6a	774,01	7,713		Taxable ar	mount .		. 6b	374,166,924
• Single or	7	Capital gain or (loss). Attach Sche	dule D	if require	ed. If no	t requi	red, check h	ere .	▶ [	7	1,117,709,542
Married filing	8	Other income from Schedule 1, lir								. 8	1,251,563,932
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is yo	our <b>tota</b>	al inco	me			▶ 9	12,739,653,369
<ul> <li>Married filing jointly or</li> </ul>	10	Adjustments to income:						1 1			
Qualifying	а	· · · · · · · · · · · · · · · · · · ·						10a	137,166,853		
widow(er), \$24,800	b	Charitable contributions if you take						10b	10,697,693		44=004=40
<ul> <li>Head of household,</li> </ul>	С	Add lines 10a and 10b. These are							!	10c	147,864,546
\$18,650	11	Subtract line 10c from line 9. This	•	-	_					11	12,591,788,823
<ul> <li>If you checked any box under</li> </ul>	12	Standard deduction or itemized		,			•			. 12	*** See Below
Standard Deduction,	13	Qualified business income deduct					m 8995-A			. 13	166,114,001
see instructions.	14 15	Add lines 12 and 13 Taxable income. Subtract line 14					 anter -0-			. 14 . 15	3,247,282,972 9,812,730,835
Eor Disclosuro		Act, and Paperwork Reduction Act N							at. No. 11320B	.   13	Form <b>1040</b> (2020)
i oi bisciosure,	iivac	nou, and raperwork neduction ACL	.ouce, S	oe separ	ute 1115tF	acuon	J.	U	at. 110. 1102UD		1011111010 (2020)
		**	** S	tandard	l Dedu	ction	= 2,495,	360,191	,019		
		*	** Ite	emized	Deduc	tions	= 607,5	14,569,	803		

Form 1040 (2020	))									Page <b>2</b>
	16	Tax (see instructions). Ch	eck if any from Form	n(s): <b>1</b> 881	4 <b>2</b> 🗌 4972	3 🗌			16	126,517,182
	17	Amount from Schedule 2	, line 3				·		17	1,893,681
	18	Add lines 16 and 17 .							18	126,758,953
	19	Child tax credit or credit	for other dependen	ts					19	39,330,076
	20	Amount from Schedule 3	s, line 7						20	31,395,857
	21	Add lines 19 and 20 .							21	57,874,025
	22	Subtract line 21 from line	e 18. If zero or less,	enter -0					22	109,766,338
	23	Other taxes, including se	•						23	30,236,385
	24	Add lines 22 and 23. This							24	119,398,433
	25	Federal income tax withh								, , , , , , , , , , , , , , , , , , , ,
	а	Form(s) W-2				25a	118,598	3.959		
	b	Form(s) 1099				25b	44,773		1	
	C	Other forms (see instruct				25c	4,969,			
	d	Add lines 25a through 25	•						25d	140,126,721
	26	2020 estimated tax paym							26	9,783,673
<ul> <li>If you have a L qualifying child,</li> </ul>	27	Earned income credit (El		• •		27	26,025			0,100,010
attach Sch. EIC.	28	Additional child tax credi				28	19,119		1	
<ul> <li>If you have nontaxable</li> </ul>	29	American opportunity cre				29	6,481,		1	
combat pay, see instructions.	30	Recovery rebate credit.		*		30	31,096		1	
000	31	Amount from Schedule 3				31	7,462,		-	
	32	Add lines 27 through 31.							32	62,595,858
	33	Add lines 25d, 26, and 32							33	155,293,744
	34	If line 33 is more than line							34	125,949,019
Refund	35a	Amount of line 34 you wa	·			•	•		35a	122,728,631
Direct deposit?	<b>⊳</b> b	Routing number			<b>▶ c</b> Type:	_		avings	Jour	122,720,031
See instructions.	▶d	Account number			i i i			aviiigo		
	36	Amount of line 34 you wa	ant applied to your	2021 estimate	ed tax ▶	36	4,334,	431		
Amount	37	Subtract line 33 from line							37	32,771,171
You Owe	31			-					0.	-,,
For details on		Note: Schedule H and S 2020. See Schedule 3, lir	· ·	•	•	or the t	axes you o	we ioi		
how to pay, see instructions.	38	Estimated tax penalty (se	•			38	10,472	.580		
Third Party		you want to allow anot					10,111	,,,,,		
Designee							Yes. Co	mplete b	elow.	☐ No
3	De	signee's		Phone			Perso	nal identif	ication	TO 100 001
	nar	me 🕨		no. ▶			numb	er (PIN)	<u> </u>	58,103,094
Sign		der penalties of perjury, I decla								, ,
Here		ief, they are true, correct, and	complete. Declaration			ased on a	ali iniomiation			
	Yo	ur signature		Date	Your occupation					nt you an Identity IN, enter it here
Joint return?									inst.) 🕨	int, cintor it nois
See instructions.	Sp	ouse's signature. If a joint retu	rn, <b>both</b> must sign.	Date	Spouse's occupa	tion		If the	IRS ser	nt your spouse an
Keep a copy for your records.	,		_					I	,	ection PIN, enter it here
your records.								(see	inst.) 🕨	
		one no.		Email address		1	1	DTIN		0, 1,1
Paid	Pre	eparer's name	Preparer's signat	ture		Date		PTIN		Check if:
Preparer								-		Self-employed
Use Only		m's name 🕨						_	e no.	
	Fir	m's address ►						Firm'	s EIN 🕨	
Go to www.irs.go	ov/Forn	n1040 for instructions and the	latest information.							Form 1040 (2020)

Form 1040 (2020	)						Page <b>2</b>
	16	Tax (see instructions). Check if any from Form(s): 1 8814 2 4972	3 9,7	36		16	1,822,990,005
	17	Amount from Schedule 2, line 3				17	4,616,591
	18	Add lines 16 and 17				18	1,827,636,926
	19	Child tax credit or credit for other dependents				19	84,414,634
	20	Amount from Schedule 3, line 7				20	45,076,856
	21	Add lines 19 and 20				21	129,590,483
	22	Subtract line 21 from line 18. If zero or less, enter -0				22	1,698,046,442
	23	Other taxes, including self-employment tax, from Schedule 2, line 10 .				23	118,810,941
	24	Add lines 22 and 23. This is your <b>total tax</b>			. ▶	24	1,817,433,675
	25	Federal income tax withheld from:					
	а	Form(s) W-2	25a 1	1,124,95 <sup>2</sup>	1,133		
	b	Form(s) 1099	25b	159,906	,062		
	С	Other forms (see instructions)	25c	12,309,	272		
	d	Add lines 25a through 25c				25d	1,331,767,098
If you have a	26	2020 estimated tax payments and amount applied from 2019 return				26	417,829,370
qualifying child, attach Sch. EIC.	27	Earned income credit (EIC)	27	59,239,			
<ul> <li>If you have</li> </ul>	28	Additional child tax credit. Attach Schedule 8812	28	33,664,			
nontaxable combat pay,	29	American opportunity credit from Form 8863, line 8	29	5,654,4	175		
see instructions.	30	Recovery rebate credit. See instructions	30	45,427,	981		
	31	Amount from Schedule 3, line 13	31	195,236	,123		
	32	Add lines 27 through 31. These are your total other payments and refund	able credi	ts	. ▶	32	338,985,737
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>			. ▶	33	2,072,301,524
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount	ınt you <b>ove</b>	erpaid		34	-472,019,865
	35a	Amount of line 34 you want <b>refunded to you.</b> If Form 8888 is attached, che			▶ □	35a	379,672,173
Direct deposit? See instructions.	►b	Routing number ▶ c Type:	Checking	g 🔲 Sa	vings		
dee manuchons.	<b>►</b> d	Account number					
	36	Amount of line 34 you want applied to your 2021 estimated tax	36	92,347,	692		
Amount	37	Subtract line 33 from line 24. This is the <b>amount you owe now</b>			. ▶	37	218,487,802
You Owe For details on		Note: Schedule H and Schedule SE filers, line 37 may not represent all	of the taxe	es you ov	ve for		
how to pay, see	00	2020. See Schedule 3, line 12e, and its instructions for details.	00	4 225 7	706		
instructions.	38	Estimated tax penalty (see instructions)	38	1,335,7	00		
Third Party Designee		you want to allow another person to discuss this return with the IRS tructions		Yes. Com	nlete h	alow	□No
Designee		signee's Phone	🗀		al identifi		
		no. ▶			(PIN)		
Sign		der penalties of perjury, I declare that I have examined this return and accompanying so					
Here	bel	ief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is b	ased on all in	nformation			
	You	ur signature Date Your occupation					nt you an Identity N, enter it here
Joint return?						nst.) ▶	iv, enter it here
See instructions.	Spo	ouse's signature. If a joint return, <b>both</b> must sign. Date Spouse's occupa	tion		If the	IRS ser	nt your spouse an
Keep a copy for your records.	•				1	,	ection PIN, enter it here
your rootido.					(see ii	nst.) 🕨	
		one no. Email address eparer's name Preparer's signature	Det		PTIN		Chapte ife
Paid	Pre	parer's name Preparer's signature	Date		TIIN		Check if:
Preparer					1_		Self-employed
Use Only		n's name			Phone		
		n's address ►  1040 for instructions and the latest information			Firm's	EIN ▶	Form <b>1040</b> (2020)

Electronically Filed Returns = 151,569,468

<b>1040</b>	•	artment of the Treasury—Internal Revenue Servi		(99)	2	<b>020</b>	OMB No. 1	1545 OO	74 10011 011			
Filing Status	76 657		3.45	2.657	干	rately (MFS	20.292	2,121	usehold (HOH)	68,111	rite or staple in this space.	-
Check only one box.	If yo	u checked the MFS box, enter the n	ame of	_	-	• •	· —		, ,		, , , ,	
Your first name	•	<u> </u>	Last na	ame						Your soc	cial security number	-
If joint return, s	pouse's	s first name and middle initial	Last na	Last name Spi							s social security number	r
Home address	(numbe	er and street). If you have a P.O. box, see	instructi								intial Election Campaigr ere if you, or your	- 1
City, town, or p	ost offic	ce. If you have a foreign address, also co	mplete s	mplete spaces below. State ZIP code Y						= * 2,464	4,296 Y = ** 3,853,24	7
Foreign country	y name			Foreign p	rovino	e/state/cou	nty	Fo	preign postal code	1	ow will not change or refund.  Tyou Spouse	•
At any time du	uring 2	020, did you receive, sell, send, exc	hange,	or other	wise	acquire an	y financial ir	nterest	in any virtual c	urrency?	☐ Yes ☐ No	-
Standard Deduction		eone can claim:	n or you	u were a	dual-	spouse a: status alie	n VII				26,516 no = 147,	171,6 -
Age/Blindness	You:	<b>26,037,672</b> Were born before January 2, 1	956	<b>249,8</b> Are b	337 lind	Spous	e: Was	<b>,876,7</b> born b	<b>732</b> before January	2, 1956	3,849 Is blind	
Dependents	s (see	instructions):		(2)		security	(3) Relation		<b>(4)  ✓</b> if c	ualifies for	(see instructions):	
If more	(1) F	irst name Last name			num	ber	to yo	ou	Child tax o		Credit for other dependents	S _
than four dependents,									33,483			_
see instruction	s —						20,504				-	
and check									7,363			-
here ►	-								1,978		104 007 000	-
Attach	1_	Wages, salaries, tips, etc. Attach F								. 1	121,887,886	-
Sch. B if	2a	· -	2a	6,044,			Taxable inte			. 2b	44,183,746	-
required.	3a		3a	27,014	•		•		3	. 3b	28,737,283	-
	4a		4a	12,845			Taxable am			. 4b	11,832,133	-
	5a		5a	29,956 28,244			Taxable am			. 5b	27,497,894	-
tandard eduction for—	6a	Social security benefits Le Capital gain or (loss). Attach Sche	6a ∣				Taxable am			. 6b	20,751,323	-
Single or	7 8	Other income from Schedule 1, lin		•		•	i, check he		1	. 8	23,474,648 61,579,308	-
Married filing separately,	9									.   °   9		-
\$12,400 Married filing	10	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, Adjustments to income:	ailu o.	i i io io yc	our <b>to</b>	tai IIICUIII				9	149,019,565	-
jointly or	а							10a	34,069,317			
Qualifying widow(er),	a b	Charitable contributions if you take			ducti.	on Seeins	tructions	10a	38,756,713			
\$24,800 Head of	С	Add lines 10a and 10b. These are							00,700,710	▶ 10c	61,755,755	
Head of household,	11	Subtract line 10c from line 9. This	-	-						► 11	149,263,559	-
\$18,650 If you checked	12	Standard deduction or itemized	-	-	_					40	132,944,076	-
any box under	13	Qualified business income deducti		•		•				. 13	21,563,504	-
Standard Deduction,	14									. 14	146,898,253	-
see instructions.	15	Taxable income. Subtract line 14										-
		v Act and Poportyork Poduction Act N					Ci -U			. 13	118,834,579	-

	Electronically Filed Returns = 157,874,579												
- 4 0 5 0				(00) I		1			ı				
<b>1040</b>		artment of the Treasury—Internal Revenue Servi S. Individual Income Tax		urn (99)	<b>202</b>	0	OMB No. 1	1545-007	4 IRS Use Only	—Do not v	vrite or staple in this space.		
Filing Status		Single Married filing jointly	Marr	ied filing se	eparately (N	ИFS)	Head	d of hous	sehold (HOH)	Qua	alifying widow(er) (QW)		
Check only one box.	•	ou checked the MFS box, enter the n		your spou	ise. If you o	hecke	d the HC	)H or QV	V box, enter the	e child's	name if the qualifying		
		son is a child but not your dependen							T				
Your first name	and m	iddle initial	Last na	ame						Your so	ocial security number		
If igint roturn, or	201100'	s first name and middle initial	Last na	ama						0			
ii joint return, st	ouse	s instriame and middle initial	Lastin	anie						Spouse's social security number			
Home address	(numb	er and street). If you have a P.O. box, see	instruct	ions.					Apt. no.	Preside	ential Election Campaign		
	(										here if you, or your		
City, town, or p	ost off	ice. If you have a foreign address, also co	mplete :	spaces belo	w.	State		ZIP	code		if filing jointly, want \$3		
										_	this fund. Checking a low will not change		
Foreign country	name			Foreign pro	vince/state/	county		For	eign postal code	your ta	x or refund.		
											You Spouse		
At any time du	ring 2	2020, did you receive, sell, send, exc	hange,	or otherw	ise acquire	any fi	nancial ir	nterest i	n any virtual cu	ırrency?	Yes No		
Standard	Son	neone can claim:	pender	nt 🗌 Y	our spous	e as a	depende	ent					
Deduction		Spouse itemizes on a separate retur	n or yo	u were a d	lual-status	alien							
Age/Blindness	You	: Were born before January 2, 1	956	Are blir	nd <b>Sn</b> e	ouse:	☐ Was	horn be	efore January 2	1956	Is blind		
Dependents	-	···	000 [	T	ocial security		(3) Relation			-	or (see instructions):		
If more		First name Last name	number to you				Child tax cr		Credit for other dependents				
than four	<u> </u>												
dependents,													
see instructions and check													
here ►													
	1_	Wages, salaries, tips, etc. Attach F	orm(s)	W-2 .						. 1			
Attach Sch. B if	<b>2</b> a	•	2a	55,390,2		<b>b</b> Tax	xable inte	erest		. 2t			
required.	3a		3a	234,992,			•			. 3b			
	4a		4a	317,933,			xable am			. 4t			
	5a			1,289,021	<u> </u>		xable am			. 5k	1 10,200,002		
Standard Deduction for—	6a	,		692,471,			xable am			. 6b	,,		
Single or	7	Capital gain or (loss). Attach Sche		•	•		check he	re .	▶ ∟	J 7	1,010,101,000		
Married filing separately,	8	Other income from Schedule 1, lin								. 8	, , ,		
\$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8.	This is you	ir total inc	ome				9	11,945,909,238		
Married filing jointly or	10	Adjustments to income:						40-	127,601,808				
Qualifying widow(er),	a	From Schedule 1, line 22			· · ·		· ·	10a					
\$24,800	b	Charitable contributions if you take						10b	9,991,751	▶ 10	c 137,593,559		
Head of household,	С 11	Add lines 10a and 10b. These are Subtract line 10c from line 9. This	•	-			<b>.</b>			► 10 ► 11			
\$18,650 L • If you checked	12	Standard deduction or itemized	•	-	•					. 12			
any box under	13	Qualified business income deduct		•		,	95-A			. 13	2,0:0,00:,000		
Standard Deduction,	14	Add lines 12 and 13								. 14	100,100,100		
see instructions.	15		from li	ne 11. If ze	ero or less.	enter	-0			15			
For Disclosure.	15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0												

Form 1040 (2020	))									Page <b>2</b>
	16	Tax (see instructions). Chec	k if any from Form	(s): <b>1</b> 881	4 <b>2</b> 4972	3 🗌			16	118,014,779
	17	Amount from Schedule 2, I	ine 3						17	1,748,209
	18	Add lines 16 and 17							18	118,225,819
	19	Child tax credit or credit fo	r other dependen	ts					19	37,344,397
	20	Amount from Schedule 3, I	ine 7						20	29,966,222
	21	Add lines 19 and 20							21	54,871,334
	22	Subtract line 21 from line 1	8. If zero or less,	enter -0					22	102,061,304
	23	Other taxes, including self-	employment tax,	from Schedule	2, line 10 .				23	27,879,297
	24	Add lines 22 and 23. This is	s your <b>total tax</b>					. ▶	24	110,579,653
	25	Federal income tax withhel	d from:							
	а	Form(s) W-2				25a	112,96	4,279		
	b	Form(s) 1099				25b	42,215	,359		
	С	Other forms (see instruction	ns)			25c	4,426	840		
	d	Add lines 25a through 25c							25d	131,038,106
• If you have a	26	2020 estimated tax paymen	nts and amount a	pplied from 20	19 return				26	8,938,184
qualifying child,	27	Earned income credit (EIC)				27	24,622	,648		, ,
attach Sch. EIC.	28	Additional child tax credit.	Attach Schedule	8812		28	18,189	,198		
nontaxable	29	American opportunity cred	it from Form 8863	3, line 8		29	6,158	,025		
combat pay, see instructions.	30	Recovery rebate credit. Se	e instructions .			30	28,089	,751		
	31	Amount from Schedule 3, I				31	6,870			
	32	Add lines 27 through 31. Ti	nese are your <b>tot</b> a	al other paymo	ents and refund	lable cre			32	57,871,752
	33	Add lines 25d, 26, and 32.							33	144,214,713
Defund	34	If line 33 is more than line 2	24, subtract line 2	4 from line 33.	This is the amo	unt you <b>c</b>	verpaid		34	117,756,836
Refund	35a	Amount of line 34 you wan	refunded to you	<b>J.</b> If Form 8888	is attached, che	eck here		▶ □	35a	114,733,240
Direct deposit?	▶b	Routing number								,,
See instructions.	►d	Account number				_	ĭ	Ü		
	36	Amount of line 34 you want	applied to your	2021 estimate	d tax 🕨	36	4,037	677		
Amount	37	Subtract line 33 from line 2	4. This is the amo	ount vou owe	now			. ▶	37	29,179,734
You Owe		Note: Schedule H and Sc								
For details on		2020. See Schedule 3, line	· ·	•	•	00	ance you c			
how to pay, see instructions.	38	Estimated tax penalty (see	instructions) .		🕨	38	9,630	,166		
Third Party	Do	you want to allow another	er person to disc	cuss this retur	n with the IRS	? See				
Designee	ins	tructions				. ▶ [	Yes. Co	mplete b	elow.	☐ No
		signee's		Phone				nal identif		58,103,094
		ne ►		no. ▶				er (PIN)		
Sign		der penalties of perjury, I declare ief, they are true, correct, and cor			, , ,					, ,
Here		ur signature		Date	Your occupation			1		nt you an Identity
		ai signature		Date	rour occupation					N, enter it here
Joint return?								(see	nst.) ▶	
See instructions. Keep a copy for	Sp	ouse's signature. If a joint return,	both must sign.	Date	Spouse's occupa	ation				nt your spouse an
your records.	•								tity Protection PIN, enter it here inst.) ▶	
	————	Phone no. Email address						(000	,,	
		parer's name	Preparer's signat			Date		PTIN		Check if:
Paid			l span si o oigilat							Self-employed
Preparer	Fire	m's name ▶						Phon	e no	
Use Only		n's address ▶						_	ne no. 's EIN ►	
Go to www irs a	irs gov/Form1040 for instructions and the latest information									

Form 1040 (2020	)							Page <b>2</b>
	16	Tax (see instructions). Check if any from Form(s): 1 8814	<b>2</b> 4972	3 🗌			16	1,716,870,651
	17	Amount from Schedule 2, line 3					17	4,283,672
	18	Add lines 16 and 17					18	1,721,154,323
	19	Child tax credit or credit for other dependents					19	80,840,397
	20	Amount from Schedule 3, line 7					20	40,636,903
	21	Add lines 19 and 20					21	121,477,301
	22	Subtract line 21 from line 18. If zero or less, enter -0					22	1,599,677,022
	23	Other taxes, including self-employment tax, from Schedule 2,					23	109,657,168
	24	Add lines 22 and 23. This is your <b>total tax</b>					24	1,709,336,744
	25	Federal income tax withheld from:						-,,,-
	а	Form(s) W-2		25a 1	,077,288	.287		
	b	Form(s) 1099			149,531,	•		
	С	Other forms (see instructions)		25c	9,982,4			
	d	Add lines 25a through 25c					25d	1,259,497,013
( . K	26	2020 estimated tax payments and amount applied from 2019					26	389,756,096
<ul> <li>If you have a pualifying child,</li> </ul>	27	Earned income credit (EIC)		1 1	56,733,1			
attach Sch. EIC.  If you have	28	Additional child tax credit. Attach Schedule 8812			32,068,7			
nontaxable	29	American opportunity credit from Form 8863, line 8		29	5,362,2			
combat pay, see instructions.	30	Recovery rebate credit. See instructions		30	41,345,4			
	31	Amount from Schedule 3, line 13			180,591,			
	32	Add lines 27 through 31. These are your total other payment		$\overline{}$			32	316,092,414
	33	Add lines 25d, 26, and 32. These are your <b>total payments</b>					33	1,952,609,313
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. Th					34	-443,400,856
neiulia	35a	Amount of line 34 you want refunded to you. If Form 8888 is	attached, chec	k here .		• 🔲	35a	357,692,745
Direct deposit?	►b	Routing number						
See instructions.	►d	Account number						
	36	Amount of line 34 you want applied to your 2021 estimated to	ax ▶	36	85,708,1	10		
Amount	37	Subtract line 33 from line 24. This is the amount you owe no	<b>w</b>			. ▶	37	201,344,149
You Owe		Note: Schedule H and Schedule SE filers, line 37 may not						
For details on how to pay, see		2020. See Schedule 3, line 12e, and its instructions for details.						
instructions.	38	Estimated tax penalty (see instructions)	🕨	38	1,215,8	63		
Third Party		you want to allow another person to discuss this return	with the IRS?					
Designee		tructions		▶ □,	Yes. Com	•		∐ No
		signee's Phone no. ▶			Persona number			
O:		der penalties of perjury, I declare that I have examined this return and ac	companying sch	adules and		`		t of my knowledge and
Sign		ef, they are true, correct, and complete. Declaration of preparer (other the						
Here		, ,	our occupation			1		nt you an Identity
			•			1		N, enter it here
Joint return?						+ `	nst.) 🕨	
See instructions. Keep a copy for	Spo	ouse's signature. If a joint return, <b>both</b> must sign. Date Sp	pouse's occupation	on				nt your spouse an ection PIN, enter it here
your records.							nst.) ▶	ottor i ii, ontor it noro
	Pho	one no. Email address						
D-1-4		parer's name Preparer's signature		Date	Р	TIN		Check if:
Paid								Self-employed
Preparer	Firr	n's name ▶			11	Phon	e no.	
Use Only	Firr	n's address ▶					s EIN ▶	
Go to www irs a	ov/Form	1040 for instructions and the latest information.				*		Form <b>1040</b> (2020)

Total Forms Filed =

Department of the Treasury

Internal Revenue Service

80,009,436

**SCHEDULE 1** (Form 1040)

#### **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 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	3,795,242
2a	Alimony received	[	2a	314,411
b	Date of original divorce or separation agreement (see instructions) ▶			
3	Business income or (loss). Attach Schedule C	[	3	27,727,153
4	Other gains or (losses). Attach Form 4797	[	4	1,948,657
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedu	ıle E	5	16,784,058
6	Farm income or (loss). Attach Schedule F	[	6	1,738,421
7	Unemployment compensation	[	7	29,901,078
8	Other income. List type and amount ▶			
			8	6,956,041
9	Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-	′	9	CC 42E 702
Par	line 8		9	66,435,792
0	Educator expenses		10	3,436,604
1	Certain business expenses of reservists, performing artists, and fee-basis government of the control of the con	Ħ	10	3,430,004
•	officials. Attach Form 2106		11	316,183
2	Health savings account deduction. Attach Form 8889	[	12	2,008,708
3	Moving expenses for members of the Armed Forces. Attach Form 3903	[	13	80,889
4	Deductible part of self-employment tax. Attach Schedule SE	[	14	20,352,607
5	Self-employed SEP, SIMPLE, and qualified plans	[	15	947,275
6	Self-employed health insurance deduction	Ī	16	3,640,345
7	Penalty on early withdrawal of savings	[	17	379,439
8a	Alimony paid	Ī	18a	420,321
b	Recipient's SSN	Ţ		
С	Date of original divorce or separation agreement (see instructions) ▶			
9	IRA deduction		19	2,465,286
20	Student loan interest deduction	[	20	10,103,544
21	Tuition and fees deduction. Attach Form 8917	†	21	1,294,534
22	Add lines 10 through 21. These are your adjustments to income. Enter here	F		
	on Form 1040, 1040-SR, or 1040-NR, line 10a		22	36,917,699

8. Net oper. loss= 1,323,044

8. Stock options= 889

8. Cancel. of debt= 510,844

8. For. earn. inc. ex= 455,352

8. Gambling inc.=

1,687,491 531,695

8. Taxable HSA = 8. Sec 965 = 2,413

8. 461 Loss Limit = 25

8. 8992 Low tx = 7,823 22. Housing ded.=

22. Other adj.=

22. Dom. Prod. Ded = 11,133

22. Archer MSA Ded.= 4,365

4,573

293,714

Total Forms Filed =

80,009,436

#### **SCHEDULE 1** (Form 1040)

8. Taxable HSA =

8. 461 Loss Limit =

8. 8992 Low tx =

8. Sec 965 =

635,596

184,932

2,869,447

15,258

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 Attachment Sequence No. **01** 

Name	e(s) shown on Form 1040, 1040-SR, or 1040-NR		Your so	cial s	ecurity number
Par	rt I Additional Income				
1	Taxable refunds, credits, or offsets of state and local inco	ome taxes		1	4,336,115
<b>2</b> a	Alimony received			2a	9,659,488
b	Date of original divorce or separation agreement (see instru	uctions) <b>&gt;</b>			
3	Business income or (loss). Attach Schedule C			3	337,175,302
4	Other gains or (losses). Attach Form 4797			4	33,788,611
5	Rental real estate, royalties, partnerships, S corporations, tro	usts, etc. Attach Sche	edule E	5	793,879,232
6	Farm income or (loss). Attach Schedule F			6	-21,864,139
7	Unemployment compensation			7	405,283,667
8	Other income. List type and amount ▶				,,
				8	37,253,562
9	Combine lines 1 through 8. Enter here and on Form 10		-		
Por	rt II Adjustments to Income			9	1,251,563,932
	•				
10	Educator expenses			10	904,137
11	Certain business expenses of reservists, performing artists officials. Attach Form 2106			11	2,533,353
12	Health savings account deduction. Attach Form 8889 .			12	5,948,959
13	Moving expenses for members of the Armed Forces. Atta	ach Form 3903		13	208,240
14	Deductible part of self-employment tax. Attach Schedule	SE		14	33,293,453
15	Self-employed SEP, SIMPLE, and qualified plans			15	26,091,044
16	Self-employed health insurance deduction			16	30,148,510
17	Penalty on early withdrawal of savings			17	208,505
18a	Alimony paid			18a	10,697,070
b	Recipient's SSN	•			
С					
19	IRA deduction			19	13,574,992
20	Student loan interest deduction			20	7,752,615
21	Tuition and fees deduction. Attach Form 8917			21	3,176,138
22	Add lines 10 through 21. These are your adjustments t				
	on Form 1040, 1040-SR, or 1040-NR, line 10a			22	137,166,853
For Pa	aperwork Reduction Act Notice, see your tax return instructions.	Cat. No. 71479F	;	Schedu	lle 1 (Form 1040) 2020
8. Stoc 8. Cand 8. For. 6 8. Gam	oper. loss= 224,129,910 ck options= 76,571 cel. of debt= 4,953,787 earn. inc. ex= 29,622,342 able HSA = 635,596	_	•	6	

#### SCHEDULE 2 (Form 1040)

Department of the Treasury Internal Revenue Service

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

#### **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

2020

Attachment Sequence No. 02

Your social security number

Total Forms Filed = 31,373,834 Part I Tax Alternative minimum tax. Attach Form 6251 . . . . . . . . 1 1 156,549 Excess advance premium tax credit repayment. Attach Form 8962 . . . . . . . 2 1,748,217 3 3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17... 1,893,681 Part II **Other Taxes** Self-employment tax. Attach Schedule SE. 4 4 20,352,607 5b 41,984 **b** □ 8919. 5 Unreported social security and Medicare tax from Form: **a** : 4137 5 Additional tax on IRAs, other qualified retirement plans, and other tax-favored 6 6 3,873,810 7a Household employment taxes. Attach Schedule H . . . . . . . . . . . . . . . . 7a 179,705 **b** Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if 7b required 509.464 Taxes from: **a** ☐ Form 8959 **b** Form 8960 8a 5,169,751 8 8b 5,691,866 Other taxes = 899,519 **c** Instructions; enter code(s) 8 Section 965 net tax liability installment from Form 965-A . . . 9 5,497 Add lines 4 through 8. These are your total other taxes. Enter here and on Form 10

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

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

Cat. No. 71478U

Schedule 2 (Form 1040) 2020

30,236,385

#### 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

2020

Attachment
Sequence No. 02

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number Total Forms Filed = 31,373,834 Part I Tax 1 1 2,937,322 2 Excess advance premium tax credit repayment. Attach Form 8962 . . . . . . . 2 1,709,599 3 3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17... 4,616,591 Part II **Other Taxes** 4 4 Self-employment tax. Attach Schedule SE . . 66,574,852 Unreported social security and Medicare tax from Form:  $^{5a}$   $^{8,507}$   $^{4137}$ 5 5 Additional tax on IRAs, other qualified retirement plans, and other tax-favored 6 6 3,642,009 7a 1,209,817 **b** Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required 7b 267,007 Taxes from: **a** ☐ Form 8959 **b** Form 8960 8a 11,362,876 **c** Instructions; enter code(s) Other taxes = 861,190 8 9 Section 965 net tax liability installment from Form 965-A . . . 253,452 Add lines 4 through 8. These are your total other taxes. Enter here and on Form 10 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b . . . . . . . . . . . . . . . 10 118,810,941 For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 71478U Schedule 2 (Form 1040) 2020

### SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

6c

6c

6c

6c

F8911

F8936

F8396

F8839

Other Credits

28,519

61,793

94,293

64,773

7,854

#### **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

2020
Attachment
Sequence No. 03

Name(s) shown on Form 1040. 1040-SR, or 1040-NR Your social security number **Total Forms Filed = 36,919,462** Part I Nonrefundable Credits 1 Foreign tax credit. Attach Form 1116 if required 1 9,200,635 2 Credit for child and dependent care expenses. Attach Form 2441 . . . . . . 2 5,049,685 3 3 7,418,821 4 Retirement savings contributions credit. Attach Form 8880 . . . . . . . . . . . . 4 9,401,147 5 Residential energy credits. Attach Form 5695 5 2,290,640 **SEE BELOW** 6 6 Other credits from Form: **a** □ 3800 **b** 8801 31,395,857 7 Add lines 1 through 6. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20 Part II Other Payments and Refundable Credits 8 8 2,223,362 9 9 Amount paid with request for extension to file (see instructions) . . . . . . . . . . 1,597,601 10 Excess social security and tier 1 RRTA tax withheld . . . . . . . . . . . . . . . 10 1,587,700 11 11 292.191 12 Other payments or refundable credits: **a** Form 2439 12a 3,112 **b** Qualified sick and family leave credits from Schedule(s) H and 12b 998,868 **c** Health coverage tax credit from Form 8885 . . . . . . . . 12c 47,083 d Other: 12d 32,415 Deferral for certain Schedule H or SE filers (see instructions) . 12e 863.595 12f 1,853,472 Add lines 8 through 12f. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31 13 7,462,183 For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 71480G Schedule 3 (Form 1040) 2020 F3800 433,065 6b F8801 148,294 6c F8910 18,183 6c 45,677 Sch R 6c F8834 3,035

#### **SCHEDULE 3** (Form 1040)

Department of the Treasury Internal Revenue Service

6c

6c

F8839

Other Credits

321,764

43,220

#### **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 Attachment

Sequence No. 03 Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number **Total Forms Filed = 36,919,462** Part I **Nonrefundable Credits** 1 1 21,624,553 Credit for child and dependent care expenses. Attach Form 2441 . . . . . . . . 2 2 2,826,870 3 3 7.880.608 4 Retirement savings contributions credit. Attach Form 8880 . . . . . . . . . . . . . . . 1,749,685 5 Residential energy credits. Attach Form 5695 5 3,901,324 Other credits from Form: **a** 3800 **b** 8801 c SEE BELOW 6 6 45,076,856 7 Add lines 1 through 6. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20 Part II **Other Payments and Refundable Credits** 8 2,149,299 9 Amount paid with request for extension to file (see instructions) . . . . . . . . . . 169,512,965 Excess social security and tier 1 RRTA tax withheld . . . . . . . . . . . . . . . . . 10 10 3,630,524 11 11 166,650 12 Other payments or refundable credits: Form 2439 12a 77,187 **b** Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 12b 1,911,053 c Health coverage tax credit from Form 8885 . . . . . . . . . 12c 45,008 12d 284,190 d Other: Deferral for certain Schedule H or SE filers (see instructions) . 12e 940,901 12f 3,066,897 Add lines 8 through 12f. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31 13 195,236,123 For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 71480G Schedule 3 (Form 1040) 2020 F3800 6a 4,932,175 F8801 1,362,613 6h 6c F8910 48,221 6c Sch R 4,265 6c F8834 4,554 6c F8911 9,801 6c F8936 313,118 6c F8396 153,078

#### SCHEDULE A (Form 1040)

Department of the Treasury

#### **Itemized Deductions**

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

► Attach to Form 1040 or 1040-SR

► Attach to Form 1040 or 1040-SR.

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

Attachment Sequence N

OMB No. 1545-0074

2020

Attachment
Sequence No. 07

Internal Revenue Service (99) Name(s) shown on Form 1040 or 1040-SR Your social security number Total schedules filed = 15,812,365 Caution: Do not include expenses reimbursed or paid by others. Medical and 1 Medical and dental expenses (see instructions) . . . . . . . 1 3,941,813 **Dental 2** Enter amount from Form 1040 or 1040-SR, line 11 | **2** | **Expenses 3** Multiply line 2 by 7.5% (0.075) . . . . . . . . . . 3,939,811 **4** Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-. 3,941,813 **Taxes You** 5 State and local taxes. Paid a State and local income taxes or general sales taxes. You may include Income Taxes = 11.256.735 either income taxes or general sales taxes on line 5a, but not both. If General Sales Tax = 3,732,744 you elect to include general sales taxes instead of income taxes, 5a 14.989.478 **b** State and local real estate taxes (see instructions) . . . . . . . 5b 13,563,994 **c** State and local personal property taxes . . . . . . . . . . 5c 6,234,442 **d** Add lines 5a through 5c . . . . . . . . . . . . . . . . . . 5d 15,270,934 e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing 5e 15,270,934 6 Other taxes. List type and amount ▶ 6 865,460 15,400,513 Interest 8 Home mortgage interest and points. If you didn't use all of your home You Paid mortgage loan(s) to buy, build, or improve your home, see Caution: Your mortgage interest a Home mortgage interest and points reported to you on Form 1098. deduction may be limited (see 8a 12,144,134 instructions). b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., ----8b 332,636 c Points not reported to you on Form 1098. See instructions for special 8c 1.083.486 8d **d** Mortgage insurance premiums (see instructions) . . . . . . . . 8e 12,321,025 9 Investment interest. Attach Form 4952 if required. See instructions . 9 769.809 12,530,953 11 Gifts by cash or check. If you made any gift of \$250 or more, see Gifts to Charity 11 11,685,162 Caution: If you 12 Other than by cash or check. If you made any gift of \$250 or more, made a gift and 12 see instructions. You must attach Form 8283 if over \$500. . . . 7,047,033 got a benefit for it, see instructions. 257,261 **14** Add lines 11 through 13 . . . . . . . . . . . . . . . . 12.637.022 Casualty and 15 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 Theft Losses 6,619 16 Other—from list in instructions. List type and amount ▶ Other Itemized Gambling Loss Deduction = 363,420 Other than gambling deduction = 338,903 **Deductions** Property income, casualty and theft deduction = 28,918 16 723,153 Total 17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Itemized 17 15,535,437 Deductions 18 If you elect to itemize deductions even though they are less than your standard deduction, 

#### **SCHEDULE A** (Form 1040)

#### **Itemized Deductions**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

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

Attachment Sequence No. **07** 

Internal Revenue Service (99) Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16. Sequence No. 07										
Name(s) shown on	Form 1040 or 1040-SR <b>Total schedules filed = 15,812,365</b>	Y	our so	cial security number						
Medical	Caution: Do not include expenses reimbursed or paid by others.									
and	1 Medical and dental expenses (see instructions)	1 102,169,008								
Dental	2 Enter amount from Form 1040 or 1040-SR, line 11   2									
Expenses	3 Multiply line 2 by 7.5% (0.075)									
LAPCHISCS			-							
	4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0		4	77,248,411						
Taxes You	5 State and local taxes.									
Paid	a State and local income taxes or general sales taxes. You may include	le Income Taxes	<b>,</b>	207,853,088						
	either income taxes or general sales taxes on line 5a, but not both.		Tax =	8,064,270						
	you elect to include general sales taxes instead of income taxe		-	0,004,270						
	check this box									
	<b>b</b> State and local real estate taxes (see instructions)	-,-,	-							
	c State and local personal property taxes	100,011,010	-							
		1,000,000	-							
	d Add lines 5a through 5c	,,	_							
	e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing	-								
	separately)									
	6 Other taxes. List type and amount ▶									
		6								
	<b>7</b> Add lines 5e and 6		7	124,225,773						
Interest	8 Home mortgage interest and points. If you didn't use all of your hon			, ,						
You Paid	mortgage loan(s) to buy, build, or improve your home, se									
Caution: Your	instructions and check this box									
mortgage interest										
deduction may be	a Home mortgage interest and points reported to you on Form 109									
limited (see instructions).	See instructions if limited	8a 154,860,497	_							
,	b Home mortgage interest not reported to you on Form 1098. Se	ee								
	instructions if limited. If paid to the person from whom you bought the	ne								
	home, see instructions and show that person's name, identifying no	).,								
	and address									
	<b>&gt;</b>									
		8h 2 927 697								
	- Deinte not vaparted to value on Form 1000. Can instructions for appear	- /- /	-							
	c Points not reported to you on Form 1098. See instructions for specimens	1 1								
	rules	8c 1,535,775	_							
	d Mortgage insurance premiums (see instructions)		_							
	e Add lines 8a through 8d	8e 162,158,870	_							
	${\bf 9}$ Investment interest. Attach Form 4952 if required. See instructions .	9 16,396,040								
	<b>10</b> Add lines 8e and 9	<u> </u>	10	178,554,910						
Gifts to	11 Gifts by cash or check. If you made any gift of \$250 or more, se	ee								
Charity	instructions	11 137,008,455								
Caution: If you	12 Other than by cash or check. If you made any gift of \$250 or mor									
made a gift and	see instructions. You <b>must</b> attach Form 8283 if over \$500	12 85,720,231								
got a benefit for it, see instructions.	13 Carryover from prior year	13 16,414,521								
	14 Add lines 11 through 13		14	204 664 957						
0			_	204,664,857						
Casualty and										
Theft Losses	disaster losses). Attach Form 4684 and enter the amount from lin									
	instructions		15	275,346						
Other	16 Other—from list in instructions. List type and amount ▶									
Itemized	Gambling Loss Deduction = 17,093,02 Other than gambling d	eduction = 4,085,421								
<b>Deductions</b>	Property income, casualty and theft deduction = 1,229,		16	22,407,640						
Total	17 Add the amounts in the far right column for lines 4 through 16. Also									
Itemized	Form 1040 or 1040-SR, line 12		17	607,543,088						
	<b>18</b> If you elect to itemize deductions even though they are less than you			301,010,000						
Deductions	check this box									
For Paperwork	Reduction Act Notice, see the Instructions for Forms 1040 and 1040-SR.	Cat. No. 17145C	chedu	ile A (Form 1040) 2020						

### SCHEDULE B (Form 1040)

Department of the Treasury Internal Revenue Service (99)

#### **Interest and Ordinary Dividends**

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

► Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

2020
Attachment
Sequence No. 08

Name(s) shown on r		Total schedules filed = 21,688,534	Your	social securi	ty num	ber
Part I Interest	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address ▶		Amo	ount	
(See instructions and the instructions for Forms 1040 and 1040-SR, line 2b.)	)					
Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that			1			
form.	2	Add the amounts on line 1	2	18,922,	924	
	3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3	6,573		
	4	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b	4	2,02		
	Note:	If line 4 is over \$1,500, you must complete Part III.		Am	ount	
Part II	5	List name of payer ▶				
Ordinary						
Dividends						
(See instructions and the instructions for Forms 1040 and 1040-SR, line 3b.)	)		5			
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary						
dividends shown on that form.	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6	16,577,7	761	
<del></del>	-	If line 6 is over \$1,500, you must complete Part III.		71. 1. 1.		
Part III		nust complete this part if you <b>(a)</b> had over \$1,500 of taxable interest or ordinary dividen account; or <b>(c)</b> received a distribution from, or were a grantor of, or a transferor to, a			Yes	No
Foreign Accounts and Trusts	7a	At any time during 2020, did you have a financial interest in or signature authority account (such as a bank account, securities account, or brokerage account) locat country? See instructions	ed in			
Caution: If required, failure to file FinCEN Form 114 may result in substantial penalties. See instructions.	b 8	If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See Find and its instructions for filing requirements and exceptions to those requirements.  If you are required to file FinCEN Form 114, enter the name of the foreign cour financial account is located   During 2020, did you receive a distribution from, or were you the grantor of, or the foreign trust? If "Yes," you may have to file Form 3520. See instructions	CEN F	orm 114  vhere the		

### SCHEDULE B (Form 1040)

Department of the Treasury Internal Revenue Service (99)

### **Interest and Ordinary Dividends**

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

► Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

2020
Attachment

internal Revenue Serv	ice (99)	7 7444341 10 10 10 10 10 10 10 10 11	_	Sequence	No. U	<u> </u>
Name(s) shown on r		Total schedules filed = 21,688,534	Your	social securi	ty numl	ber
Part I Interest (See instructions and the instructions for Forms 1040 and 1040-SR, line 2b.)	1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address ▶		Amo	ount	
Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.			1			
	2	Add the amounts on line 1	2	120,997	168	
	3 4	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3	6,218	3	
		line 2b	4			
	Note:	If line 4 is over \$1,500, you must complete Part III.		Amo	ount	
Part II	5	List name of payer ▶				
Ordinary Dividends (See instructions and the instructions for Forms 1040 and						
Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.	6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6	322,742,	456	
<del></del>	•	If line 6 is over \$1,500, you must complete Part III.		/I- \ I- '	ı	
Part III		nust complete this part if you <b>(a)</b> had over \$1,500 of taxable interest or ordinary divident account; or <b>(c)</b> received a distribution from, or were a grantor of, or a transferor to, a			Yes	No
Foreign Accounts and Trusts	7a	At any time during 2020, did you have a financial interest in or signature authority account (such as a bank account, securities account, or brokerage account) locat country? See instructions	ed in			
Caution: If required, failure to file FinCEN Form 114 may		If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank Accounts (FBAR), to report that financial interest or signature authority? See Find and its instructions for filing requirements and exceptions to those requirements.	CEN F	Form 114		
result in substantial penalties. See	b 8	If you are required to file FinCEN Form 114, enter the name of the foreign coufinancial account is located ▶  During 2020, did you receive a distribution from, or were you the grantor of, or to the second				
instructions.		foreign trust? If "Yes," you may have to file Form 3520. See instructions				

### SCHEDULE C (Form 1040)

### Profit or Loss From Business (Sole Proprietorship)

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

OMB No. 1545-0074 Attachment

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

iame o	f proprietor Total schedules filed	= 31,4	72,868			Social	security number (SSN)
١	Principal business or profession	n, inclu	uding product or service	(see instr	uctions)	B Ente	er code from instructions
;	Business name. If no separate	busine	ess name, leave blank.			D Emp	oloyer ID number (EIN) (see instr.)
	Business address (including si	uite or	room no.) <b>&gt;</b>				
	City, town or post office, state	, and Z					
	Accounting method: (1)	Cash	(2) Accrual	(3)	Other (specify) ▶		
	If you started or acquired this Did you make any payments in If "Yes," did you or will you file	busine n 2020	ss during 2020, check he that would require you t	ere o file Forn	2020? If "No," see instructions for	 	▶ □ □ Yes □ No
Part	l						1
1					this income was reported to you o		20 554 000
_					d		26.554.096 592.681
2	Returns and allowances						+
3 4							26.545.102 4,142,466
<del>4</del> 5	• (	,				_	26,579,379
6	-				refund (see instructions)		1,245,233
7	_		-				26,977,656
art		enses	for business use of y	our hon	ne <b>only</b> on line 30.		
8	Advertising	8	6,746,709	18	Office expense (see instructions)	18	8,604,915
9	Car and truck expenses (see			19	Pension and profit-sharing plans	. 19	93,971
	instructions)	9	14,925,481	20	Rent or lease (see instructions):		
0	Commissions and fees .	10	1,458,639	а	Vehicles, machinery, and equipmen	t <b>20a</b>	2,004,428
1	Contract labor (see instructions)	11	2,418,067	b	Other business property	. 20b	3,422,348
2	Depletion	12	72,685	21	Repairs and maintenance	. 21	5,096,278
3	Depreciation and section 179 expense deduction (not			22	Supplies (not included in Part III)	. 22	12,866,894
	included in Part III) (see			23	Taxes and licenses	. 23	6,298,012
	instructions)	13	5,288,857	24	Travel and meals:		
14	Employee benefit programs			а	Travel	. 24a	4,521,111
	(other than on line 19)	14	212,423	b	Deductible meals (see		0.700.000
15	Insurance (other than health)	15	6,650,751		instructions)		
16	Interest (see instructions):	10	445,801	25	Utilities	·	15,474,552
a	Mortgage (paid to banks, etc.)	16a		26	Wages (less employment credits)		1,071,919 14,205,417
b	Other	16b	1,403,977 9,387,017		Other expenses (from line 48) .	. 27a	
17 28	<u> </u>			Add lines	Reserved for future use 8 through 27a	_	24,280,841
29	Tentative profit or (loss). Subtr						28,095,238
30	, ,				nses elsewhere. Attach Form 882		20,000,200
	unless using the simplified me	•	•	icoc cxpc	rises elsewhere. Attach i omi 602		
	Simplified method filers only			of (a) you	ur home: <b>2,283,166</b>		
	and (b) the part of your home	used fo	or business:	2,282,15	. Use the Simplified	-	
	Method Worksheet in the instr			enter on	line 30	. 30	4.166.806
31	Net profit or (loss). Subtract	line 30	from line 29.				
	• If a profit, enter on both <b>So</b> checked the box on line 1, see		•			31	27,727,153
	• If a loss, you must go to lin	e 32.			J		
32	If you have a loss, check the b	ox that	describes your investm	ent in this	activity. See instructions.		
	<ul> <li>If you checked 32a, enter t SE, line 2. (If you checked the Form 1041, line 3.</li> <li>If you checked 32b, you mu</li> </ul>	box on	line 1, see the line 31 ins nondeductible loss	tructions). <b>(+)/susp</b>	Estates and trusts, enter on ended loss carryover (-)	32a 32b	

#### SCHEDULE C (Form 1040)

#### **Profit or Loss From Business**

(Sole Proprietorship)

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

OMB No. 1545-0074 Attachment

Department of the Treasury

Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally must file Form 1065. Sequence No. 09 Name of proprietor Social security number (SSN) Total schedules filed = 31,472,868 Α Principal business or profession, including product or service (see instructions) B Enter code from instructions С D Employer ID number (EIN) (see instr.) Business name. If no separate business name, leave blank. E Business address (including suite or room no.) City, town or post office, state, and ZIP code F (3) ☐ Other (specify) ► Accounting method: (1) Cash (2) Accrual Did you "materially participate" in the operation of this business during 2020? If "No," see instructions for limit on losses .  $\square$  Yes  $\square$  No G Н □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 1,571,832,315 1 7,354,921 2 2 3 Subtract line 2 from line 1 . . 3 1,564,477,394 4 Cost of goods sold (from line 42) 4 437,822,156 5 5 1,126,655,237 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . 25,806,269 6 7 7 1,152,461,507 Gross income. Add lines 5 and 6. Part II Expenses. Enter expenses for business use of your home only on line 30. 16,625,344 Advertising . . . . . 18,076,972 18 8 18 Office expense (see instructions) 8 1.302.008 19 Pension and profit-sharing plans . 19 9 Car and truck expenses (see instructions). . . . . 9 104,050,256 20 Rent or lease (see instructions): 10 Commissions and fees 10 20a 11,577,141 19,123,054 а Vehicles, machinery, and equipment 11 Contract labor (see instructions) 11 76,679,606 b Other business property . . . 20b 40,470,151 12 Depletion . . . . 12 464,444 21 Repairs and maintenance . . . 21 23.693.615 13 Depreciation and section 179 22 Supplies (not included in Part III) . 22 54.664.366 expense deduction (not included in Part III) (see 23 Taxes and licenses . . . . . 23 20,251,241 55.001.932 instructions). . . . . 13 24 Travel and meals: Travel . . . . . . . . . . 12,609,176 Employee benefit programs 24a 14 3,214,638 (other than on line 19). . 14 Deductible meals (see 23,674,961 15 Insurance (other than health) 15 instructions) . . . . . . . . 24b 10,212,073 36.333.493 16 Interest (see instructions): 25 25 3.533.673 99.649.963 Mortgage (paid to banks, etc.) 16a 26 Wages (less employment credits). 26 6,909,072 151,157,093 16b 27a Other expenses (from line 48) . . 27a . . . . . . 15,621,265 17 Legal and professional services 17 b Reserved for future use . . 27h 28 Total expenses before expenses for business use of home. Add lines 8 through 27a . . . . . . . ▶ 28 804,961,557 29 29 347,499,949 30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. **Simplified method filers only:** Enter the total square footage of (a) your home: 469.907 and (b) the part of your home used for business: . Use the Simplified 11.166.328 Method Worksheet in the instructions to figure the amount to enter on line 30 . . . . . . . 30 31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you 337,175,302 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 = 7,945 • 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 32b Some investment is not nondeductible loss (+)/suspended loss carryover (-) Form 1041, line 3. at risk 841,680 • If you checked 32b, you must attach Form 6198. Your loss may be limited.

Schedule C (Form 1040) 2020 Page 2 Part III Cost of Goods Sold (see instructions) 33 Method(s) used to value closing inventory: a Cost **b** Lower of cost or market **c** Other (attach explanation) 34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? ☐ Yes ☐ No If "Yes," attach explanation . . Inventory at beginning of year. If different from last year's closing inventory, attach explanation . . . 1,100,345 35 36 36 Purchases less cost of items withdrawn for personal use . . . 2,215,827 37 Cost of labor. Do not include any amounts paid to yourself . . . 37 486,925 1,890,443 38 38 Materials and supplies 938,367 39 39 Add lines 35 through 39 . . . . . . 40 1,136,531 41 41 42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4. . . Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562. When did you place your vehicle in service for business purposes? (month/day/year) Of the total number of miles you drove your vehicle during 2020, enter the number of miles you used your vehicle for: **b** Commuting (see instructions) 45 Was your vehicle available for personal use during off-duty hours? . . . . . No No 46 ☐ No If "Yes," is the evidence written? Other Expenses. List below business expenses not included on lines 8-26 or line 30. Part V

**Total other expenses.** Enter here and on line 27a .

48

	e C (Form 1040) 2020			Page <b>2</b>
Part	Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory: <b>a</b> $\square$ Cost <b>b</b> $\square$ Lower of cost or market <b>c</b> $\square$ Other (at	tach a	nlanation\	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventor.  If "Yes," attach explanation	ory?	. Yes	☐ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	41,729,54	3
36	Purchases less cost of items withdrawn for personal use	36	246,298,76	66
37	Cost of labor. Do not include any amounts paid to yourself	37	40,779,79	4
38	Materials and supplies	38	72,434,53	0
39	Other costs	39	77,600,96	0
40	Add lines 35 through 39	40		
41	Inventory at end of year	41	41,021,43	7
42	<b>Cost of goods sold.</b> 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 and are not required to file Form 4562 for this business. See the instructions for file 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 2020, enter the number of miles you used your	vehicle	for:	
а	Business b Commuting (see instructions) c	Other		
45	Was your vehicle available for personal use during off-duty hours?		Tyes	☐ 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?		Tyes	☐ No
<sub>b</sub> Part	If "Yes," is the evidence written?	 ne 30	Tes	☐ No
		,		
48	<b>Total other expenses.</b> Enter here and on line 27a	48		

### **SCHEDULE D** (Form 1040)

## **Capital Gains and Losses**

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

OMB No. 1545-0074

Attachment Sequence No. **12** 

Department of the Treasury Internal Revenue Service (99) ▶ 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.

Name(s) shown on return

Your social security number

Total schedules filed = 25,991,494 Total	Sales Reported w	ith Form 1099 = 2	22,073,835		
Did you dispose of any investment(s) in a qualified opportunity If "Yes," attach Form 8949 and see its instructions for addition				es =	33,605 no = 19,476
Part I Short-Term Capital Gains and Losses—Ge	enerally Assets	Held One Year	or Less (se	e ins	tructions)
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole 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.		4,995,115	III 0 2, 00 d.i.i	(9)	4,905,045
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	11,797,945	11,800,742	4,776,28	2	11,482,659
2 Totals for all transactions reported on Form(s) 8949 with Box B checked	2,960,270	2,640,135	310,314	ı	2,552,144
3 Totals for all transactions reported on Form(s) 8949 with Box C checked	1,271,332	1,304,306	102,067	,	1,192,120
4 Short-term gain from Form 6252 and short-term gain or	(loss) from Forms 4	1684, 6781, and 88	324	4	582,131
<b>5</b> Net short-term gain or (loss) from partnerships, Schedule(s) K-1			rusts from	5	1,033,798
6 Short-term capital loss carryover. Enter the amount, if a Worksheet in the instructions				6	( 2,036,339 )
7 Net short-term capital gain or (loss). Combine lines 1 term capital gains or losses, go to Part II below. Otherwis				7	17,508,003
Part II Long-Term Capital Gains and Losses—Ge	enerally Assets I	Held More Than	One Year	(see	instructions)
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) 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.		4,361,769			4,257,388
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked	9,726,405	9,740,297	2,675,6	37	9,415,059
9 Totals for all transactions reported on Form(s) 8949 with Box E checked		5,390,111	317,5	53	5,326,659
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	2 522 452	2,349,169	1,016,5	85	1,878,458
11 Gain from Form 4797, Part I; long-term gain from Form from Forms 4684, 6781, and 8824	ns 2439 and 6252;			11	2,298,891
12 Net long-term gain or (loss) from partnerships, S corpora	ations, estates, and	trusts from Sched	dule(s) K-1	12	1,752,783
<b>13</b> Capital gain distributions. See the instructions				13	10,942,851
14 Long-term capital loss carryover. Enter the amount, if ar Worksheet in the instructions				14	( 3,815,710 )
15 Net long-term capital gain or (loss). Combine lines 8	Ba through 14 in co	olumn (h). Then, g	o to Part III	15	20 584 296

on the back .

20,584,296

## SCHEDULE D (Form 1040)

## **Capital Gains and Losses**

OMB No. 1545-0074

2020

	► Attach to Form transment of the Treasury al Revenue Service (99)  Attach to Form Go to www.irs.gov/ScheduleD  ► Use Form 8949 to list your transments		d the latest informa		,	Attachment Sequence No. 12
Name	(s) shown on return  Total schedules filed = 25,991,494 Total S	Sales Reported wi	th Form 1099 = 1	Your so	cial se	ecurity number
Did y	you dispose of any investment(s) in a qualified opportunity					
If "Y	es," attach Form 8949 and see its instructions for addition	al requirements for	r reporting your ga	ain or loss.		
Pa	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 e 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)
	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.	1,430,641,685	1,430,905,942			-264,257
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked	7,546,420,896	7,911,213,302	357,168,9	67	-7,623,413
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked	503,354,019	516,223,881	12,391,11	19	-478,742
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked	196,017,462	199,097,511	907,020		-2,173,030
4	Short-term gain from Form 6252 and short-term gain or (		, ,		4	1,892,300
5	Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,			5	27,698,815
6	Short-term capital loss carryover. Enter the amount, if ar <b>Worksheet</b> in the instructions	ny, from line 8 of y	-	_	6	( 174,812,747 )
7	Net short-term capital gain or (loss). Combine lines 1a term capital gains or losses, go to Part II below. Otherwis	a through 6 in colu	mn (h). If you have	e any long-	7	-155,761,075
Par					_	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)	(g) 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.	519,267,416	479,080,559			40,186,857
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked	1,387,798,600	1,317,277,609	29,060,	038	99,581,030
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked	487,014,082	330,594,530	-7,441,0	606	148,977,947
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked	762,122,065	545,323,366	-114,705	,563	102,093,136
11	Gain from Form 4797, Part I; long-term gain from Form from Forms 4684, 6781, and 8824				11	280,894,684
12	Net long-term gain or (loss) from partnerships, S corporation				12	271,964,047
	· -				13	55,908,061
14	Long-term capital loss carryover. Enter the amount, if an <b>Worksheet</b> in the instructions	-	our <b>Capital Loss</b>	Carryover	14	( 277,977,296 )
15	Net long-term capital gain or (loss). Combine lines 88	a through 14 in co	lumn (h). Then, go	to Part III		

721,628,841

Schedule D (Form 1040) 2020 Page **2** 

Part	Summary			
16	Combine lines 7 and 15 and enter the result	16	25,083,935	
	• If line 16 is a <b>gain,</b> 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 <b>loss</b> , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.			
	• If line 16 is <b>zero</b> , 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 <b>both</b> 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	45,485	
19	If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet	19	1,416,831	
20	Are lines 18 and 19 both zero or blank and are you not filing Form 4952?  ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below.			
	□ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.			
21	If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> 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?			
	☐ <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Forms 1040 and 1040-SR, line 16.			
	☐ <b>No.</b> Complete the rest of Form 1040, 1040-SR, or 1040-NR.			

Schedule D (Form 1040) 2020

## 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Schedule D (Form 1040) 2020 Page 2 Part III Summary 16 | 565,867,772 16 Combine lines 7 and 15 and enter the result • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22. If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☐ **Yes.** Go to line 18. ■ No. Skip lines 18 through 21, and go to line 22. If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 18 5,165,657 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see 19 instructions), enter the amount, if any, from line 18 of that worksheet . . . . 38,134,319 20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below. ☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. 21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.

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

## SCHEDULE E

(Form 1040)

**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

2020

Attachment Sequence No. 13

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

Total schedules filed = 19.669

Your social security number

	iotais	scriedules filed =	19,669,489									
Part		From Rental Real Est	-	•		•			Ū			use
		structions. If you are an i								•		
	l you make any payment										Yes	No
B If "	Yes," did you or will you	ı file required Form(s)	1099?							<u> 🗆</u>	Yes _	No
1a	Physical address of ea				<u>e)                                    </u>							
A	Number of Returns v				To			of Rental Pi			16,743,5	
В	Number of Retur	ns with Royalties =	1,842,0	010		Tota	al Numb	er of Roya	Ities =		2,639,0	35
С												
1b	Type of Property (from list below)	For each rental real above, report the personal use days	number of fai	r renta	al and			Rental Days		nal Use ays	Q	JV
Α		if you meet the red	quirements to	file a	sa İ	Α						
В		qualified joint vent	ture. See insti	ructio	ns.	В						]
С						С						
Туре с	of Property:											
1 Sing	le Family Residence	3 Vacation/Short-T	erm Rental	5 Laı	nd		7 Self-	Rental				
2 Mult	i-Family Residence	4 Commercial		6 Ro	yalties			r (describe)				
Incom	e:	ı	Properties:		REN'	TΑ	R	OYALTY B	3		С	
3	Rents received			3	9,165	,830						
4	Royalties received			4				1,758,113	3			
Expen												
	Advertising			5								
6	Auto and travel (see ins	•		6								
7	Cleaning and maintena			7								
8	Commissions			8								
9	Insurance			9								
10	Legal and other profess			10								
11	Management fees			11								
12	Mortgage interest paid			12	4,760	,832						
13	Other interest			13						549	,329	
14	Repairs			14								
15	Supplies			15	0 220	400						
16	Taxes			16	8,236	,499						
17	Utilities			17	7 500	000		704 404	1			
18	Depreciation expense of	or depletion		18	7,529	,928		724,161				
19	Other (list)			19 20	0.240	1 405		4 460 90	4			
20	Total expenses. Add lin	•		20	9,312	2,405		1,160,89	4			
21	Subtract line 20 from line											
	result is a (loss), see in file Form 6198		it you must	21	9,518	2 065		1 750 10	Q			
	Deductible rental real		tion if any	21	3,310	,,000		1,750,19 iondeducti		tal loss =	4 700	102
22	on <b>Form 8582</b> (see inst			22	( 4,437	.457		ionaeaucti suspended			, ,	
23a	Total of all amounts rep	· · · · · · · · · · · · · · · · · · ·					23a	9,165,830		arryover	- 303,	110 )
b	Total of all amounts rep						23b			_		
С	Total of all amounts rep			JI 1162			23c	1,758,113 4,760,832				
d	Total of all amounts rep						23d	8,140,676		_		
a e	Total of all amounts rep						23a					
24	<b>Income.</b> Add positive							.0,200,04	. 2	4 6 94	1,400	
2 <del>4</del> 25	Losses. Add royalty loss				•			 al losses her			1,242	<u> </u>
										7,32	.,272	
	Total rental real estat here. If Parts II, III, IV,											
	Schedule 1 (Form 10/0				-					6 9 63	5 201	

## **SCHEDULE E** (Form 1040)

**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 2020 Attachment Sequence No. **13** 

Department of the Treasury Internal Revenue Service (99)

Part   Income or Loss From Rental Real Estate and Royalties   Note: If you are in the business of renting personal property, use   Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.  A Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions   Yes   No   No   If "Yes," did you or will you file required Form(s) 1099?   No   1a   Physical address of each property (street, city, state, ZIP code)   A   B
A Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions
B   If "Yes," did you or will you file required Form(s) 1099?   Yes   No
1a Physical address of each property (street, city, state, ZIP code)   A B   C 1b Type of Property (from list below) 2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions. Fair Rental Personal Use Days QJV   Type of Property: A A A   Single Family Residence 3 Vacation/Short-Term Rental 5 Land 2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)   Income: Properties: RENTA ROYALTYB C   3 Rents received 3 365,416,313   4 Royalties received 4 27,520,897   Expenses: 5 Advertising 5 Advertising   6 Auto and travel (see instructions) 6 Auto and travel (see instructions) 6 Auto and maintenance   7 Cleaning and maintenance 7   8 Commissions 8 Dinsurance 9 Insurance   10 Legal and other professional fees 10
A   B   C   C
B   C   C     Type of Property (from list below)
C   1b   Type of Property (from list below)   2   For each rental real estate property listed above, report the number of fair rental and above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.   A   B
Type of Property (from list below)
A   B   Days   Days
Personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.
Type of Property: 1 Single Family Residence   3 Vacation/Short-Term Rental   5 Land   7 Self-Rental   2 Multi-Family Residence   4 Commercial   6 Royalties   8 Other (describe)
Type of Property:           1 Single Family Residence         3 Vacation/Short-Term Rental         5 Land         7 Self-Rental           2 Multi-Family Residence         4 Commercial         6 Royalties         8 Other (describe)           Income:         Properties:         RENT A         ROYALTYB         C           3 Rents received         3 365,416,313         4 Royalties received         4 27,520,897           Expenses:         5 Advertising         5 Advertising         5 Ceaning and travel (see instructions)         6 Ceaning and maintenance         7 Cleaning and maintenance         7 Cleaning and maintenance         7 Rental           9 Insurance         9 Insurance         9 Insurance         9 Insurance         10 Insurance
1 Single Family Residence         3 Vacation/Short-Term Rental         5 Land         7 Self-Rental           2 Multi-Family Residence         4 Commercial         6 Royalties         8 Other (describe)           Income:         Properties:         RENT A ROYALTYB         C           3 Rents received         3 365,416,313         27,520,897           Expenses:         5         4         27,520,897           Expenses:         5         6         4         27,520,897           Family Residence         4         27,520,897         4         27,520,897           Expenses:         5         6         4         4         27,520,897           Expenses:         5         6         4
1 Single Family Residence         3 Vacation/Short-Term Rental         5 Land         7 Self-Rental           2 Multi-Family Residence         4 Commercial         6 Royalties         8 Other (describe)           Income:         Properties:         RENT A ROYALTYB         C           3 Rents received         3 365,416,313         27,520,897           Expenses:         5         4         27,520,897           Expenses:         5         6         4         27,520,897           Family Residence         4         27,520,897         4         27,520,897           Expenses:         5         6         4         4         27,520,897           Expenses:         5         6         4
Income:         Properties:         RENTA         ROYALTYB         C           3 Rents received
3       Rents received
4       Royalties received
4       Royalties received
5       Advertising
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
7       Cleaning and maintenance
8       Commissions.
9       Insurance
10 Legal and other professional fees
11 Management fees
12       Mortgage interest paid to banks, etc. (see instructions)       12       54,260,395         13       Other interest
14 Repairs.
16 Taxes
17 Utilities
18 Depreciation expense or depletion
10 Other (liet)
20 Total expenses. Add lines 5 through 19 20 344,303,677 8,598,481
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
22 Deductible rental real estate loss after limitation, if any, nondeductible rental loss = 25,332,203
on Form 8582 (see instructions)
23a Total of all amounts reported on line 3 for all rental properties 23a 365,416,313
b Total of all amounts reported on line 4 for all royalty properties 23b 27,520,897
c Total of all amounts reported on line 12 for all properties
d Total of all amounts reported on line 18 for all properties
e Total of all amounts reported on line 20 for all properties
Income. Add positive amounts shown on line 21. Do not include any losses
Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here .   25   (70,113,433
Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result
here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on
Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 .   26   50.127.378  For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11344L Schedule E (Form 1040) 20

Schedule	e E (Form 1040) 202	20							,	Attachment Sequence	No. <b>13</b>		Page <b>2</b>
Name(s)	shown on return. D	o not enter nam	e and social secu	rity numbe	er if shown	n on c	other side.		•			cial securit	y number
Cautio	The IDS on	mparos amoi	into roportod	on vour	tay roti	urn v	with amoun	te ch	OWE	n on Schedule(s) k	′ 1		
Part										If you report a loss,		a distribut	ion dispose of
				-		-				in column (e) on line			•
					•	-				ot at risk, you must			•
	line 28 and	d attach <b>Form</b>	6198. See instr	ructions.									
27	Are you repo	rting any los	s not allowed	in a prio	or vear	due	to the at-ri	sk or	bas	sis limitations, a pr	ior vea	r unallow	ed loss from a
										d partnership expe			
	see instruction	ons before co	ompleting this	section						<u> </u>		Y	es 🗌 No
28		(a) Name			Enter <b>P</b>		(c) Check foreign	if		(d) Employer identification		Check if omputation	(f) Check if any amount is
		(a) Hamo			S corpora		partnershi	p _		number	is re	equired	not at risk
Α	Nι	ımber of PA	RTNERSHIP	S 6,	,708,58	31	34.6	27					10,534,013
В													
С		Number of	S-CORPS	5,	,540,97	<b>'</b> 4							335,624
D	Door	sive Income	and Lass						NI a	nnaasiya Inaama	ond L		
						(*) A.I				npassive Income			
	(g) Passive los (attach Form 858			ive income nedule K-1			onpassive loss see <b>Schedule</b>		ea	<ul><li>(j) Section 179 exp deduction from Forn</li></ul>			chedule K-1
Α	PARTNERS	HIPS	PARTNE	PSHIPS	:	ΡΔΕ	RTNERSHI	PS		PARTNERSHIPS	3	PART	NERSHIPS
В	1,127,76		1,649,32				1,842,993	. •		205,322			18,400
C	S-CORP		S-CORP				S-CORPS			S-CORPS			ORPS
D	173,547	7	468,691				1,753,806			482,496			7,597
29a	Totals		2,021,16	9									1,195
b	Totals 1.2	43,817				3	3,400,243			676,178			
30	Add columns (	h) and (k) of	line 29a								30	6,53	37,788
31	Add columns (	g), (i), and (j)	of line 29b.								31		)6,457
32	Total partners					. Co	mbine line	s 30 a	and	31	32	9,00	1,513
Part I	III Income	or Loss Fr	om Estates	and Tr	usts								
33				<b>(a)</b> Na	ame							(b) Em	
												identification	on number
<u>A</u>													
В		Daccivo	Income and	Loce			1			Nonpassive I	ncomo	and Los	
	() 5									<u>.</u>			
		duction or loss a r <b>m 8582</b> if requir			l) Passive om <b>Sche</b> o		-			Deduction or loss m <b>Schedule K-1</b>		(f) Other in Schedu	
Α	•	· ·	,										
В													
-	Totals				281.25	8						390,86	2
	Totals	37,732							4	17,645			
35	Add columns (		ine 34a .								35	611	574
36	Add columns (	c) and (e) of	line 34b .								36	( 81,	<b>835</b> )
37	Total estate a	nd trust inc	ome or (loss)	. Combii	ne lines	s 35	and 36 .				37	650	,555
Part I	V Income	or Loss Fr	om Real Es	tate Mo	ortgag	e In	vestmen	t Cor	าdu	iits (REMICs) —	Resid	ual Hold	er
38	(a) Name	(b	) Employer identi	fication			s inclusion from the side of t	m	(d) T	axable income (net los	s)	(e) Incor	ne from
	(2, 11		number				nstructions)		tror	m Schedules Q, line 1b	)	Schedules	Q, line 3b
		( 1) 1 (					54			8,711			
		. , .	e) only. Enter	the resu	ilt here	and	include in	the to	ital (	on line 41 below	39	10,0	588
Part 40	V Summa Net farm renta		looo) from <b>Eo</b>	m 402E	Alaa 4	00m	nloto lino 1	2 hale	0147		40	420	226
		•	•				•			(Form 1040), line 5 ▶	41	429,	
	•	•					Г	ooneat	ale I	(i Oilli 1040), illie 3	41	16,78	4,000
42	Reconciliation	-	_			•	- 1						
	farming and fish (Form 1065), bo												
	AD; and Schedu							42		659,733			
	Reconciliation fo	•					İ						
	(see instructions),	-	•										
	1040, Form 1040-		, ,		-								
	vou materially part	,					- 1	43		<b>460 460</b>			

Schedu	ule E (Form 1040) 2020						Attachment Sequence	No. <b>13</b>		Page <b>2</b>
Name(s	s) shown on return. Do not enter n	ame and social secu	rity number if sl	hown on	other side.			Your so	cial securi	ty number
	T 100									
Part	ion: The IRS compares an Income or Loss	· · · · · · · · · · · · · · · · · · ·	•						المارة المارة المارة المارة المارة المارة المارة المارة المارة المارة المارة المارة المارة المارة المارة المارة	
Part	stock, or receive a loa									
	computation. If you re									
	line 28 and attach For	•		•	_		•			.,
27	Are you reporting any I	oss not allowed	in a prior ve	ear due	to the at-ri	sk or ba	asis limitations, a pr	ior vea	r unallow	ed loss from a
	passive activity (if that						•	-		
	see instructions before	completing this				<u></u>				es 🗌 No
28	(a) Name			er <b>P</b> for ship; <b>S</b>	(c) Check foreign		(d) Employer identification		Check if imputation	(f) Check if any amount is
_			for S co	rporation	partnershi	р	number	is re	quired	not at risk
В										
C										
D										
	Passive Incon	ne and Loss				No	onpassive Income	and Lo	DSS	
	(g) Passive loss allowed (attach Form 8582 if required)		ive income redule K-1	٠,	onpassive loss		(j) Section 179 exp deduction from Form			passive income
Α	PARTNERSHIPS	PARTNE	RSHIPS	PA	RTNERSH	IPS	PARTNERSHIPS	3	PART	NERSHIPS
В	39,744,218	74,137,97		1	164,938,530	)	4,967,562		352,7	766,852
С	S-CORPS	S-CORP			S-CORPS		S-CORPS		S-C	ORPS
D	5,023,689	38,488,51	15	1	108,894,19	6	20,033,276		585,0	639,908
29a	Totals	112,626,4	90						938,4	106,761
b	Totals 44.767.907	411		2	73,832,726		25,000,838			
30	Add columns (h) and (k)							30		,033,251
31 32	Add columns (g), (i), and Total partnership and S	•	 como or (la	 Sec) Co				31		301,472 <u>)</u> 331,778
Part					JIIIDIIIE IIIIE	5 30 and		32	,	
33			(a) Name						(b) Em	nployer on number
Α										
В										_
	Passiv	e Income and I	Loss				Nonpassive Ir	ncome	and Los	S
	(c) Passive deduction or los (attach Form 8582 if red			ssive inco			Deduction or loss om Schedule K-1		(f) Other in Sched	
_	(attaon 1 of the control of the cont	1404)								
B								+		
34a	Totals		15.98	5,602					21,506,8	313
b	Totals 1,248,82	0	-,			4	,760,575		<u> </u>	
35	Add columns (d) and (f) of	of line 34a .						35	37.49	2,415
36	Add columns (c) and (e)							36	( 6,009	9,395
37	Total estate and trust in					<u></u>		37		3,020
Part	IV Income or Loss				nvestmen s inclusion fro					
38	(a) Name	<b>(b)</b> Employer identification	fication	Sched	ules Q, line 2c instructions)	l (u)	Taxable income (net loss om <b>Schedules Q</b> , line 1b	5)	(e) Incor	me from <b>GQ,</b> line 3b
					1		-40,885			
39 Part	Combine columns (d) and	d (e) only. Enter	the result he	ere and	l include in	the total	I on line 41 below	39	-56,	126
40	V Summary  Net farm rental income o	r (loss) from <b>For</b>	m 4835 Δle	en com	nlete line /	2 helow	1	40	4 804	3,181
41	Total income or (loss). Combin	, ,			•			41		79,232
42	Reconciliation of farming				1		( a a a a a a a a a a a a a a a a a a a			3,232
	farming and fishing income									
	(Form 1065), box 14, code	B; Schedule K-1	(Form 1120-	-S), box	17, code					
	AD; and Schedule K-1 (For	m 1041), box 14,	code F. See	instruc	tions	42 1	34,989,276			
43	Reconciliation for real estate									
	(see instructions), enter the ne			-						
	1040, Form 1040-SR, or Form			activitie	S III WIIICN	43	39 744 121			

### **SCHEDULE EIC** (Form 1040)

## **Earned Income Credit**

Qualifying Child Information

OMB No. 1545-0074 1040-SF

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

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

Attachment

Sequence No. 43

Your social security number

Name(s) shown on return

Total schedules filed = 18,388,995

## Before you begin:

- See the instructions for Form 1040 or 1040-SR, 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 or disallow your EIC. If the name or SSN on the child's social security card is not correct, call the Social Security Administration at 1-800-772-1213.



- You can't claim the EIC for a child who didn't live with you for more than half of the year.
- 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	Ch	nild 2	Chil	d 3
1	Child's name	First name Last n	ame First name	Last name	First name	Last name
	If you have more than three qualifying children, you have to list only three to get the maximum credit.					
2	Child's SSN					
	The child must have an SSN as defined in the instructions for Form 1040 or 1040-SR, line 27, unless the child was born and died in 2020. If your child was born and died in 2020 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.	18,387,987	9,1	91,229	3,19	6,245
3	Child's year of birth	.,		•	.,	
		Year 18.388.995 If born after 2001 and the chis younger than you (or your spotiling jointly), skip lines 4a and go to line 5.	use, if younger than yo	.229 I and the child is u (or your spouse, if ip lines 4a and 4b;	Year 3.196.2 If born after 2001 of younger than you (filing jointly), skip go to line 5.	and the child is or your spouse, if
4 8	Was the child under age 24 at the end of 2020, a student, and younger than you (or	Yes. No.	Yes.	No.	Yes.	No.
	your spouse, if filing jointly)?		4b. 278,527 line 5.	<i>1e 4b.</i>	(79,355 line 5.	4b.
ŀ	Was the child permanently and totally disabled during any part of 2020?	463, <u>5</u> 32 No	8,8,1,66	No.	24,033	No.
		Go to The child is qualifying of		The child is not a qualifying child.		he child is not a ualifying child.
5	Child's relationship to you					
	(for example, son, daughter, grandchild, niece, nephew, eligible foster child, etc.)	18,388,995	9,191,229		3,196,245	
6	Number of months child lived with you in the United States during 2020					
	• If the child lived with you for more than half of 2020 but less than 7 months, enter "7."	40				
	• If the child was born or died in 2020 and your home was the child's home for more than half the time he or she was alive during 2020, enter "12."	18,387,993 mont  Do not enter more than 12 months.		more than 12	3,195,245  Do not enter mo months.	re than 12

### SCHEDULE EIC (Form 1040)

## **Earned Income Credit**

Qualifying Child Information

1040-SR EIC OMB No. 1545-0074

2020

Attachment Sequence No. 43

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

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

Name(s) shown on return

Total schedules filed = 18,388,995

Your social security number

## Before you begin:

- See the instructions for Form 1040 or 1040-SR, 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 or disallow your EIC. If the name or SSN on the child's social security card is not correct, call the Social Security Administration at 1-800-772-1213.



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

Q	ualifying Child Information	С	hild 1	С	child 2	С	hild 3
1	Child's name	First name	Last name	First name	Last name	First name	Last name
	If you have more than three qualifying children, you have to list only three to get the maximum credit.						
2	Child's SSN						
	The child must have an SSN as defined in the instructions for Form 1040 or 1040-SR, line 27, unless the child was born and died in 2020. If your child was born and died in 2020 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						
		Year  If born after 20 younger than y filing jointly), s go to line 5.	001 <b>and</b> the child is ou (or your spouse, if kip lines 4a and 4b;	Year  If born after 20 younger than y filing jointly), s go to line 5.	001 <b>and</b> the child is you (or your spouse, if skip lines 4a and 4b;	younger than y	001 <b>and</b> the child is ou (or your spouse, if kip lines 4a and 4b;
4 a	Was the child under age 24 at the end of	Yes.	No.	Yes.	No.	Yes.	No.
	2020, a student, and younger than you (or your spouse, if filing jointly)?	Go to line 5.	Go to line 4b.	Go to line 5.	Go to line 4b.	Go to line 5.	Go to line 4b.
k	Was the child permanently and totally disabled during any part of 2020?	Yes.	No.	Yes.	No.	Yes.	No.
		Go to line 5.	The child is not a qualifying child.	Go to line 5.	The child is not a qualifying child.	Go to line 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.)						
6	Number of months child lived with you in the United States during 2020						
	• If the child lived with you for more than half of 2020 but less than 7 months, enter "7."						
	• If the child was born or died in 2020 and your home was the child's home for more than half the time he or she was alive during 2020, enter "12."	Do not enter months.	months more than 12	Do not enter	months r more than 12	Do not enter months.	months more than 12
<u></u>	r Paparwork Reduction Act Notice see you	ır tav		O-+ N- 10000		0-1	FIC (Form 1040) 0000

## SCHEDULE F (Form 1040)

Department of the Treasury Internal Revenue Service (99)

## **Profit or Loss From Farming**

OMB No. 1545-0074

2020
Attachment
Sequence No. 14

Schedule F (Form 1040) 2020

Prin	cipal crop or activity	В	nter code	from F	Part IV	C A	ccounti	ng me	thod:	D Empl	oyer ID r	number (EIN	(see instr
			<b>&gt;</b>				Cash	A	ccrual				
Did	you "materially participate" in the operati	on of th	is busines	s during	2020? If	"No," se	e instruc	tions f	or limit o	n passiv	e losses	S Yes	☐ No
Did	you make any payments in 2020 that wo	ıld requ	ire you to	file Form	n(s) 10993	? See ins	tructions	s.				Yes	☐ No
lf "۱	es," did you or will you file required Forn	(s) 109	9?									☐ Yes	☐ No
Part	Farm Income — Cash Method	. Com	plete Par	ts I and	l II. (Accı	rual me	hod. C	omple	te Parts	II and	III, and	Part I, lin	e 9.)
1a	Sales of livestock and other resale items	(see in	structions)					1a	361	,853			
b	Cost or other basis of livestock or other	tems re	eported on	line 1a				1b	208,	277			
С	Subtract line 1b from line 1a										1c	378	,077
2	Sales of livestock, produce, grains, and	other pr	oducts yo	u raised							2	953	,675
За	Cooperative distributions (Form(s) 1099-	PATR)	. За	** 43	37,490	3b	Taxa	ble am	ount .		3b	** 429	,650
4a	Agricultural program payments (see inst	uctions	). <b>4a</b>	** 6	76,466	4b	Taxa	ble an	ount .		4b	** 669	,007
5a	Commodity Credit Corporation (CCC) lo	ans rep	orted unde	r electio	on	<del>.</del>					5a	** 2,	221
b	CCC loans forfeited		. 5b	** (	3,116	5c	Taxa	ble am	ount .		5с	** 3,	107
6	Crop insurance proceeds and federal cro	p disas	ster payme	ents (see	instruction	ons):							
а	Amount received in 2020		. 6a	1	37,761	6b	Taxa	ble an	ount .		6b	** 131	,870
С	If election to defer to 2021 is attached, of	heck he	ere		🕨	6d	Amo	unt de	erred fro	m 2019	6d	13	210
7	Custom hire (machine work) income .										7	** 151	,898
8	Other income, including federal and stat	e gasoli	ne or fuel	tax cred	lit or refur	nd (see ir	structio	ns) .			8	** 554	,296
9	Gross income. Add amounts in the rig	ht colu	mn (lines	1c, 2, 3	3b, 4b, 5a	a, 5c, 6b	, 6d, 7,	and 8	). If you	use the			
	accrual method, enter the amount from										9	1,51	4,832
art	Farm Expenses—Cash and A	ccrua	l Method	. Do n	ot includ	e perso	nal or li	iving e	expense	s. See i	nstruct	ions.	
0	Car and truck expenses (see				23	Pensio	n and pr	ofit-sh	aring pla	ns	23	1,	388
-	instructions). Also attach Form 4562	10	496,1	92	24	Rent o	lease (s	see ins	tructions	):			
1	Chemicals	11	510,2	62	а	Vehicle	s, mach	inery,	equipme	nt	24a		
2	Conservation expenses (see instructions)	12	27,5	50	b	Other (	land, ani	imals,	etc.)		24b		
3	Custom hire (machine work)	13	423,9	67	25	Repair	and ma	aintena	ince		25	1,19	2,116
4	Depreciation and section 179 expense				26	Seeds	and plar	nts .			26	571	,713
-	(see instructions)	14	1,288,	943	27	Storag	e and wa	arehou	sing .		27		
15	Employee benefit programs other than				28	Supplie	es				28	1,08	8,825
	on line 23	15	21,3	57	29	Taxes					29	996	,772
6	Feed	16	933,6	15	30	Utilities					30		•
7	Fertilizers and lime	17	628,2	11	31	Veterin	ary, bree	eding,	and med	icine .	31		
8	Freight and trucking	18	3-01		32		expenses	_					
9	Gasoline, fuel, and oil	19	1,067,	354	а		•				32a	1	
20	Insurance (other than health)	20	897,5		b						20h		
1	Interest (see instructions):		55.,6	-	c						32c		
а	Mortgage (paid to banks, etc.)	21a	346,7	82	d						324		
	Other	21b	402,1		e						220		
b	Labor hired (less employment credits)	22	262,8		f						32f		
b					ea instru	ctions .				. ▶	33	1,719	765
b 22	, , ,	2t. It lind	e o∠i is ne	gative. s									J. 1 UJ
	Total expenses. Add lines 10 through 3								,508,66		34	1,738,	
b 2 3	Total expenses. Add lines 10 through 3 Net farm profit or (loss). Subtract line 3	3 from	line 9 To	tal of a	all unma	rked ex	pense	s 1	,508,66 londedu	8		1,738,	421
b 2 3	Total expenses. Add lines 10 through 3	3 from	line 9 To	tal of a	all unma	rked ex	pense	s 1	,508,66 londedu	8	oss (+)	1,738,	421

Cat. No. 11346H

For Paperwork Reduction Act Notice, see the separate instructions.

## **SCHEDULE F** (Form 1040)

## **Profit or Loss From Farming**

► Attach to Form 1040, Form 1040-SR, Form 1040-NR, Form 1041, or Form 1065.

OMB No. 1545-0074

	ent of the Treasury Revenue Service (99)  Go to ww	w.irs.g	gov/ScheduleF for	instructio	ons and the la	test information		A	Attachment Sequence No. <b>14</b>
ıme c	f proprietor Total schedules filed = 1	.769.	447				Social se		number (SSN)
Pri	ncipal crop or activity		Enter code from P	art IV	C Accoun	ting method:	D Employ	er ID n	umber (EIN) (see instr.)
	icipal crop of activity	٦	▶			n Accrual			
Did	you "materially participate" in the operati	on of t	his business during	20202 If '			n passive	losses	☐ Yes ☐ No
	you make any payments in 2020 that wo		-						☐ Yes ☐ No
	Yes," did you or will you file required Form		•	` '					☐ Yes ☐ No
ari									
а	Sales of livestock and other resale items		· · · · · · · · · · · · · · · · · · ·	•			7,133		, ,
b	Cost or other basis of livestock or other					1b 21,18			
С	Subtract line 1b from line 1a		•					1c	14,604,348
2	Sales of livestock, produce, grains, and							2	88,464,886
a	Cooperative distributions (Form(s) 1099-	•	1 1	058,623	1			3b	** 20,648,713
а	Agricultural program payments (see inst			131,517	4b Tax	able amount .		4b	**19,938,730
ia	Commodity Credit Corporation (CCC) lo			n				5a	** 632,343
b	CCC loans forfeited		1 1	21,366	1	able amount .		5c	** 119,391
;	Crop insurance proceeds and federal cro	op disa			ons):				
а	Amount received in 2020	٠	. 6a 6.4	90.764	6b Tax	able amount .		6b	** 5,556,427
С	If election to defer to 2021 is attached, of	heck h	nere	▶	<b>6d</b> Am	ount deferred fro	m 2019	6d	1,093,084
7	Custom hire (machine work) income .							7	** 5,479,450
3	Other income, including federal and stat							8	**12,121,953
)	Gross income. Add amounts in the rig	aht col	umn (lines 1c, 2, 3	b, 4b, 5a	, 5c, 6b, 6d, 7	, and 8). If you	use the		
	accrual method, enter the amount from							9	165,766,753
art	Farm Expenses—Cash and A	ccru	al Method. Do no	ot includ	e personal or	living expense	s. See in:	struct	ions.
)	Car and truck expenses (see			23	Pension and p	profit-sharing pla	ıns	23	11,418
	instructions). Also attach Form 4562	10	1,930,098	24	Rent or lease	(see instructions	s):		
	Chemicals	11	8,403,747	а	Vehicles, mad	hinery, equipme	nt	24a	
2	Conservation expenses (see instructions)	12	79,762	b	Other (land, a	nimals, etc.)		24b	
3	Custom hire (machine work)	13	5,660,844	25	Repairs and r	naintenance		25	11,863,795
1	Depreciation and section 179 expense			26	Seeds and pla	ants		26	11,280,751
	(see instructions)	14	37,189,774	27	Storage and v	varehousing .		27	
5	Employee benefit programs other than			28	Supplies			28	6,088,094
	on line 23	15	301,098	29	Taxes			29	4,221,974
3	Feed	16	18,887,418	30	Utilities			30	
7	Fertilizers and lime	17	14,050,851	31	Veterinary, br	eeding, and med	licine .	31	
3	Freight and trucking	18		32	Other expens	es (specify):			
)	Gasoline, fuel, and oil	19	5,656,447	а				32a	
			0.005.000	b				32b	
	Insurance (other than health)	20	6,395,630						
)		20	6,395,630	c				32c	
)	Insurance (other than health)	20 21a	5,086,216	1				32c 32d	
a	Insurance (other than health) Interest (see instructions):			С					
) I a b	Insurance (other than health) Interest (see instructions):  Mortgage (paid to banks, etc.)	21a	5,086,216	c d				32d	
) I a b	Insurance (other than health) Interest (see instructions):  Mortgage (paid to banks, etc.) Other	21a 21b 22	5,086,216 4,189,548 7,187,041 ne 32f is negative, s	c d e f	etions			32d 32e	189,554,674
0 1 a b 2	Insurance (other than health) Interest (see instructions):  Mortgage (paid to banks, etc.) Other	21a 21b 22	5,086,216 4,189,548 7,187,041 ne 32f is negative, s	c d e f	etions	es 41,070,16		32d 32e 32f 33 34	-21,864,139
0 1 a b 2	Insurance (other than health) Interest (see instructions):  Mortgage (paid to banks, etc.) Other	21a 21b 22 2f. If lin	5,086,216 4,189,548 7,187,041 ne 32f is negative, so I line 9 Total of a	d e f ee instruc	etions	es 41,070,16	S9	32d 32e 32f 33 34 ss (+) /	
0 1 a	Insurance (other than health) Interest (see instructions):  Mortgage (paid to banks, etc.)	21a 21b 22 2f. If lin	5,086,216 4,189,548 7,187,041 ne 32f is negative, so I line 9 Total of a	d e f ee instruc	etions	es 41,070,16		32d 32e 32f 33 34 ss (+) /	-21,864,139
0 1 a b 2 3 4	Insurance (other than health) Interest (see instructions): Mortgage (paid to banks, etc.) Other Labor hired (less employment credits)  Total expenses. Add lines 10 through 3 Net farm profit or (loss). Subtract line 3 If a profit, stop here and see instructions	21a 21b 22 2f. If lii 33 from	5,086,216 4,189,548 7,187,041 ne 32f is negative, so n line 9	d e f fee instructions, comp	rtions	es 41,070,16 ad 36. Nondedu	69ctible Los	32d 32e 32f 33 34 ss (+) /	-21,864,139

\*\*Denotes that the line item is the addition of both cash and accrual methods of accounting

Schedule F (Form 1040) 2020 Page 2

Part	Farm Income – Accrual Method (see instructions).		rage
37	Sales of livestock, produce, grains, and other products (see instructions)	37	953,675
38a	Cooperative distributions (Form(s) 1099-PATR) . 28a ** 437,490 38b Taxable amount	38b	** 429,650
39a	Agricultural program payments	39b	** 669,007
40 a	Commodity Credit Corporation (CCC) loans:  CCC loans reported under election	40a	** 2,221
b	CCC loans forfeited	40c	** 3,107
41	Crop insurance proceeds	41	** 131,870
42	Custom hire (machine work) income	42	** 151,898
43	Other income (see instructions)	43	** 554,296
44	Add amounts in the right column for lines 37 through 43 (lines 37, 38b, 39b, 40a, 40c, 41, 42, and 43)	44	7,129
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	9,515

<sup>\*</sup> 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, or

management for a fee or on a contract basis. Instead, file Schedule C (Form 1040).

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

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

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

## **Crop Production**

111100 Oilseed and grain farming 111210 Vegetable and melon farming 111300 Fruit and tree nut farming

111400 Greenhouse, nursery, and floriculture production

111900 Other crop farming

### **Animal Production**

112111 Beef cattle ranching and farming

112112 Cattle feedlots

112120 Dairy cattle and milk production

112210 Hog and pig farming

112300 Poultry and egg production

112400 Sheep and goat farming

112510 Aquaculture

112900 Other animal production

### Forestry and Logging

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

Scriedi	ile F (F0III 1040) 2020		Page Z
Part	Farm Income – Accrual Method (see instructions).		
37	Sales of livestock, produce, grains, and other products (see instructions)	37	88,464,886
38a	Cooperative distributions (Form(s) 1099-PATR) . 28a ** 25,058,623 38b Taxable amount	38b	** 20,648,713
39a	Agricultural program payments	39b	** 19,938,730
40 a	Commodity Credit Corporation (CCC) loans:  CCC loans reported under election	40a	** 632,343
b	CCC loans forfeited	40c	** 119,391
41	Crop insurance proceeds	41	** 5,556,427
42	Custom hire (machine work) income	42	** 5,479,450
43	Other income (see instructions)	43	** 12,121,953
44	Add amounts in the right column for lines 37 through 43 (lines 37, 38b, 39b, 40a, 40c, 41, 42, and 43)	44	2,809,033
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	1,723,868

## 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, or

management for a fee or on a contract basis. Instead, file Schedule C (Form 1040).

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

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

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

## **Crop Production**

111100 Oilseed and grain farming111210 Vegetable and melon farming

111300 Fruit and tree nut farming

111400 Greenhouse, nursery, and floriculture 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)

Schedule F (Form 1040) 2020

<sup>\*</sup> 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.

## Schedule R (Form 1040)

Credit for the Elderly or the Disabled

► Attach to Form 1040 or 1040-SR.

1040-SR ▶ Go to www.irs.gov/ScheduleR for instructions and the latest information.

OMB No. 1545-0074

Sequence No. 16

Internal Revenue Service (99) Name(s) shown on return

Department of the Treasury

Total schedules filed = 47,886

Your social security number

You may be able to take this credit and reduce	your tax if by the end of 2020:

- You were age 65 or older
- You were under age 65, you retired on permanent and total disability, and you received taxable disability income.

But you must also meet other tests. See instructions.

TIP	In most cases, the IRS	S can figure the credit for you. See instructions
Par	t I Check the Box	for Your Filing Status and Age
If yo	ur filing status is:	And by the end of 2020:

If your filing status is:	And by the end of 2020:	Check on	nly o	ne box:
Single, Head of household, or	<b>1</b> You were 65 or older		1	
Qualifying widow(er)	2 You were under 65 and you retired on permanent and total disabilit	у	2	
	<b>3</b> Both spouses were 65 or older		3	
	<b>4</b> Both spouses were under 65, but only one spouse retired on perm total disability		4	
Married filing jointly	<b>5</b> Both spouses were under 65, and both retired on permanent disability		5	
	6 One spouse was 65 or older, and the other spouse was under 65 on permanent and total disability		6	
	7 One spouse was 65 or older, and the other spouse was under 6 retired on permanent and total disability		7	
Married filing	8 You were 65 or older and you lived apart from your spouse for all of 20	020	8	
separately	<b>9</b> You were under 65, you retired on permanent and total disability lived apart from your spouse for all of 2020	•	9	
Did you check	Yes ── Skip Part II and complete Part III on the back.			

Did you check	Ye	es —	Skip Part II and complete Part III on the back
box 1, 3, 7, or 8?	N	o <b>—</b>	Complete Parts II and III.

#### Part II Statement of Permanent and Total Disability (Complete only if you checked box 2, 4, 5, 6, or 9 above.)

- You filed a physician's statement for this disability for 1983 or an earlier year, or you filed or got a statement for tax years after 1983 and your physician signed line B on the statement, and
  - 2 Due to your continued disabled condition, you were unable to engage in any substantial gainful activity
    - If you checked this box, you don't have to get another statement for 2020.
    - If you didn't check this box, have your physician complete the statement in the instructions. You must keep the statement for your records.

## Schedule R (Form 1040)

## **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.



OMB No. 1545-0074

Attachment

Sequence No. 16
Your social security number

Internal Revenue Service (99)

Name(s) shown on return

Department of the Treasury

Total schedules filed = 47,886

You may be able to take this credit and reduce your tax if by the end of 2020:

- You were age 65 or older
- or
- You were under age 65, you retired on **permanent and total** disability, and you received taxable disability income.

But you must also meet other tests. See instructions.

		,
	•	
7	7	
ľTI	Ρl	
V	- 1	

In most cases, the IRS can figure the credit for you. See instructions.

Part I Check the Bo	x for Your Filing Status and Age		
If your filing status is:	And by the end of 2020: Check of	nly o	ne box:
Single,	<b>1</b> You were 65 or older	1	
Plead of household, or Qualifying widow(er)  2 You were under 65 and you retired on permanent and total disability			
	3 Both spouses were 65 or older	3	
	· · · · · · · · · · · · · · · · · · ·	4	
Married filing jointly		_	
	·	_	
		_	
Married filing	8 You were 65 or older and you lived apart from your spouse for all of 2020	8	
separately			
Did you check	—— Yes ——➤ Skip Part II and complete Part III on the back.		
box 1, 3, 7, or 8?	No Complete Parts II and III.		
Part II Statement of	Permanent and Total Disability (Complete only if you checked box 2, 4, 5, 6, or 9 abo	ve.)	
statement for tax y	cian's statement for this disability for 1983 or an earlier year, or you filed or ears after 1983 and your physician signed line B on the statement, <b>and</b>		
2 Due to your contir in 2020, check this	nued disabled condition, you were unable to engage in any substantial gainful actions of the condition of th	ctivity . ►	
<ul> <li>If you checked the</li> </ul>	nis box, you don't have to get another statement for 2020.		
-	ck this box, have your physician complete the statement in the instructions. You ent for your records.	must	

Schedu	le R (Form 1040) 2020		Page 2
Part			·
10	If you checked (in Part I):       Enter:         Box 1, 2, 4, or 7	10	
11	Did you check 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.  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.  Box 5, add your taxable disability income to your spouse's taxable disability income. Enter the total.	11	1,100
12	For more details on what to include on line 11, see Figure Your Credit in the instructions.  If you completed line 11, enter the <b>smaller</b> of line 10 or line 11. <b>All others,</b> enter the amount from line 10	12	47,886
b	Enter the following pensions, annuities, or disability income that you (and your spouse if filing jointly) received in 2020.  Nontaxable part of social security benefits and nontaxable part of railroad retirement benefits treated as social security (see instructions)  Nontaxable veterans' pensions and any other pension, annuity, or disability benefit that is excluded from income under any other provision of law (see instructions)		
14	taxable, they <b>must</b> 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		
15 16	If you checked (in Part I): Enter:  Box 1 or 2		
17 18	-0	18	46,254
19 20	Subtract line 18 from line 12. If zero or less, <b>stop</b> ; you <b>can't</b> take the credit. Otherwise, go to line 20	19 20	46,679
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 6 (check box c and enter "Sch R" on the line next to that box)	00	AE 077
	next to that box)	22	45 677

Schedule R (Form 1040) 2020

<sup>\*</sup> Data not shown because of the small number of sample returns on which it is based.

Schedu	le R (Form 1040) 2020		Page <b>2</b>
Part	III Figure Your Credit		
10	If you checked (in Part I):       Enter:         Box 1, 2, 4, or 7	10	
11	Did you check box 2, 4, 5, 6, or 9 in Part I?  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.  Box 5, add your taxable disability income to your spouse's taxable disability income. Enter the total.	11	10,258
TIP 12	For more details on what to include on line 11, see Figure Your Credit in the instructions.  If you completed line 11, enter the <b>smaller</b> of line 10 or line 11. <b>All others</b> , enter the amount from line 10	12	240,433
13	Enter the following pensions, annuities, or disability income that you (and your spouse if filing jointly) received in 2020.	1,2	240,400
а	Nontaxable part of social security benefits and nontaxable part of railroad retirement benefits treated as social security (see instructions)  13a 13,136		
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 taxable, they <b>must</b> be included here to figure your credit.) If you didn't receive any of the types of nontaxable income listed on line 13a or 13b, enter -0- on line 13c		
14	Enter the amount from Form 1040 or 1040-SR, line 11		
15	If you checked (in Part I):     Enter:       Box 1 or 2		
16	Subtract line 15 from line 14. If zero or less, enter -0		
17 18	Enter one-half of line 16	18	224,459
19	Subtract line 18 from line 12. If zero or less, <b>stop</b> ; you <b>can't</b> take the credit. Otherwise, go to line 20	19	50,530
20 21	Multiply line 19 by 15% (0.15)	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 6 (check box <b>c</b> and enter "Sch R" on the line next to that box)	22	4,265

Schedule R (Form 1040) 2020

<sup>\*</sup> Data not shown because of the small number of sample returns on which it is based.

## **SCHEDULE SE** (Form 1040)

Department of the Treasury Internal Revenue Service (99)

## **Self-Employment Tax**

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

OMB No. 1545-0074 Attachment Sequence No. 17

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

Total schedules filed = 20,414,127

Social security number of person with self-employment income

Fair	Seil-Employment Tax		
	If your only income subject to self-employment tax is <b>church employee income</b> , see instructions for home definition of church employee income.	w to re	port your income
A	If you are a minister, member of a religious order, or Christian Science practitioner <b>and</b> you filed Form	4361	but you had
^	\$400 or more of <b>other</b> 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.		_
	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065),		
	box 14, code A	1a	559,436
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 (	22,103
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	20,044,714
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	20,371,376
	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, <b>stop</b> ; you don't owe self-employment tax. <b>Exception</b> : If		20 220 070
_	less than \$400 and you had <b>church employee income</b> , enter -0- and continue	4c	20,338,979
5a	Enter your <b>church employee income</b> from Form W-2. See instructions for		
<b>L</b>	definition of church employee income	Eh	
ь 6	Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0	5b 6	20,352,607
			20,332,607
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 2020	7	137,700
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2)		107,700
oa	and railroad retirement (tier 1) compensation. If \$137,700 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 7,344		
С	Wages subject to social security tax from Form 8919, line 10 8c 6,429		
d	Add lines 8a, 8b, and 8c	8d	8,007,149
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 <b>smaller</b> of line 6 or line 9 by 12.4% (0.124)	10	19,700,289
11	Multiply line 6 by 2.9% (0.029)	11	20,352,607
12	Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4	12	20,352,607
13	Deduction for one-half of self-employment tax.		
	Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040),		
	line 14		
Part			
	Optional Method. You may use this method only if (a) your gross farm income¹ wasn't more than		
	0, <b>or (b)</b> your net farm profits² were less than \$6,107.	44	5.640
14	Maximum income for optional methods	14	5,640
15	Enter the <b>smaller</b> of: two-thirds (2/3) of gross farm income¹ (not less than zero) <b>or</b> \$5,640. Also, include this amount on line 4b above	15	11,737
Namfa		15	11,737
	<b>Irm Optional Method.</b> You may use this method <b>only</b> if <b>(a)</b> your net nonfarm profits³ were less than \$6,107 so less than 72.189% of your gross nonfarm income,⁴ <b>and (b)</b> you had net earnings from self-employment		
	east \$400 in 2 of the prior 3 years. <b>Caution:</b> You may use this method no more than five times.		
16	Subtract line 15 from line 14	16	
17	Enter the <b>smaller</b> of: two-thirds (²/₃) of gross nonfarm income⁴ (not less than zero) <b>or</b> the amount on	-	
• •	line 16. Also, include this amount on line 4b above	17	12,579
<sup>1</sup> From	Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.		
<sup>2</sup> From	Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A—minus the amount <sup>4</sup> From Sch. C, line 7; and Sch. K-1 (Form 106 yould have entered on line 1b had you not used the optional method.		
,			

### SCHEDULE SE (Form 1040)

Department of the Treasury Internal Revenue Service (99)

## **Self-Employment Tax**

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

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

OMB No. 1545-0074

2020
Attachment Sequence No. 17

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

Total schedules filed = 20,414,127

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

Part	Self-Employment Tax		
	If your only income subject to self-employment tax is <b>church employee income</b> , see instructions for how e definition of church employee income.	ν to re	eport your income
4	If you are a minister, member of a religious order, or Christian Science practitioner <b>and</b> you filed Form \$400 or more of <b>other</b> net earnings from self-employment, check here and continue with Part I		
Skip lii	nes 1a and 1b if you use the farm optional method in Part II. See instructions.		
1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1a	12,348,139
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	( <b>227,785</b> )
Skip lii	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	674,798,642
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 . <b>Note:</b> If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	4a	634,160,186
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, <b>stop</b> ; you don't owe self-employment tax. <b>Exception</b> : If less than \$400 and you had <b>church employee income</b> , enter -0- and continue	4c	637,003,619
5a	Enter your <b>church employee income</b> 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	637,700,617
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 2020	7	137,700
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 \$137,700 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 151,176		
С	Wages subject to social security tax from Form 8919, line 10 8c 78,857		
d	Add lines 8a, 8b, and 8c	8d	358,014,706
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 <b>smaller</b> of line 6 or line 9 by 12.4% (0.124)	10	48,081,498
11	Multiply line 6 by 2.9% (0.029)	11	18,493,275
12	Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4	12	66,574,852
13	Deduction for one-half of self-employment tax.		
	Multiply line 12 by 50% (0.50). Enter here and on <b>Schedule 1 (Form 1040),</b> line 14		
Part			
	Optional Method. You may use this method only if (a) your gross farm income¹ wasn't more than		
. ,	o, or (b) your net farm profits² were less than \$6,107.		F.C.4.0
14	Maximum income for optional methods	14	5,640
15	Enter the <b>smaller</b> of: two-thirds (2/3) of gross farm income¹ (not less than zero) <b>or</b> \$5,640. Also, include this amount on line 4b above	15	64,952
	rm Optional Method. You may use this method only if (a) your net nonfarm profits³ were less than \$6,107		
	so less than 72.189% of your gross nonfarm income, and (b) you had net earnings from self-employment ast \$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 <b>smaller</b> of: two-thirds (2/3) of gross nonfarm income <sup>4</sup> (not less than zero) <b>or</b> the amount on line 16. Also, include this amount on line 4b above	17	52,438
	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 you w	Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A—minus the amount <sup>4</sup> From Sch. C, line 7; and Sch. K-1 (Form 106 ould have entered on line 1b had you not used the optional method.	5), box	14, code C.

Sched	ule SE (Form 1040) 2020 Attachment Sequ	uence No. <b>17</b>	Page <b>2</b>
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, 20	020 <b>18</b>	3,019,055
19	If line 18 is more than zero, multiply line 18 by 92.35% (0.9235); otherwise, enter the amount from	om line 18 <b>19</b>	3,019,055
20	Enter the portion of lines 15 and 17 that can be attributed to March 27, 2020, through Dece	ember 31,	
	2020	20	6,249
21	Combine lines 19 and 20	21	3,024,077
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, 2	2020 . <b>22</b>	3,159
23	Multiply line 22 by 92.35% (0.9235)	23	3,159
24	Add lines 21 and 23	24	3,027,096
25	Enter the smaller of line 9 or line 24	25	2,901,376
26	Multiply line 25 by 6.2% (0.062). Enter here and see the instructions for line 12e of Schedul	e 3 (Form	
	1040)	26	2,899,053

Schedule SE (Form 1040) 2020

Schedu	le SE (Form 1040) 2020 Attachment Sequence No. 17	7	Page <b>2</b>
Part	III 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	101,051,628
19	If line 18 is more than zero, multiply line 18 by 92.35% (0.9235); otherwise, enter the amount from line 18	19	93,321,195
20	Enter the portion of lines 15 and 17 that can be attributed to March 27, 2020, through December 31,		
	2020	20	18,434
21	Combine lines 19 and 20	21	93,339,629
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	17,468
23	Multiply line 22 by 92.35% (0.9235)	23	16,132
24	Add lines 21 and 23	24	93,355,761
25	Enter the smaller of line 9 or line 24	25	60,269,657
26	Multiply line 25 by 6.2% (0.062). Enter here and see the instructions for line 12e of Schedule 3 (Form		_
	1040)	26	3,736,677
		chedul	e SE (Form 1040) 2020

## SCHEDULE 8812 (Form 1040)

## **Additional Child Tax Credit**

1040 1040-SR 1040-NR ... 8812 OMB No. 1545-0074

2020

Attachment Sequence No. **47** 

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

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

Name(s) shown on return

Total schedules filed = 19,305,957

Your social security number

Part	All Filers		
	on: If you file Form 2555, <b>stop here;</b> you cannot claim the additional child tax credit.		
1	If you are required to use the worksheet in Pub. 972, enter the amount from line 10 of the Child Tax Credit and Credit for Other Dependents Worksheet in the publication. Otherwise, enter the amount from line 8 of your Child Tax Credit and Credit for Other Dependents Worksheet. (See the instructions for Forms 1040 and 1040-SR, line 19, or the instructions for Form 1040-NR, line 19.)	1 2	19,304,130 12,814,856
2	Enter the amount from line 19 of your Form 1040, Form 1040-SR, or Form 1040-NR		
3 4	Subtract line 2 from line 1. If zero, <b>stop here;</b> you cannot claim this credit	3	19,254,289
4	Enter the result. If zero, <b>stop here;</b> you cannot claim this credit	4	19,238,437
	TIP: The number of children you use for this line is the same as the number of children you used for line 1 of the Child Tax Credit and Credit for Other Dependents Worksheet.		
5	Enter the <b>smaller</b> of line 3 or line 4	5	19,192,936
6a	Earned income (see instructions)		
b	Nontaxable combat pay (see instructions)		
7	Is the amount on line 6a more than \$2,500?		
	No. Leave line 7 blank and enter -0- on line 8.		
8	Yes. Subtract \$2,500 from the amount on line 6a. Enter the result	8	40 420 999
o	Next. On line 4, is the amount \$4,200 or more?	o	19,130,888
	No. If line 8 is zero, stop here; you cannot claim this credit. Otherwise, skip Part II and enter the smaller		
	of line 5 or line 8 on line 15.		
	☐ <b>Yes.</b> If line 8 is equal to or more than line 5, skip Part II and enter the amount from line 5 on line 15. Otherwise, go to line 9.		
Part	II Certain Filers Who Have Three or More Qualifying Children		
9	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		
10	Enter the total of the amounts from Schedule 1 (Form 1040), line 14, and Schedule 2 (Form 1040), line 5, plus any taxes that you identified using code "UT" and entered on Schedule 2 (Form 1040), line 8		
11	Add lines 9 and 10		
12	1040 and Enter the total of the amounts from Form 1040 or 1040-SR, line 27,		
	1040-SR filers: and Schedule 3 (Form 1040), line 10.		
	<b>1040-NR filers:</b> Enter the amount from Schedule 3 (Form 1040), line 10.		
13	Subtract line 12 from line 11. If zero or less, enter -0	13	277,569
14	Enter the larger of line 8 or line 13	14	1,829,312
Dowl	Next, enter the smaller of line 5 or line 14 on line 15.		
Part		1.5	40.000.00
15	This is your additional child tax credit	15	19,096,529
	1040 1040-SR 1040-NR	Forn Forn	this amount on 1040, line 28; 1040-SR, line 28; or 1040-NR, line 28.

## SCHEDULE 8812 (Form 1040)

## **Additional Child Tax Credit**

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

8812

Department of the Treasury Internal Revenue Service (99)

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Schedule8812 for instructions and the latest information.

Attachment

Name(s) shown on return

Sequence No. 47 Your social security number

	Total schedules filed = 19,305,957				
Part	All Filers				
Cautio	on: If you file Form 2555, stop here; you cannot claim the additional child tax credi	t.			
1 2	If you are required to use the worksheet in Pub. 972, enter the amount from line 10 of and Credit for Other Dependents Worksheet in the publication. Otherwise, enter the amount Child Tax Credit and Credit for Other Dependents Worksheet. (See the instructions for SR, line 19, or the instructions for Form 1040-NR, line 19.)	ount fr Form	rom line 8 of yons 1040 and 104	ur 0- . <u>1</u>	71,981,146 20,215,612
3	Subtract line 2 from line 1. If zero, <b>stop here</b> ; you cannot claim this credit			. 3	51,766,896
4	Number of qualifying children under 17 with the required social security number:  Enter the result. If zero, <b>stop here</b> ; you cannot claim this credit			. 4	49,187,508
5	Enter the <b>smaller</b> of line 3 or line 4			. 5	41,146,379
6a	Earned income (see instructions)	6a	554,055,051		
ь 7	Nontaxable combat pay (see instructions)	7	506,127,830		
8	Multiply the amount on line 7 by 15% (0.15) and enter the result			. 8	75,919,757
	<ul> <li>Next. On line 4, is the amount \$4,200 or more?</li> <li>No. If line 8 is zero, stop here; you cannot claim this credit. Otherwise, skip Part of line 5 or line 8 on line 15.</li> <li>Yes. If line 8 is equal to or more than line 5, skip Part II and enter the amount Otherwise, go to line 9.</li> </ul>				
Part	Certain Filers Who Have Three or More Qualifying Children				
9	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.	9	1,914,260		
10	Enter the total of the amounts from Schedule 1 (Form 1040), line 14, and Schedule 2 (Form 1040), line 5, plus any taxes that you identified using code "UT" and entered on Schedule 2 (Form 1040), line 8	10	599,482		
11	Add lines 9 and 10	11	2,513,742		
12	1040 and Enter the total of the amounts from Form 1040 or 1040-SR, line 27, 1040-SR filers: and Schedule 3 (Form 1040), line 10.  1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 10.	12	8,158,614		
13	Subtract line 12 from line 11. If zero or less, enter -0			. 13	448,705
14	Enter the <b>larger</b> of line 8 or line 13			. 14	4,905,186
	Next, enter the smaller of line 5 or line 14 on line 15.				, , , , , , , , , , , , , , , , , , , ,
Part	III Additional Child Tax Credit				
15	This is your additional child tax credit			. 15	33,630,972
			1040 1040-SF 1040-NF	Forn Forn Forn	r this amount on n 1040, line 28; n 1040-SR, line 28; or n 1040-NR, line 28.

Form <b>965-A</b>	
(Rev. January 2020)	
Department of the Treasury	

## **Individual Report of Net 965 Tax Liability**

Depart	January 2020) tment of the Treasury				► Go t	o www	v.irs.gov/Form965A	for instructions ar	nd the latest info	ormation.			OMB No. 1545-007	74
_	al Revenue Service eck this box if this is an	amondo	nd ropor	+										
	of taxpayer with a net 965 tax		eu repor		Forms F						Identifying nur		Taxable year of reporting	
Par	Report of Net	965 Ta	ax Liab	ility an	d Electi	ion To	Pay in Installr	nents						
	(a) Year of Section 965(a) Inclusion, Liability Assumed or Liability Triggering Event (see instructions)		9	(b) r's Net Ta with all 65 amour e instructi			Taxpayer's N witi 965 ar	c) et Tax Liability nout nounts rructions)	Net 9 (subtract colu	(d) 65 Tax Lial ımn (c) fron		Defer	(e) oration Shareholder Total red Net 965 Tax Liability al from Part III, column (g), see instructions)	
1														1
2														2
3														3
_4														4
5														5
6_														6
_ 7														7
_8_								T						8
	Net 965 Tax Liabilit eligible for installment payme (subtract column (e) from co see instructions)	ent election	Insta n Ele	(g) Illment ction ade No	to b	Net 965 be paid i nn (g) is	(h) Tax Liability in full for Year 1 "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), Trans 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		ount o	f Net 9	65 Tax	Liabilit	y Paid	d by the Taxpa	<b>yer</b> (see instruct	ions)	1				
	(a) Year of Section 965(a) Inclusion, Liability Assumed or Triggering Event	,		<b>(b)</b> or Year 1			(c) Paid for Year 2		<b>d)</b> r Year 3		<b>(e)</b> Paid for Year 4		<b>(f)</b> Paid for Year 5	
1														1
2														2
3			-											3
4														4
5														5
_ 6														6
7_														7
Ω	I	- 1								1				Ω

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

Cat. No. 71277H

Form **965-A** (Rev. 1-2020)

(Rev. o Depart Interna	965-A January 2020) tment of the Treasury al Revenue Service eck this box if this is an	amended	d report			idual Report			_			OMB No. 1545-007	4
	of taxpayer with a net 965 tax			T-4-11	Farmer Ellerd	_ 24.544				Identifying num	nber	Taxable year of reporting	
					Forms Filed								
Par		t 965 Tax	k Liabili	-	d Election	To Pay in Installr							
	(a) Year of Section 965(a) Inclusion, Liability Assumed or Liability Triggering Event (see instructions)	i,	965	(b) s Net Ta: with all s amoun nstruction	ts	Taxpayer's N wit 965 ar	c) et Tax Liability hout mounts tructions)	Net 9 (subtract colu	(d) 65 Tax Liab mn (c) from		Deferr	(e) pration Shareholder Total ed Net 965 Tax Liability al from Part III, column (g), see instructions)	
1_													1
2													2
3_													3
4													4
5													5
													7
8													8
	Net 965 Tax Liabilitieligible for installment payme (subtract column (e) from	ent election	Installn Electi Mad Yes	nent ion	to be pai (if column (g)	(h) 65 Tax Liability d in full for Year 1 is "No," enter amount n column (f))	(i) Net 965 Tax to be paid in ir (if column (g) is "Yes from column (f) and	nstallments s," enter amount	Transfe	(j) Net 965 Tax Liab erred (Out), Trans equent Adjustme (see instruction	sferred In, ents, if any	(k) Tax Identification Number of buyer/transferee or seller/transferor	
1_													1
2													2
3													3
<u>4</u> 5													5
6													6
7													7
8													8
Par	t II Record of Am	nount of	Net 96	5 Tax	Liability Pa	aid by the Taxpa	yer (see instruct	ions)	ı		-		
	(a) Year of Section 965(a) Inclusion, Liability Assumed or Triggering Event	i,	(b) Paid for			(c) Paid for Year 2		<b>d)</b> r Year 3		<b>(e)</b> Paid for Year 4		<b>(f)</b> Paid for Year 5	
1													1
2													2
3													3
4_													4
5													5
6													6
7		+											7
8 For B	rivacy Act and Paperwor	k Doducti	on Act N	otico -	oo the series	ata inatruationa		0-4	lo. 71277H			Form <b>965-A</b> (Rev.	8

orm 965-A (Rev. 1-2020)	Page <b>2</b>
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Part II	Record of Amount of	Net 965 Tax Liability Paid b	y the Taxpayer (continued)			
	<b>(g)</b> Paid for Year 6	<b>(h)</b> Paid for Year 7	(i) Paid for Year 8	(j) Net 965 Tax Liability Remaining Unpaid (see instructions)	<b>(k)</b> Net 965 Tax Liability Paid for the Reporting Year	
1						1
2						2
3						3
4						4
5						5
6						6
7						7
8						8
Totals				6,708	4,226	
Part III		holder: Report of Calculati ch Net 965 Tax Liability	on of Net 965 Tax Liability	Related to 965 Amounts Allo	cated From an S Corporation	n and

	Year of 965(a) Inclusion	(a) S Corporation Name	(b) S Corporation Tax Identification Number	(c) Taxpayer's Net Tax Liability with only 965 amounts from this S Corporation (see instructions)	(d) Taxpayer's Net Tax Liability without 965 amounts (see instructions)	(e) Net 965 Tax Liability related to 965 amounts from this S Corporation (subtract column (d) from column (c))	Def Elec Ma	erral etion ade	(g) Deferred Net 965 Tax Liabili (if column (f) is "Yes," ente amount from column (e))
$\dashv$				(See Ilistructions)		column (a) from column (c))	Yes	No	
1									
1	2017								
$\perp$									
ota	l		<u> </u>	<u> </u>	<u>,</u>	<u> </u>		<b>•</b>	1,024
2	2018								
_	2010								
ı									
ota	l							<b>•</b>	65
3	2019								
_								1	
ota	ı							•	*

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

Form 9	65-A (Rev. 1-		Not 065 Toy Link	ility Doid by	the Taxpayer (contin	a							Page 2
rai		(g) Paid for Year 6	(h) Paid for Yea		(i) Paid for Year 8	ueu)	(j) Net 965 Tax Liability F (see instruc				t 965 T	k) ax Liability Reporting Year	
1													1
2													2
3													3
4													4
5													5
7													7
8													8
	alo.			1			2.	757,020				329,014	
Tota Part	∭ s			f Calculation	n of Net 965 Tax Lia	ability I		•	cated	Fror	n an	· · · · · · · · · · · · · · · · · · ·	n and
		ection To Defer Sud			(-)			(-)			f)		
	Year of 965(a) Inclusion	(a) S Corporati	on Name	(b) S Corporation Tax Identificatio Number		w	(d) ayer's Net Tax Liability thout 965 amounts (see instructions)	(e) Net 965 Tax Lia related to 965 amou this S Corporation ( column (d) from col	ints from subtract	Def Elec	erral etion ade No	(g) Deferred Net 965 Tax (if column (f) is "Yes. amount from colum	," enter
1	2017					+							
Tota	al										<b></b>	814,563	
										Ė		,	
2	2018												
-	2010												
Tota	al				· · · · · · · · · · · · · · · · · · ·	. <u></u>					<b>•</b>	6,944	
3	2019					+							
Tota	al										<b>•</b>	*	
Tota	al	wn because of the sm	nall number of sam								<b>&gt;</b>	* Form <b>965-A</b> (Rev	

Form 965-A (Rev. 1-2020) Page **3** 

	(a) Election or Transfer Year	(b) S Corporation N	lame	(c) S Corporation Tax Identification Number	(d) Beginning Deferred Net 965 Tax Liability (see instructions)	
1						
2						
3						
4						
5						
3						
7						
В						
)						
	(e) Reserved for Future Use	(f) Net 965 Tax Liability Triggered (see instructions)	(g) Deferred 965 Net Tax Liability Transferred (Out) or Transferred In by Agreement, if any (see instructions)	(h) Tax Identification Number of Transferee or Transferor	(i) Deferred Net Tax Liability at the end of this Reporting Year (add columns (d), (e), (f), and (g)) (see instructions)	
		(	)			
2		(	)			
3		(	)			
1		(	)			
5		(	)			
6		(	)			
		(	)			
		(	)			
)		(	)			

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

Form **965-A** (Rev. 1-2020)

	65-A (Rev. 1-2020)						Page 3
Part	V Annual Report (required ever	ort of Deferre ery year until th	d Net 965 Tax Liability Relate ne liability is fully paid)	d to 965 Amounts Allocated Fr	om S Corporations		
	(a) Election or Transfer Year		<b>(b)</b> S Corporation Nam	іе	(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				T			10
	(e) Reserved for Future Use		(f) Net 965 Tax Liability Triggered (see instructions)	(g) Deferred 965 Net Tax Liability Transferred (Out) or Transferred In by Agreement, if any (see instructions)	(h) Tax Identification Number of Transferee or Transferor	(i) Deferred Net Tax Liability at the end of this Reporting Year (add columns (d), (e), (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	ıl					847,550	
If mor	e lines are needed fo	r any Part on th	is form, attach additional sheets.		·		
						Form <b>965-A</b> (Re	v. 1-2020)

Form **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

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

Name shown on return

Total Forms Filed = 98,565

Sequence No. 94
Identifying number

Part	General Information (see instructions)		
1	Amount excluded is due to (check applicable box(es)):		
а	Discharge of indebtedness in a title 11 case		
b	Discharge of indebtedness to the extent insolvent (not in a title 11 case)		
	Discharge of qualified farm indebtedness		
С			
d	Discharge of qualified real property business indebtedness		
е	Discharge of qualified principal residence indebtedness (Caution: See instructions before checking discharged ofter 2017)		
	was discharged after 2017.)		_
2	Total amount of discharged indebtedness excluded from gross income		98,565
3	Do you elect to treat all real property described in section 1221(a)(1), relating to property held for		
	customers in the ordinary course of a trade or business, as if it were depreciable property?		
Part	Reduction of Tax Attributes. You must attach a description of any transactions res basis under section 1017. See Regulations section 1.1017-1 for basis reduction ordering required partnership consent statements. (For additional information, see the instruction	g rules	s, and, if applicable,
Enter	amount excluded from gross income:		
4	For a discharge of qualified real property business indebtedness applied to reduce the basis of		
	depreciable real property	4	1,806
5	That you elect under section 108(b)(5) to apply first to reduce the basis (under section 1017) of		-, <del>-</del>
	depreciable property	5	*
6	Applied to reduce any net operating loss that occurred in the tax year of the discharge or carried		
	over to the tax year of the discharge	6	256
	,		
7	Applied to reduce any general business credit carryover to or from the tax year of the discharge .	7	*
8	Applied to reduce any minimum tax credit as of the beginning of the tax year immediately after the		
Ū	tax year of the discharge	8	•
•	Applied to reduce any net capital loss for the tax year of the discharge, including any capital loss	-	
9	carryovers to the tax year of the discharge		••
10a		9	98
iva	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	40-	
h		10a	20,267
b	Applied to reduce the basis of your principal residence. Enter amount here ONLY if line 1e is checked	40.	*
		10b	
11	For a discharge of qualified farm indebtedness applied to reduce the basis of:		
а	Depreciable property used or held for use in a trade or business or for the production of income if		
	not reduced on line 5	11a	*
b	Land used or held for use in a trade or business of farming	11b	*
С	Other property used or held for use in a trade or business or for the production of income	11c	*
12	Applied to reduce any passive activity loss and credit carryovers from the tax year of the discharge	12	*
13	Applied to reduce any foreign tax credit carryover to or from the tax year of the discharge	13	0
Part	Consent of Corporation to Adjustment of Basis of Its Property Under Section 10	32(a)(:	2)
	<u> </u>		<u>,                                      </u>
		_	.,
Under	section 1081(b), the corporation named above has excluded \$	fro	m its gross income
tor the	tax year beginning and ending that section, the corporation consents to have the basis of its property adjusted in accordance with		
Under	that section, the corporation consents to have the basis of its property adjusted in accordance with	the re	gulations prescribed
under	section 1082(a)(2) in effect at the time of filing its income tax return for that year. The corporation is or	ganize	ed under the laws
of	··································		
	(State of incorporation)		
Note:	You must attach a description of the transactions resulting in the nonrecognition of gain ur	nder s	ection 1081.

Cat. No. 17066E

For Paperwork Reduction Act Notice, see separate instructions.

Form **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** 

Name shown on return Identifying number Total Forms Filed = 98.565 Part I **General Information** (see instructions) Amount excluded is due to (check applicable box(es)): 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 281.681 5 That you elect under section 108(b)(5) to apply first to reduce the basis (under section 1017) of 6 Applied to reduce any net operating loss that occurred in the tax year of the discharge or carried 6 174,765 7 Applied to reduce any general business credit carryover to or from the tax year of the discharge . Applied to reduce any minimum tax credit as of the beginning of the tax year immediately after the Applied to reduce any net capital loss for the tax year of the discharge, including any capital loss 9 53,427 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 201,939 Applied to reduce the basis of your principal residence. Enter amount here ONLY if line 1e is 348,423 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 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 \_\_\_\_\_. (State of incorporation)

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 17066E

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

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)

Department of the Treasury Internal Revenue Service (99)

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

Form **2106** (2020)

Cat. No. 11700N

OMB No. 1545-0074

Your name Occupation in which you incurred expenses Total Forms Filed =

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

384,704

Sequence No. 129 Social security number

Part I **Employee Business Expenses and Reimbursements** Column A Column B Step 1 Enter Your Expenses Other Than Meals Meals 205,493 1 Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.) . . . 1 2 Parking fees, tolls, and transportation, including train, bus, etc., that didn't involve 2 104,763 3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. **Don't** include meals . . . . . . . . 3 81,195 247,533 4 Business expenses not included on lines 1 through 3. Don't include meals . . . . 4 144.831 **5** Meals expenses (see instructions) 5 6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5 . . . . . . . . . . . . . . . . 6 378,394 Note: If you weren't reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8. Step 2 Enter Reimbursements Received From Your Employer for Expenses Listed in Step 1 7 Enter reimbursements received from your employer that weren't reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 7 6,104 2,420 **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 376,765 144.531 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. 144,531 9 In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50% (0.50) 10 Add the amounts on line 9 of both columns and enter the total here. Also, enter the total on Schedule 1 (Form 1040), line 11. Employees with impairment-related work expenses, see the instructions for rules 383,075

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)

2020

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form2106 for instructions and the latest information.

Attachment Sequence No. 129

> 3,257,229 Form **2106** (2020)

Cat. No. 11700N

Your name Occupation in which you incurred expenses Social security number Total Forms Filed = 384,704 Part I **Employee Business Expenses and Reimbursements** Column A Column B **Step 1 Enter Your Expenses** Other Than Meals Meals 1,596,198 1 Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.) . . . 1 2 Parking fees, tolls, and transportation, including train, bus, etc., that didn't involve 211,473 2 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. **Don't** include meals . . . . . . . . . . . . . . . . . 3 171,875 1,102,491 4 Business expenses not included on lines 1 through 3. Don't include meals . . . . 4 368,379 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column 6 3,082,037 Note: If you weren't reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8. Step 2 Enter Reimbursements Received From Your Employer for Expenses Listed in Step 1 7 Enter reimbursements received from your employer that weren't reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 7 21,642 1,220 **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 3,065,771 367,165 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. 191,459 9 In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50% (0.50) 10 Add the amounts on line 9 of both columns and enter the total here. Also, enter the total on Schedule 1 (Form 1040), line 11. Employees with impairment-related work expenses, see the instructions for rules

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

Form 2106 (2020) Page **2** 

Part	II Vehicle Expenses									
Section A—General Information (You must complete this claiming vehicle expenses.)			ction if you are	(a) Vehi	(b) Vehicle 2					
11	Enter the date the vehicle was placed in service			11	/	/		/	/	
12	Total miles the vehicle was driven during 2020			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				16		miles			miles	
17	Other miles. Add lines 13 and 16 and subtract the	total	from line 12	17		miles			miles	
18	Was your vehicle available for personal use during	off-d	luty hours?				. [	Yes	☐ No	
19	Do you (or your spouse) have another vehicle avai	lable '	for personal use? .					Yes	☐ No	
20	Do you have evidence to support your deduction?							Yes	☐ No	
21	If "Yes," is the evidence written?							Yes	☐ No	
Secti	If "Yes," is the evidence written?	tions	for Part II to find ou	it whet	her to comp	lete this	section	n or Se	ection C.)	
22	Multiply line 13 by 57.5¢ (0.575). Enter the result h	ere a	nd on line 1				22	194,		
Secti	on C-Actual Expenses									
			(a) Vehic					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	Add lines 23, 24c, and 25	26								
27	Multiply line 26 by the percentage on line 14 .	27								
28	Depreciation (see instructions)	28								
29	Add lines 27 and 28. Enter total here and on line 1	29		13,	761					
Section	on D-Depreciation of Vehicles (Use this section	only	if you owned the ve	hicle a	nd are compl	eting Se	ction C	for the	vehicle.)	
			(a) Vehicle 1			(b) Vehicle 2				
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 <b>smaller</b> 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 (2020) Page 2 Part II **Vehicle Expenses** 

Section A—General Information (You must complete this section if you are claiming vehicle expenses.)					(a)	Vehicle 1	(b) Vehicle 2		
11	Enter the date the vehicle was placed in service .			11		/		/	/
12	Total miles the vehicle was driven during 2020			12		miles	,		miles
13				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				16		miles			miles
17	Other miles. Add lines 13 and 16 and subtract the			17		miles			miles
18	Was your vehicle available for personal use during							Yes	□ No
19	Do you (or your spouse) have another vehicle avail		=					Yes	□ No
20	Do you have evidence to support your deduction?		=					Yes	□ No
21								Yes	
	If "Yes," is the evidence written?	ione :	for Part II to find out	 what	horto c	omplete this	section		
22	Multiply line 13 by 57.5¢ (0.575). Enter the result h						22	1,483,	
	on C—Actual Expenses	ere ai	id on line 1				22	1,400,	045
Secu	on C—Actual Expenses		(a) Vehic	lo 1			<b>)</b> Vehic	Jo 2	
			(a) Verillo	ie i		,	J) Verilo	16 2	
23	Gasolino oil ropaire vohiolo incurance etc	23							
	Gasoline, oil, repairs, vehicle insurance, etc								
24a	Vehicle rentals	24a				-			
b	Inclusion amount (see instructions)	24b							
С	Subtract line 24b from line 24a	24c							
25	Value of employer-provided vehicle (applies only								
	if 100% of annual lease value was included on								
	Form W-2—see instructions)	25							
26	Add lines 23, 24c, and 25	26							
27	Multiply line 26 by the percentage on line 14 .	27							
28	Depreciation (see instructions)	28							
29	Add lines 27 and 28. Enter total here and on line 1	29		110,					
Section	on D—Depreciation of Vehicles (Use this section	only			nd are c				vehicle.)
			(a) Vehic	le 1		(I	) Vehic	le 2	
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					ı			
	instructions	36							
37	Multiply line 36 by the percentage on line 14 .	37							
38	Enter the <b>smaller</b> 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 <b>21</b>	<b>06</b> (2020)

	∐ VOID	☐ CORRECTED		
Name, address, and 2	ZIP code of RIC or REIT	OMB No. 1545-0123	Notice to Shareholder Long-Term Cap	
Total	Forms Filed = 3,301	2020	For calendar year 2020, control of the regulated investment or real estate investment	ompany (RIC) or the
			beginning	, 2020, and
		Form <b>2439</b>	ending	, 20
Identification number	of RIC or REIT	1a Total undistributed long	g-term capital gains	
		3,075		Copy A
Shareholder's identify	ring number	1b Unrecaptured section	1250 gain	Attach to
		0		Form 1120-RIC or Form 1120-REIT.
Shareholder's name,	address, and ZIP code	1c Section 1202 gain	1d Collectibles (28%) gain	
		0	0	For Instructions
		2 Tax paid by the RIC or	REIT on the box 1a gains	and Paperwork Reduction Act Notice, see back of
		3,065		Copies A and D.
Form <b>2439</b>	Cat. No. 11858E	www.irs.gov/Form243	39 Department of the Treasu	ry - Internal Revenue Service

	□ V	OID 🗆 CO	DRRECTED		
Name, address, and	ZIP code of RIC or REIT		OMB No. 1545-0123	Notice to Shareholder	
				Long-Term Cap	ital Gains
Total	Forms Filed =	3,301	2020	For calendar year 2020, of the regulated investment of real estate investmen	company (RIC) or the
				beginning	, 2020, and
			Form <b>2439</b>	ending	, 20
Identification numbe	r of RIC or REIT		1a Total undistributed long-	-term capital gains	
			9,325		Copy A
Shareholder's identif	fying number		1b Unrecaptured section 12	250 gain	Attach to Form 1120-RIC
			0		or Form 1120-REIT.
Shareholder's name,	, address, and ZIP code		1c Section 1202 gain	1d Collectibles (28%) gain	
			0	0	For Instructions
			2 Tax paid by the RIC or R	REIT on the box 1a gains	and Paperwork Reduction Act Notice, see back of
			1.998		Copies A and D.
Form <b>2439</b>	Cat. No. 11858E		www.irs.gov/Form2439	Department of the Treas	ury - Internal Revenue Service

Form **2441** 

#### **Child and Dependent Care Expenses**

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

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



OMB No. 1545-0074

Attachment Sequence No. 21 Your social security number

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

**Total Forms Filed =** 5,964,945

			child and dependent car tructions under "Married						
Par			ganizations Who Pro ore than two care prov				ete this par	t.	
1	(a) Care provide name	r's		(b) Address t. no., city, state, and ZIF	code)	(c)	Identifying num (SSN or EIN)	ber	(d) Amount paid (see instructions)
									5,779,675
		dene	Did you receive	No		→ Complet	•		
	ion: If the care n 1040), line 7a	was prov	vided in your home, you r			→ Complets. For details			
Par			d and Dependent Car						
2		about you	r qualifying person(s).	f you have more tha			·		ructions.  Qualified expenses you
	5,964,945 First	(a)	Qualifying person's name	Last	(b)	Qualifying pers security nur		incuri	red and paid in 2020 for the erson listed in column (a)
									5,273,333
									1,946,085
3			olumn (c) of line 2. <b>Don't</b> nore persons. If you com					3	5,143,630
4	Enter your ea	arned inc	come. See instructions					4	5,919,513
5			, enter your spouse's ea the instructions); <b>all othe</b>					5	3,732,708
6	Enter the <b>sm</b>	allest of	line 3, 4, or 5					6	5,096,206
7			n Form 1040, 1040-SR, c						
8	Enter on line	8 the dec	cimal amount shown belo	ow that applies to the	ne amou	unt on line 7.			
	If line 7			If line 7 is:					
	Over	But not over	Decimal amount is	_	ut not ver	Decimal amount is			
			.35	\$29,000-3		.27	<u>'</u>		
		—17,000 —17,000	.34	31,000-33	•	.26		8	5,964,94 <b>5</b> x .
	17,000	<b>—</b> 19,000	.33	33,000—35		.25			
	19,000	-21,000	.32	35,000-37	,000	.24			
	21,000	-23,000	.31	37,000—39	,000	.23			
	23,000	-25,000	.30	39,000-4	,000	.22			
		-27,000	.29	41,000-43		.21			
9	Multiply line	-	.28 decimal amount on lin		19 exp		20, see the		5 004 077
10	instructions			· · · · · · · · · · · · · · · · · · ·				9	5,094,277
10	in the instruc	tions .	er the amount from the C		10				
11			dependent care expens 1040), line 2					11	5,049,685

Form **2441** 

Department of the Treasury

#### **Child and Dependent Care Expenses**

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

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

1040 1040-SF 1040-NR

11

Cat. No. 11862M

2,826,870

Form **2441** (2020)

OMB No. 1545-0074

Sequence No. 21 Internal Revenue Service (99) latest information. Your social security number Name(s) shown on return Total Forms Filed = 5,964,945 You cannot claim a credit for child and dependent care expenses if your filing status is married filing separately unless you meet the requirements listed in the instructions under "Married Persons Filing Separately." If you meet these requirements, check this box. Persons or Organizations Who Provided the Care - You must complete this part. (If you have more than two care providers, see the instructions.) (a) Care provider's (b) Address (c) Identifying number (d) Amount paid 1 (number, street, apt. no., city, state, and ZIP code) (SSN or EIN) (see instructions) 30,507,920 Did you receive Complete only Part II below. dependent care benefits? Yes Complete Part III on the back next. Caution: If the care was provided in your home, you may owe employment taxes. For details, see the instructions for Schedule 2 (Form 1040), line 7a. Part II Credit for Child and Dependent Care Expenses Information about your qualifying person(s). If you have more than two qualifying persons, see the instructions. (c) Qualified expenses you 5,964,945 (b) Qualifying person's social (a) Qualifying person's name incurred and paid in 2020 for the First person listed in column (a) 19,732,314 7,325,532 Add the amounts in column (c) of line 2. Don't enter more than \$3,000 for one qualifying person 3 or \$6,000 for two or more persons. If you completed Part III, enter the amount from line 31 . . . 14,273,963 3 4 523,048,264 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 . . . . . 274.117.035 5 6 Enter the **smallest** of line 3, 4, or 5 . . . . . . . . . . . 6 13,916,620 7 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11 . 7 8 Enter on line 8 the decimal amount shown below that applies to the amount on line 7. If line 7 is: If line 7 is: **But not Decimal But not Decimal** Over over amount is Over over amount is \$0 - 15.000.35 \$29.000 - 31.000 .27 Χ. 8 15,000 - 17,000.34 31,000 - 33,000.26 17.000 - 19.00033.000 - 35.000.33 .25 19.000 - 21.000.32 35,000 - 37,000.24 21,000-23,000 31 37,000 - 39,00023 23,000-25,000 .30 39,000-41,000 .22 25,000-27,000 .29 41,000-43,000 .21 43,000 - No limit 27,000 - 29,000.28 Multiply line 6 by the decimal amount on line 8. If you paid 2019 expenses in 2020, see the 2,932,846 9 10 Tax liability limit. Enter the amount from the Credit Limit Worksheet 11 Credit for child and dependent care expenses. Enter the smaller of line 9 or line 10 here and

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

Form 2441 (2020) Page **2** 

Par	t III Dependent Care Benefits		
12	Enter the total amount of <b>dependent care benefits</b> you received in 2020. Amounts you received as an employee should be shown in box 10 of your Form(s) W-2. <b>Don't</b> 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	1,543,406
13	Enter the amount, if any, you carried over from 2019 and used in 2020 during the grace period. See instructions	1.0	
4.4		13	11,573 ( 169,141 )
	Enter the amount, if any, you forfeited or carried forward to 2021. See instructions	14 15	( 109,141 )
	Enter the total amount of <b>qualified expenses</b> incurred in 2020 for the	13	
	care of the <b>qualifying person(s)</b>		
17	Enter the <b>smaller</b> of line 15 or 16	-	
18	Enter your <b>earned income.</b> See instructions		
19	Enter the amount shown below that applies to you.		
	• If married filing jointly, enter your spouse's earned income (if you or your spouse was a student or was disabled, see the instructions for line 5).  19 3,732,708		
	If married filing separately, see instructions.		
	• All others, enter the amount from line 18.		
20 21	Enter the <b>smallest</b> of line 17, 18, or 19	-	
22	Is any amount on line 12 from your sole proprietorship or partnership?	-	
	No. Enter -0	00	
22	☐ Yes. Enter the amount here	22	2,567
	Deductible benefits. Enter the smallest of line 20, 21, or 22. Also, include this amount on the	-	
	appropriate line(s) of your return. See instructions	24	2,420
25	<b>Excluded benefits.</b> If you checked "No" on line 22, enter the smaller of line 20 or 21. Otherwise,		2,420
	subtract line 24 from the smaller of line 20 or line 21. If zero or less, enter -0	25	1,172,564
26	Taxable benefits. Subtract line 25 from line 23. If zero or less, enter -0 Also, include this amount		
	on Form 1040 or 1040-SR, line 1; or Form 1040-NR, line 1a. On the dotted line next to Form 1040 or 1040-SR, line 1; or Form 1040-NR, line 1a, enter "DCB"		
		26	500,223
	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	Add lines 24 and 25	28	1,174,968
29	Subtract line 28 from line 27. If zero or less, <b>stop.</b> You can't take the credit. <b>Exception.</b> If you paid 2019 expenses in 2020, see the instructions for line 9	29	
30	Complete line 2 on the front of this form. <b>Don't</b> include in column (c) any benefits shown on line		
	28 above. Then, add the amounts in column (c) and enter the total here	30	
31	Enter the <b>smaller</b> of line 29 or 30. Also, enter this amount on line 3 on the front of this form and		
	complete lines 4 through 11	31	5,143,630
			Form <b>2441</b> (2020)

Form **2441** (2020)

## 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 2441 (2020) Page 2 Part III Dependent Care Benefits 12 Enter the total amount of dependent care benefits you received in 2020. 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 4,681,809 13 Enter the amount, if any, you carried over from 2019 and used in 2020 during the grace period. 14,203 13 189,254 14 Enter the amount, if any, you forfeited or carried forward to 2021. See instructions . . . . . 14 15 16 Enter the total amount of qualified expenses incurred in 2020 for the care of the qualifying person(s) . . . . . . . . . . . . . . . . . . 16 9.813.379 **17** Enter the **smaller** of line 15 or 16. . . . . . . . . . . . . . 17 **18** Enter your **earned income.** See instructions . . . . . . . . 18 523,048,264 **19** Enter the amount shown below that applies to you. • If married filing jointly, enter your spouse's earned income (if you or your spouse was a student or was disabled, see the instructions for line 5). 19 274,117,035 • If married filing separately, see instructions. • All others, enter the amount from line 18. **20** 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) . . . 21 22 Is any amount on line 12 from your sole proprietorship or partnership? ■ No. Enter -0-. 22 7,582 23 **23** Subtract line 22 from line 15 . . . . . . . . . . . . . . . . . 24 Deductible benefits. Enter the smallest of line 20, 21, or 22. Also, include this amount on the 24 7,242 25 Excluded benefits. If you checked "No" on line 22, enter the smaller of line 20 or 21. Otherwise, subtract line 24 from the smaller of line 20 or line 21. If zero or less, enter -0- . . . . . . . . 25 3,680,142 26 Taxable benefits. Subtract line 25 from line 23. If zero or less, enter -0-. Also, include this amount on Form 1040 or 1040-SR, line 1; or Form 1040-NR, line 1a. On the dotted line next to Form 1040 26 819,036 To claim the child and dependent care credit, complete lines 27 through 31 below. 27 28 3,687,383 29 Subtract line 28 from line 27. If zero or less, stop. You can't take the credit. Exception. If you paid 29 30 Complete line 2 on the front of this form. Don't include in column (c) any benefits shown on line 28 above. Then, add the amounts in column (c) and enter the total here . . . . . . . . . . . . . . 30 31 Enter the smaller of line 29 or 30. Also, enter this amount on line 3 on the front of this form and 31 14,273,963

Form **3468** 

Department of the Treasury Internal Revenue Service (99) **Investment Credit** 

► Attach to your tax return.

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

OMB No. 1545-0155

2020
Attachment
Sequence No. 174

Name(s) shown on return

Total Forms Filed = 21,232

Identifying number

Part	Information Regarding the Election To Treat the Lessee as the Purchaser of Investment	ent C	redit Property
	are claiming the investment credit as a lessee based on a section 48(d) (as in effect on November 4, 199		
followi	ing information. If you acquired more than one property as a lessee, attach a statement showing the infor	matio	n below.
1	Name of lessor		
2	Address of lessor		
3	Description of property		
4		▶ \$	
Part	Advanced Energy Project Credit	l Qua	llifying
5	Qualifying advanced coal project credit (see instructions):		
а	Qualified investment in integrated gasification combined cycle property		
	placed in service during the tax year for projects described in section		
	48A(d)(3)(B)(i)		
b	Qualified investment in advanced coal-based generation technology property		
	placed in service during the tax year for projects described in section		
	48A(d)(3)(B)(ii)		
С	Qualified investment in advanced coal-based generation technology property		
	placed in service during the tax year for projects described in section		
	48A(d)(3)(B)(iii)		
d	Total. Add lines 5a, 5b, and 5c	5d	49
6	Qualifying gasification project credit (see instructions):		
а	Qualified investment in qualified gasification property placed in service during		
	the tax year for which credits were allocated or reallocated after October 3,		
	2008, and that includes equipment that separates and sequesters at least 75%		
	of the project's carbon dioxide emissions \$ × 30% (0.30) 6a		
b	Qualified investment in property other than in a above placed in service during		
	the tax year		
С	Total. Add lines 6a and 6b	6c	*
7	Qualifying advanced energy project credit (see instructions):		
	Qualified investment in advanced energy project property placed in service		
	during the tax year	7	1,214
_			
8	Reserved for future use	8	
9	Enter the applicable unused investment credit from cooperatives (see instructions)	9	68
10	Add lines 5d, 6c, 7, and 9. Report this amount on Form 3800, Part III, line 1a	10	2,449

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 12276E

Form **3468** (2020)

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

Form **3468** 

Investment Credit

OMB No. 1545-0155

2020

► Attach to your tax return.

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

Attachment Sequence No. **174** 

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

Total Forms Filed = 21,232

Identifying number

Part	Information Regarding the Election To Treat the Lessee as the Purchaser of Investment	ent C	redit Property
-	are claiming the investment credit as a lessee based on a section 48(d) (as in effect on November 4, 199	,	
follow	ing information. If you acquired more than one property as a lessee, attach a statement showing the infor	matio	n below.
1	Name of lessor		
2	Address of lessor		
3	Description of property		
4	Amount for which you were treated as having acquired the property	▶ \$	
Part		l Qua	llifying
	Advanced Energy Project Credit		
5	Qualifying advanced coal project credit (see instructions):		
а	Qualified investment in integrated gasification combined cycle property		
	placed in service during the tax year for projects described in section		
	48A(d)(3)(B)(i) · · · · · · · · \$ × 20% (0.20) <b>5a</b>		
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)   <b>5b</b>   Qualified investment in advanced coal-based generation technology property		
С	placed in service during the tax year for projects described in section		
	48A(d)(3)(B)(iii)		
d	Total. Add lines 5a, 5b, and 5c	5d	6
6	Qualifying gasification project credit (see instructions):	Ju	0
а	Qualified investment in qualified gasification property placed in service during		
а	the tax year for which credits were allocated or reallocated after October 3,		
	2008, and that includes equipment that separates and sequesters at least 75%		
	of the project's carbon dioxide emissions $$\times 30\% (0.30)$ <b>6a</b>		
b	Qualified investment in property other than in <b>a</b> above placed in service during	-	
	the tax year		
С	Total. Add lines 6a and 6b	6с	*
7	Qualifying advanced energy project credit (see instructions):		
	Qualified investment in advanced energy project property placed in service		
	during the tax year	7	19,004
8	Reserved for future use	8	
9	Enter the applicable unused investment credit from cooperatives (see instructions)	9	680
10	Add lines 5d, 6c, 7, and 9. Report this amount on Form 3800, Part III, line 1a	10	21,080
East Da	promucely Poduction Act Notice and congrets instructions		Tarm 3/68 (0000)

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 12276E

orm **3468** (2020

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

Form 3468 (2020) Page **2** 

Part	Rehabilitation Credit and Energy Credit		
11	Rehabilitation credit (see instructions for requirements that must be met):		
а	Check this box if you are electing under section 47(d)(5) to take your qualified rehabilitation		
	expenditures into account for the tax year in which paid (or, for self-rehabilitated property, when		
	capitalized). See instructions. Note: This election applies to the current tax year and to all later tax		
	years. You may not revoke this election without IRS consent		
b	Enter the dates on which the 24- or 60-month measuring period begins		
	and ends		
С	Enter the adjusted basis of the building as of the beginning date above (or the		
	first day of your holding period, if later)		
d	Enter the amount of the qualified rehabilitation expenditures incurred, or treated		
	as incurred, during the period on line 11b above		
	Enter the amount of qualified rehabilitation expenditures and multiply by the percentage shown:	44.	F.F.4
e	Pre-1936 buildings under the transition rule (see instructions) \$ × 10% (0.10)	11e	551
f q	Certified historic structures under the transition rule (see instructions) \$ × 20% (0.20)  Certified historic structures with expenditures paid or incurred after	11f	5,309
9	2017 and not under the transition rule (see instructions) \$ × 4% (0.04)	11g	427
	<b>Note:</b> This credit is allowed for a 5-year period beginning in the tax year that the qualified rehabilitated	119	721
	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)	12a	1,361
b	Basis of property using solar illumination or solar energy placed in service during the tax year that		
	is attributable to periods after December 31, 2005, and the construction of which began before		4.450
_	2020 (see instructions)	12b	4,456
С	Basis of property using solar illumination or solar energy placed in service during the tax year and the construction of which began in 2020 (see instructions) $$$ $$$ $$$ 26% (0.26)	10-	7.000
d	Basis of property using solar illumination or solar energy placed in service during the tax year and the	12c	7,663
u	construction of which began in 2021 (see instructions) \$ × 22% (0.22)	12d	
	Qualified fuel cell property (see instructions):		
е	Basis of property placed in service during the tax year that was acquired after December 31, 2005,		
	and before October 4, 2008, and the basis attributable to construction, reconstruction, or erection by		
	the taxpayer after December 31, 2005, and before October 4, 2008 $\$ $\times$ 30% (0.30)	12e	
f	Applicable kilowatt capacity of property on line 12e (see instructions) . ▶ × \$1,000	12f	
g	Enter the lesser 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, and the construction of which began before 2020 \$ × 30% (0.30)	12h	
i	Applicable kilowatt capacity of property on line 12h (see instructions) .   × \$3,000	12i	
j	Enter the lesser of line 12h or line 12i	12j	1
k		12k	
1	in 2020	12K	
ı m	Enter the lesser of line 12k or line 12l	12n	15
n	Basis of property placed in service during the tax year and the construction of which began		
••	in 2021	12n	
0	Applicable kilowatt capacity of property on line 12n (see instructions) · ► ×\$3,000	120	
р	Enter the lesser of line 12n or line 12o	12p	
•	Qualified microturbine property (see instructions):		
q	Basis of property placed in service during the tax year that was acquired after December 31, 2005,		
	and the basis attributable to construction, reconstruction, or erection by the taxpayer after		
	December 31, 2005	12q	
r	Kilowatt capacity of property on line 12q	12r	
s	Enter the lesser of line 12q or line 12r	12s	

Form 3468 (2020) Page **2** 

art	Rehabilitation Credit and Energy Credit		
11	Rehabilitation credit (see instructions for requirements that must be met):		
а	Check this box if you are electing under section 47(d)(5) to take your qualified rehabilitation		
	expenditures into account for the tax year in which paid (or, for self-rehabilitated property, when		
	capitalized). See instructions. Note: This election applies to the current tax year and to all later tax		
	years. You may not revoke this election without IRS consent		
b	Enter the dates on which the 24- or 60-month measuring period begins		
	and ends		
С	Enter the adjusted basis of the building as of the beginning date above (or the		
	first day of your holding period, if later)		
d	Enter the amount of the qualified rehabilitation expenditures incurred, or treated		
_	as incurred, during the period on line 11b above		
	Enter the amount of qualified rehabilitation expenditures and multiply by the percentage shown:		
е	Pre-1936 buildings under the transition rule (see instructions) \$ × 10% (0.10)	11e	5,406
f	Certified historic structures under the transition rule (see instructions) \$ × 20% (0.20)	11f	
g	Certified historic structures with expenditures paid or incurred after	111	203,083
9	2017 and not under the transition rule (see instructions) \$ × 4% (0.04)	110	16,405
	<b>Note:</b> This credit is allowed for a 5-year period beginning in the tax year that the qualified rehabilitated	11g	10,403
	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:		
a	Basis of property using geothermal energy placed in service during the tax year		
_	(see instructions)	12a	5,536
b	Basis of property using solar illumination or solar energy placed in service during the tax year that		· · · · · · · · · · · · · · · · · · ·
_	is attributable to periods after December 31, 2005, and the construction of which began before		
	2020 (see instructions)	12b	467,055
С	Basis of property using solar illumination or solar energy placed in service during the tax year and the		<u> </u>
	construction of which began in 2020 (see instructions) \$ × 26% (0.26)	12c	189,070
d	Basis of property using solar illumination or solar energy placed in service during the tax year and the		·
	construction of which began in 2021 (see instructions) \$ × 22% (0.22)	12d	
	Qualified fuel cell property (see instructions):		
е	Basis of property placed in service during the tax year that was acquired after December 31, 2005,		
	and before October 4, 2008, and the basis attributable to construction, reconstruction, or erection by		
	the taxpayer after December 31, 2005, and before October 4, 2008 $\$$ $\times$ 30% (0.30)	12e	
f	Applicable kilowatt capacity of property on line 12e (see instructions) . ▶ × \$1,000	12f	
g	Enter the lesser 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, and the construction of which began before 2020 \$ × 30% (0.30)	12h	
i	Applicable kilowatt capacity of property on line 12h (see instructions) . ► × \$3,000	12i	
j	Enter the lesser of line 12h or line 12i	12j	44
k	Basis of property placed in service during the tax year and the construction of which began		
	in 2020	12k	
ı	Applicable kilowatt capacity of property on line 12k (see instructions)	121	2.070
m	Enter the lesser of line 12k or line 12l	12m	3,979
n	Basis of property placed in service during the tax year and the construction of which began in 2021	10	
_	in 2021	12n	
0	Applicable kilowatt capacity of property on line 12n (see instructions) · ► × \$3,000	120	
р	Enter the lesser of line 12n or line 12o	12p	
	Qualified microturbine property (see instructions):		
q	Basis of property placed in service during the tax year that was acquired after December 31, 2005, and the basis attributable to construction, reconstruction, or erection by the taxpayer after		
		10~	
_	December 31, 2005	12q 12r	
r s	Kilowatt capacity of property on line 12q	12r 12s	
3	Entor the 100001 of line 124 of line 121	143	Form <b>3468</b> (2020)
			(4040)

Form 3468 (2020) Page **3** 

<b>Part</b>	Rehabilitation Credit and Energy Credit (continued)		
	Combined heat and power system property (see instructions):		
	Caution: You can't claim this credit if the electrical capacity of the property is more than 50		
	megawatts or has a mechanical energy capacity of more than 67,000 horsepower or an equivalent		
	combination of electrical and mechanical energy capabilities.		
t	Basis of property placed in service during the tax year that was acquired after October 3, 2008,		
	and the basis attributable to construction, reconstruction, or erection by the taxpayer after		
	October 3, 2008	12t	
u	If the electrical capacity of the property is measured in:		
	• Megawatts, divide 15 by the megawatt capacity. Enter 1.0 if the capacity is 15 megawatts or less.		
	• Horsepower, divide 20,000 by the horsepower. Enter 1.0 if the capacity is 20,000 horsepower or		
	less	12u	
v	Multiply line 12t by line 12u	12v	24
	Qualified small wind energy property (see instructions):		
w	Basis of property placed in service during the tax year that was acquired after October 3, 2008, and		
	before January 1, 2009, and the basis attributable to the construction, reconstruction, or erection by		
	the taxpayer after October 3, 2008, and before January 1, 2009 . $$$ $\times$ 30% (0.30)	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 December 31, 2008, and the construction of which began before		
	2020 · · · · · · · · · · · · · · · · · ·	12y	1
Z	Basis of property placed in service during the tax year and the construction of which began		
	in 2020	12z	16
aa	Basis of property placed in service during the tax year and the construction of which began		
	in 2021	12aa	
	Geothermal heat pump systems (see instructions):		
bb	Basis of property placed in service during the tax year that was acquired after October 3, 2008, and		
	the basis attributable to construction, reconstruction, or erection by the taxpayer after		
	October 3, 2008	12bb	8
	Qualified investment credit facility property (see instructions):		
cc	Basis of property the construction of which began before 2021 (other than wind facility		
	property and the construction of which began after 2016) placed in service during the		
	tax year	12cc	532
dd	Basis of wind facility property placed in service during the tax year and the construction of which		
	began during 2017	12dd	1
ee	Basis of wind facility property placed in service during the tax year and the construction of which		_
	began during 2018	12ee	5
Ħ	Basis of wind facility property placed in service during the tax year and the construction of which		
	began during 2019	12ff	4
gg	Basis of wind facility property placed in service during the tax year and the construction of which		
46	began during 2020	12gg	147
13	Enter the applicable unused investment credit from cooperatives (see instructions)	13	17
14	Add lines 11e, 11f, 11g, 12a, 12b, 12c, 12d, 12g, 12j, 12m, 12p, 12s, 12v, 12x, 12y, 12z, 12aa, 12bb, 12ca, 12dd, 12ca, 12ff, 12ca, 2nd, 12. Report this amount on Form 2000. Both III, line 4a.		19,789
	12cc, 12dd, 12ee, 12ff, 12gg, and 13. Report this amount on Form 3800, Part III, line 4a	14	19,789

Form **3468** (2020)

Form 3468 (2020) Page 3 Rehabilitation Credit and Energy Credit (continued) Part III Combined heat and power system property (see instructions): Caution: You can't claim this credit if the electrical capacity of the property is more than 50 megawatts or has a mechanical energy capacity of more than 67,000 horsepower or an equivalent combination of electrical and mechanical energy capabilities. Basis of property placed in service during the tax year that was acquired after October 3, 2008, and the basis attributable to construction, reconstruction, or erection by the taxpayer after 12t **u** If the electrical capacity of the property is measured in: Megawatts, divide 15 by the megawatt capacity. Enter 1.0 if the capacity is 15 megawatts or less. Horsepower, divide 20,000 by the horsepower. Enter 1.0 if the capacity is 20,000 horsepower or 12u 12v Qualified small wind energy property (see instructions): w Basis of property placed in service during the tax year that was acquired after October 3, 2008, and before January 1, 2009, and the basis attributable to the construction, reconstruction, or erection by the taxpayer after October 3, 2008, and before January 1, 2009 . \$ × 30% (0.30) 12w 12x Basis of property placed in service during the tax year that is attributable to periods after December 31, 2008, and the construction of which began 2,940  $\times 30\% (0.30)$ 12y z Basis of property placed in service during the tax year and the construction of which began 1,820 aa Basis of property placed in service during the tax year and the construction of which began 12aa Geothermal heat pump systems (see instructions): bb Basis of property placed in service during the tax year that was acquired after October 3, 2008, and the basis attributable to construction, reconstruction, or erection by the taxpayer after 12bb 117 Qualified investment credit facility property (see instructions): cc Basis of property the construction of which began before 2021 (other than wind facility property and the construction of which began after 2016) placed in service during the 12cc 38,245 dd Basis of wind facility property placed in service during the tax year and the construction of which 12dd 19 ee Basis of wind facility property placed in service during the tax year and the construction of which 40 12ee ff Basis of wind facility property placed in service during the tax year and the construction of which 12ff 194 gg Basis of wind facility property placed in service during the tax year and the construction of which 13,032 12gg Enter the applicable unused investment credit from cooperatives (see instructions) . . . . . . 194 13 13 Add lines 11e, 11f, 11g, 12a, 12b, 12c, 12d, 12g, 12j, 12m, 12p, 12s, 12v, 12x, 12y, 12z, 12aa, 12bb, 947,223 14 12cc, 12dd, 12ee, 12ff, 12gg, and 13. Report this amount on Form 3800, Part III, line 4a . . . . . . 14 947,223 Form **3468** (2020)

Department of the Treasury Internal Revenue Service (99)

#### **General Business Credit**

▶ Go to www.irs.gov/Form3800 for instructions and the latest information. ▶ You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return. OMB No. 1545-0895 Sequence No. **22** 

Name(s) shown on return

Total Forms Filed = 676,768 Identifying number

Part	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	93,641
2	Passive activity credits from line 2 of all Parts III with box B checked   2   48.592		
3	Enter the applicable passive activity credits allowed for 2020. See instructions	3	37,208
4	Carryforward of general business credit to 2020. Enter the amount from line 2 of Part III with box C		·
	checked. See instructions for statement to attach	4	73,586
	Check this box if the carryforward was changed or revised from the original reported amount		🕨 🗆
5	Carryback of general business credit from 2021. 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	190,194
Part		U	190, 194
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	598.842
8	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b; or the amount from the applicable line of your return		
	• Individuals. Enter the amount from Form 6251, line 11		
	• Corporations. Enter -0	8	24,029
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54		
9	Add lines 7 and 8	9	600.066
10a	Foreign tax credit		
b	Certain allowable credits (see instructions)		
С	Add lines 10a and 10b	10c	382,631
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	573.517
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0		
13	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See		
	instructions		
14	Tentative minimum tax:		
	• Individuals. Enter the amount from Form 6251, line 9		
	• Corporations. Enter -0		
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 52		
15	Enter the greater of line 13 or line 14	15	432.390
16	Subtract line 15 from line 11. If zero or less, enter -0-	16	544.411
17	Enter the <b>smaller</b> of line 6 or line 16	17	154,884
• •	<b>C corporations:</b> See the line 17 instructions if there has been an ownership change, acquisition, or	.,	,
	reorganization.		
For Pa	perwork Reduction Act Notice, see separate instructions. Cat. No. 12392F		Form <b>3800</b> (2020)

Form **3800** 

Department of the Treasury Internal Revenue Service (99)

#### **General Business Credit**

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

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

OMB No. 1545-0895

2020
Attachment
Sequence No. 22

Name(s) shown on return

Total Forms Filed = 676,768

Identifying number

Part	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	1,839,007
	Passive activity credits from line 2 of all Parts III with box B checked   2   159,351	-	1,000,007
	Enter the applicable passive activity credits allowed for 2020. See instructions	3	196,220
	Carryforward of general business credit to 2020. Enter the amount from line 2 of Part III with box C		100,220
	checked. See instructions for statement to attach	4	2 026 626
	Check this box if the carryforward was changed or revised from the original reported amount		2,836,626
-	Carryback of general business credit from 2021. Enter the amount from line 2 of Part III with box D	·i	🖊 🗀
	checked. See instructions	5	
	Add lines 1, 3, 4, and 5	6	4,871,853
Part	Allowable Credit	0	4,071,000
	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	202,282,604
	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b; 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	654,608
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54		_
9	Add lines 7 and 8	9	202.937,213
10a	Foreign tax credit		
	Certain allowable credits (see instructions)	100	E 602 6E7
С	Add lines Tod and Tob	10c	5,693,657
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	197,243,541
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0   12   196,590,702		
12	12 130,390,702		
13	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See		
13	instructions		
11	Tentative minimum tax:		
14	1		
	• 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	167,795,558
	Subtract line 15 from line 11. If zero or less, enter -0	16	29,491,742
17	Enter the <b>smaller</b> of line 6 or line 16	17	1,177,677
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or		
	reorganization.		
For Par	perwork Reduction Act Notice, see separate instructions. Cat. No. 12392F		Form <b>3800</b> (2020)

Form 3800 (2020) Page **2** 

_	II Allowable Credit (continued)		
Note	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -	0- on	line 26.
18	Multiply line 14 by 75% (0.75). See instructions	18	22,522
19	Enter the greater of line 13 or line 18	19	24,886
20	Subtract line 19 from line 11. If zero or less, enter -0	20	65,667
21	Subtract line 17 from line 20. If zero or less, enter -0	21	64,331
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	10.217
23	Passive activity credit from line 3 of all Parts III with box B checked 23 7,203		
24	Enter the applicable passive activity credit allowed for 2020. See instructions	24	4,986
25	Add lines 22 and 24	25	15,126
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	12,401
27	Subtract line 13 from line 11. If zero or less, enter -0	27	573,517
28	Add lines 17 and 26	28	161,611
29	Subtract line 28 from line 27. If zero or less, enter -0	29	559,976
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	266,838
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked		
33	Enter the applicable passive activity credits allowed for 2020. See instructions	33	78.791
34	Carryforward of business credit to 2020. 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	84,650
35	Carryback of business credit from 2021. 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	380,100
37	Enter the <b>smaller</b> of line 29 or line 36	37	310.034
38	Credit allowed for the current year. Add lines 28 and 37.  Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return.  Individuals. Schedule 3 (Form 1040), line 6	38	433,065

Form 3800 (2020) Page **2** 

Part	II Allowable Credit (continued)		- 1 age <b>-</b>
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	11,860,989
19	Enter the greater of line 13 or line 18	19	11,879,358
20	Subtract line 19 from line 11. If zero or less, enter -0	20	6,846,667
21	Subtract line 17 from line 20. If zero or less, enter -0	21	6,763,621
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	62,492
23	Passive activity credit from line 3 of all Parts III with box B checked 23 5,054		
24	Enter the applicable passive activity credit allowed for 2020. See instructions	24	9.581
25	Add lines 22 and 24	25	72,074
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	37,738
27	Subtract line 13 from line 11. If zero or less, enter -0	27	150,700,860
28	Add lines 17 and 26	28	1,215,414
29	Subtract line 28 from line 27. If zero or less, enter -0	29	149,485,446
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	3.728.309
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 32 525,101		
33	Enter the applicable passive activity credits allowed for 2020. See instructions	33	437,076
34	Carryforward of business credit to 2020. 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	3,537,539 ▶ □
35	Carryback of business credit from 2021. 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	7.702.934
37	Enter the <b>smaller</b> of line 29 or line 36	37	3,716,761
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		
	• Estates and trusts. Form 1041, Schedule G, line 2b	38	4,932,175
			Form <b>3800</b> (2020)

Form 3800 (2020) Page 3 Name(s) shown on return Identifying number General Business Credits or Eligible Small Business Credits (see instructions) Complete a separate Part III for each box checked below. See instructions. **A** General Business Credit From a Non-Passive Activity **E** Reserved ☐ General Business Credit From a Passive Activity **F** Reserved С ☐ General Business Credit Carryforwards **G** Eligible Small Business Credit Carryforwards **H** Reserved **D** General Business Credit Carrybacks If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III . . . . . . . (a) Description of credit (b) Enter EIN if (c) Enter the claiming the credit appropriate Note: On any line where the credit is from more than one source, a separate Part III is needed for each from a pass-through amount. pass-through entity. entity. Investment (Form 3468, Part II only) (attach Form 3468) . . . 1a 1a 2,513 b 1b С Increasing research activities (Form 6765) 1c 61,657 d Low-income housing (Form 8586, Part I only) . . . . . . 1d 2,718 е 1e 5,415 f Renewable electricity, refined coal, and Indian coal production (Form 8835) . 1f 2,834 g 1g 5,769 h 1h 695 i 1i 355 j 1j Small employer pension plan startup costs and auto-enrollment (Form 8881) . 9,164 1k 17,147 k Employer-provided child care facilities and services (Form 8882)\* . . . . . 5,029 ı Biodiesel and renewable diesel fuels (attach Form 8864) . . . . . . . . . . . . 11 182 1m m Distilled spirits (Form 8906) . . . . . . . . . . . . . . . . 1n 154 n Nonconventional source fuel (carryforward only) 10 0 . . . . . 11,862 р Energy efficient home (Form 8908) . . . . . . . . . . 1p 0 Energy efficient appliance (carryforward only) . . . . . . . . . . . 1q q 4,889 1r r 4,696 s Alternative fuel vehicle refueling property (Form 8911) 1s 86 1t t Enhanced oil recovery credit (carryforward only) . . . . . u Mine rescue team training (Form 8923) 1u 68 . . . . . . . . . 0 Agricultural chemicals security (carryforward only) . . . . . . . . . 1v ν 3.043 1w w Carbon oxide sequestration (Form 8933) . . . . . . . . . 1x X 3.373 Qualified plug-in electric drive motor vehicle (Form 8936) 1y У Qualified plug-in electric vehicle (carryforward only) . . . . . . . . . . . . . . . 1z z 1aa 6.490 aa General credits from an electing large partnership (carryforward only) . . . 1bb \* bb Other. Oil and gas production from marginal wells (Form 8904) and certain other ZZ 122 4,776 2 2 139,164 Add lines 1a through 1zz and enter here and on the applicable line of Part I . . . 3 3 Enter the amount from Form 8844 here and on the applicable line of Part II 15,920 4a Investment (Form 3468, Part III) (attach Form 3468) . . . . . . . . . . . . . . . 4a 19,822 b 4b 93,629 Biofuel producer (Form 6478) 4c С . . . . . . . . . . . . 1.786 d Low-income housing (Form 8586, Part II) . . . . . . . . . . . . . . 4d 9,580 е Renewable electricity, refined coal, and Indian coal production (Form 8835) . 1,040 f 4f 213,502 Employer social security and Medicare taxes paid on certain employee tips (Form 8846) g 4g 422 Small employer health insurance premiums (Form 8941) . . . . . . . . . . . . h 4h 1,580 4i i 114,938 j Employer credit for paid family and medical leave (Form 8994). 4j 16,306 4z 143 Z 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

<sup>\*</sup> See instructions for limitation on this credit.

Form 380	0 (2020)			Page <b>3</b>
Name(s)	shown on return		Identifying nun	nber
Part I	General Business Credits or Eligible Small Business Credits (see inst	ruction	ıs)	
	ete a separate Part III for each box checked below. See instructions.		,	
	General Business Credit From a Non-Passive Activity <b>E</b> Reserved			
	General Business Credit From a Passive Activity F Reserved			
c $\Box$	General Business Credit Carryforwards G	ess Cre	edit Carryforward	S
	General Business Credit Carrybacks H Reserved		, , , , , , , ,	
	ou are filing more than one Part III with box A or B checked, complete and attach first an	additiona	al Part III combinir	ng amounts from
	arts 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
	n any line where the credit is from more than one source, a separate Part III is needed for each ough entity.		claiming the credit om a pass-through entity.	appropriate amount.
	Investment (Form 3468, Part II only) (attach Form 3468)	1a	ortary.	22,429
b	Reserved	1b		22,120
c	Increasing research activities (Form 6765)	1c		612,311
d	Low-income housing (Form 8586, Part I only)	1d		901,377
e	Disabled access (Form 8826)*	1e		8,871
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		18,239
g	Indian employment (Form 8845)	1g		51,944
h	Orphan drug (Form 8820)	1h		· · · · · · · · · · · · · · · · · · ·
- "	New markets (Form 8874)	1i		<u>2,816</u> 354
:	Small employer pension plan startup costs and auto-enrollment (Form 8881)	-		
J	Employer-provided child care facilities and services (Form 8882)*	1j 1k		3,932 6,892
k	Biodiesel and renewable diesel fuels (attach Form 8864)	11		7,420
ı m	Low sulfur diesel fuel production (Form 8896)	1m		69
m		1n		9,244
n	Distilled spirits (Form 8906)			*
0	Nonconventional source fuel (carryforward only)	10 1n		214,661
p		1p		0
q	Energy efficient appliance (carryforward only)	1q 1r		12,718
r	Alternative motor vehicle (Form 8910)	1s		12,715
S	Alternative fuel vehicle refueling property (Form 8911)			19
t 	Enhanced oil recovery credit (carryforward only)	1t 1u		11
u	Mine rescue team training (Form 8923)	1v		0
V	Employer differential wage payments (Form 8932)	-		418
W		1w		5,112
X	Carbon oxide sequestration (Form 8933)	1x		*
У _	Qualified plug-in electric drive motor vehicle (Form 8936)	1y 1z		*
Z	Qualified plug-in electric vehicle (carryforward only)	<del></del>		20,421
aa	General credits from an electing large partnership (carryforward only)	1aa 1bb		<u> </u>
bb 		100		
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1		70 540
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	1zz		78,549 2,005,831
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		38,433
3 4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		952,599
b	Work opportunity (Form 5884)	4b		521,344
C	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586, Part II)	4d		2,751 104,359
	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
e f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4e 4f		58,246 1,039,618
	Qualified railroad track maintenance (Form 8900)	-		
g h		4g 4h		40,809
h :	Small employer health insurance premiums (Form 8941)			36,845
! :	Increasing research activities (Form 6765)	4i		1,493,760
j	Employer credit for paid family and medical leave (Form 8994)	4j		33,796
Z	Other	4z		2,630
5 6	· · · · · · · · · · · · · · · · · · ·	5		
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		

<sup>\*</sup> See instructions for limitation on this credit.

Form **3903** 

Department of the Treasury Internal Revenue Service (99) **Moving Expenses** 

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

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

OMB No. 1545-0074

2020

Attachment
Sequence No. 170

Name(s) shown on return

Total Forms Filed = 84,811

Your social security number

For Pa	aperwork Red	uction Act Notice, see your tax return instructions.	Cat. No. 12490K		Form <b>3903</b> (2020)
		Subtract line 4 from line 3. Enter the result here and on S his is your <b>moving expense deduction</b>		5	73,419
		ou cannot deduct your moving expenses. If line 3 is less ne 4 and include the result on Form 1040 or 1040-SR, line	*		
5	Is line 3 <b>mo</b>	re than line 4?			
4	included in	otal amount the government paid you for the expenses list box 1 of your Form W-2 (wages). This amount should be ode <b>P</b>	shown in box 12 of your Form	4	27,318
3	Add lines 1	and 2		3	83,522
2	Travel (inclu	ding lodging) from your old home to your new home (see i	•	2	73,824
1	Transportat	ion and storage of household goods and personal effects (	see instructions)	1	55,320
Befo	re you begi	r: You can deduct moving expenses only if you are a Me military order, you, your spouse, or your dependents n Check here to certify that you meet these requirement	nove because of a permanent chang	e of	station.

Form **3903** 

**Moving Expenses** 

OMB No. 1545-0074

Attachment Sequence No. **170** 

Department of the Treasury Internal Revenue Service (99) ▶ Go to www.irs.gov/Form3903 for instructions and the latest information. ► Attach to Form 1040, 1040-SR, or 1040-NR.

Name(s) shown on return		Total Forms Filed = 84,811	Your soci	al security number
Before you begin:		70. You can deduct moving expenses only if you are a Member of the Armed Forces of military order, you, your spouse, or your dependents move because of a permanent of Check here to certify that you meet these requirements. See the instructions	change o	f station.
1	Transportat	ion and storage of household goods and personal effects (see instructions)	1	117,064
2	Travel (inclucost of mea	iding lodging) from your old home to your new home (see instructions). <b>Do not</b> include the		117,788
3	Add lines 1	and 2	3	234,852
4		otal amount the government paid you for the expenses listed on lines 1 and 2 that is not box 1 of your Form W-2 (wages). This amount should be shown in box 12 of your Form ode P	n	51,128
5	Is line 3 <b>mo</b>	re than line 4?		
		ou <b>cannot</b> deduct your moving expenses. If line 3 is less than line 4, subtract line 3 from the 4 and include the result on Form 1040 or 1040-SR, line 1; or Form 1040-NR, line 1a.	n	
		Subtract line 4 from line 3. Enter the result here and on Schedule 1 (Form 1040), line 13 This is your <b>moving expense deduction</b>		192,118
For P	aperwork Red	uction Act Notice, see your tax return instructions. Cat. No. 12490K		Form <b>3903</b> (2020)

Form **4136** 

#### **Credit for Federal Tax Paid on Fuels**

OMB No. 1545-0162

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

Attachment Sequence No. 23

Name (as shown on your income tax return)

Total Forms Filed = 292.191

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. See instructions for kerosene used in commercial aviation from March 28, 2020, through December 31, 2020.

#### 1 Nontaxable Use of Gasoline

Note: CRN is credit reference number.

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Off-highway business use		\$ .183	<u> </u>		
b	Use on a farm for farming purposes		.183	}		362
С	Other nontaxable use (see Caution above line 1)		.183	J	\$ 263,394	
d	Exported		.184		*	411

#### 2 Nontaxable Use of Aviation Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Use in commercial aviation (other than foreign trade)		\$ .15		\$ 336		354
b	Other nontaxable use (see Caution above line 1)		.193		1,363		324
С	Exported		.194		0		412
d	LUST tax on aviation fuels used in foreign trade		.001		0		433

#### 3 Nontaxable Use of Undyed Diesel Fuel

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

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

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cred	it (e) CRN
а	Nontaxable use		\$ .243	1		
b	Use on a farm for farming purposes		.243	<u> </u>	\$ 46,380	360
С	Use in trains		.243		*	353
d	Use in certain intercity and local buses (see <b>Caution</b> 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		\$ 9,189		346
С	Use in certain intercity and local buses (see <b>Caution</b> 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

#### **Credit for Federal Tax Paid on Fuels**

OMB No. 1545-0162

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

Sequence No.

Name (as shown on your income tax return)

Total Forms Filed = 292.191 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. See instructions for kerosene used in commercial aviation from March 28, 2020, through December 31, 2020.

#### Nontaxable Use of Gasoline

**Note:** CRN is credit reference number.

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Off-highway business use		\$ .183	<u>_</u>		
b	Use on a farm for farming purposes		.183	}		362
С	Other nontaxable use (see Caution above line 1)		.183	J	\$ 135,034	
d	Exported		.184		*	411

#### **Nontaxable Use of Aviation Gasoline** 2

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cre	edit	(e) CRN
а	Use in commercial aviation (other than foreign trade)		\$ .15		\$ 74		354
b	Other nontaxable use (see <b>Caution</b> above line 1)		.193		816		324
С	Exported		.194		0		412
d	LUST tax on aviation fuels used in foreign trade		.001		0		433

#### 3 Nontaxable Use of Undyed Diesel Fuel

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

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

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Nontaxable use		\$ .243	]		
b	Use on a farm for farming purposes		.243	}	\$ 16,074	360
С	Use in trains		.243		*	353
d	Use in certain intercity and local buses (see <b>Caution</b> 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	1		
b	Use on a farm for farming purposes		.243		\$ 4,361	346
С	Use in certain intercity and local buses (see <b>Caution</b> 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

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#### 5 Kerosene Used in Aviation (see Caution above line 1)

		(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		\$ 19		417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219		.175		18		355
С	Nontaxable use (other than use by state or local government) taxed at \$.244		.243		9,189		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		0		433

#### 6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

#### Registration No. ▶

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

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

		(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Use by a state or local government	\$ .243		\$ 46,380		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 credit		(e) CRN
а	Use by a state or local government	\$ .243	<u> </u>			
b	Sales from a blocked pump	.243	<u> </u>	\$ 9,189		346
С	Use in certain intercity and local buses	.17		0		347

## 8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation (see Caution above line 1)

#### 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		\$ 18		355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200		19		417
С	Nonexempt use in noncommercial aviation		.025		*		418
d	Other nontaxable uses taxed at \$.244		.243		9,189		346
е	Other nontaxable uses taxed at \$.219		.218		*		369
f	LUST tax on aviation fuels used in foreign trade		.001		0		433

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

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#### 5 Kerosene Used in Aviation (see Caution above line 1)

		(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		\$ 172		417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$.219		.175		119		355
С	Nontaxable use (other than use by state or local government) taxed at \$.244		.243		4,361		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		0		433

#### 6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

Registration No. ▶

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

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

		(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Use by a state or local government	\$ .243		\$ 16,074		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 credit		(e) CRN
а	Use by a state or local government	\$ .243	)			
b	Sales from a blocked pump	.243	}	\$ 4,361		346
С	Use in certain intercity and local buses	.17		0		347

## 8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation (see Caution above line 1)

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		\$ 119		355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200		172		417
С	Nonexempt use in noncommercial aviation		.025		*		418
d	Other nontaxable uses taxed at \$.244		.243		4,361		346
е	Other nontaxable uses taxed at \$.219		.218		*		369
f	LUST tax on aviation fuels used in foreign trade		.001		0		433

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

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

#### 10 Biodiesel or Renewable Diesel Mixture Credit

#### Registration No. ▶

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

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

#### 11 Nontaxable Use of Alternative Fuel

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

		(a) Type of use	(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN
Liquefied petroleum ga	s (LPG) (see instructions)		\$ .183		\$ 1,529	419
"P Series" fuels			.183		*	420
Compressed natural ga	s (CNG) (see instructions)		.183		*	421
Liquefied hydrogen			.183		0	422
Fischer-Tropsch proces (including peat)	ss liquid fuel from coal		.243		0	423
Liquid fuel derived from	n biomass		.243		0	424
Liquefied natural gas (L	NG) (see instructions)		.243		*	425
Liquefied gas derived fi	rom biomass		.183		*	435

#### 12 Alternative Fuel Credit

#### Registration No. ▶

		(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents			(e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)	\$ .50		\$ 765		426
b	"P Series" fuels	.50		19		427
С	Compressed natural gas (CNG) (see instructions)	.50		*		428
d	Liquefied hydrogen	.50		*		429
е	Fischer-Tropsch process liquid fuel from coal (including peat)	.50		*		430
f	Liquid fuel derived from biomass	.50		0		431
g	Liquefied natural gas (LNG) (see instructions)	.50		78		432
h	Liquefied gas derived from biomass	.50		*		436
i	Compressed gas derived from biomass	.50		*		437

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

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

#### 10 Biodiesel or Renewable Diesel Mixture Credit

#### Registration No. ▶

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

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

#### 11 Nontaxable Use of Alternative Fuel

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

		(a) Type of use	(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)		\$ .183		\$ 691	419
b	"P Series" fuels		.183		*	420
С	Compressed natural gas (CNG) (see instructions)		.183		*	421
d	Liquefied hydrogen		.183		0	422
е	Fischer-Tropsch process liquid fuel from coal (including peat)		.243		0	423
f	Liquid fuel derived from biomass		.243		0	424
g	Liquefied natural gas (LNG) (see instructions)		.243		*	425
h	Liquefied gas derived from biomass		.183		*	435

#### 12 Alternative Fuel Credit

#### Registration No. ▶

		(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credi	(e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)	\$ .50		\$ 2,156	426
b	"P Series" fuels	.50		19	427
С	Compressed natural gas (CNG) (see instructions)	.50		*	428
d	Liquefied hydrogen	.50		*	429
е	Fischer-Tropsch process liquid fuel from coal (including peat)	.50		*	430
f	Liquid fuel derived from biomass	.50		0	431
g	Liquefied natural gas (LNG) (see instructions)	.50		1,193	432
h	Liquefied gas derived from biomass	.50		*	436
i	Compressed gas derived from biomass	.50		*	437

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

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13	Registered Credit Card Issuers			Registration No	<b></b> ►	
			(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Diesel fuel sold for the exclusive use of a state or loca	I government	\$ .243		\$ 46.380	360
b	Kerosene sold for the exclusive use of a state or local	government	.243		9,189	346
С	Kerosene for use in aviation sold for the exclusive use government taxed at \$.219	of a state or local	.218		*	369
14	Nontaxable Use of a Diesel-Water Fuel Emuls	sion				
	Caution: There is a reduced credit rate for use in	n certain intercity	and local bu	ises (type of use	5). See instructions.	
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Nontaxable use		\$.197		\$ 0	309
b	Exported		.198		0	306
15	Diesel-Water Fuel Emulsion Blending		(b) Rate	Registration No.	(d) Amount of credit	(e) CRN
	Blender credit		\$.046		\$ 0	310
16	Exported Dyed Fuels and Exported Gasoline	Blendstocks				
			(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Exported dyed diesel fuel and exported gasoline blend at \$.001	dstocks taxed	\$ .001		\$ 0	415
b	Exported dyed kerosene		.001			416
17	Total income tax credit claimed. Add lines 1 th Schedule 3 (Form 1040), line 11; Form 1120, Sch Form 1041, Schedule G, line 16b; or the proper line	edule J, line 20b;	Form 1120-9	S, line 23c;	\$ 292,191	

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

13	Registered Credit Card Issuers			Registration N	o. ►	Page 4
			(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
	<del></del>		. ,	(c) dallolis		
a	Diesel fuel sold for the exclusive use of a state or local		\$ .243		\$ 16,074	360
b	Kerosene sold for the exclusive use of a state or local		.243		4,361	346
С	Kerosene for use in aviation sold for the exclusive use government taxed at \$.219	of a state or local	.218		*	369
14	Nontaxable Use of a Diesel-Water Fuel Emuls	sion				
	Caution: There is a reduced credit rate for use in	n certain intercity a	and local bu	ses (type of use	5). See instructions.	
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Nontaxable use		\$.197		\$ 0	309
b	Exported		.198		0	306
15	Diesel-Water Fuel Emulsion Blending		F	Registration No	o. <b>►</b>	
			(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
	Blender credit		\$ .046		\$ 0	310
16	Exported Dyed Fuels and Exported Gasoline I	Blendstocks				
			(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Exported dyed diesel fuel and exported gasoline blend at \$.001	dstocks taxed	\$ .001		\$ 0	415
b	Exported dyed kerosene		.001			416
17	Total income tax credit claimed. Add lines 1 th Schedule 3 (Form 1040), line 11; Form 1120, Sch Form 1041, Schedule G, line 16b; or the proper line	edule J, line 20b; I	(d). Enter he	S, line 23c;	\$ 166,650	4136 (20

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

4562

**Depreciation and Amortization** 

(Including Information on Listed Property)

Attachment

OMB No. 1545-0172

► Attach to your tax return. Department of the Treasury ▶ Go to www.irs.gov/Form4562 for instructions and the latest information. Sequence No. 179 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates Identifying number Total Forms Filed = 9,962,916 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 2 Total cost of section 179 property placed in service (see instructions) 2 1,485,230 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 5 2,511,530 (a) Description of property (b) Cost (business use only) 6 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 2,186,913 **9** Tentative deduction. Enter the **smaller** of line 5 or line 8 . . . . . . 9 2,186,873 10 Carryover of disallowed deduction from line 13 of your 2019 Form 4562 . . . . . . 10 196,558 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 2,295,320 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 2,156,106 13 Carryover of disallowed deduction to 2021. 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.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 1,675,245 15 1,065 16 Other depreciation (including ACRS) 976,554 MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2020 . . . . . . . . 5,374,623 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2020 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (g) Depreciation deduction (f) Method placed in (business/investment use only-see instructions) 19a 3-year property 72,026 71,117 704,088 700,254 5-year property c 7-year property 595,680 592,606 68,949 68,960 d 10-year property 187,401 185,992 e 15-year property f 20-year property 43.731 43.727 6,225 25 yrs. S/L 6,225 g 25-year property 27.5 yrs. h Residential rental 983.271 MM S/L 981.853 undetermined type 76 27.5 yrs. MM S/L 76 property 411,142 39 yrs. MM S/L i Nonresidential real 406,628 Total GDS cost 2,568,687 MM S/L 2,556,410 property Section C-Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System 10,440 20a Class life S/L 10,433 512 12 yrs. S/L 508 **b** 12-year **c** 30-year 7,511 30 yrs. MM S/L 7,503 d 40-year 3.120 40 yrs. MM S/L 3,121 Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 1,830,968

For Paperwork Reduction Act Notice, see separate instructions.

23

Form **4562** (2020)

9,651,181

23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . . . . . . . . .

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

Form **4562** 

#### **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

OMB No. 1545-0172

Department of the Treasury Attachment ▶ Go to www.irs.gov/Form4562 for instructions and the latest information. Sequence No. 179 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates Identifying number Total Forms Filed = 9.962.916 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 39.742.331 2 Total cost of section 179 property placed in service (see instructions) . . . . . 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . . . . . . . Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 2,584,679,140 6 (a) Description of property (b) Cost (business use only) 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 45,045,833 45,025,499 **10** Carryover of disallowed deduction from line 13 of your 2019 Form 4562 . . . . . 10 3,923,589 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 528,388,486 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 . . . . . . 44,436,945 13 Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 38,157,632 15 14,040 **16** Other depreciation (including ACRS) 16 6,868,301 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 52,496,037 17 MACRS deductions for assets placed in service in tax years beginning before 2020 . . . . . . . . 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2020 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction placed in (business/investment use period only-see instructions) 574.604 19a 3-year property 1,929,514 16.548.477 2.717.384 5-year property 1,554,784 **c** 7-year property 14,046,384 **d** 10-year property 3,056,072 217,674 5,648,194 227,913 e 15-year property **f** 20-year property 2,139,287 67,510 S/L 844.400 25 yrs. 50.109 **g** 25-year property 27.5 yrs. ММ S/L 162,966,606 3,481,359 h Residential rental undetermined type 11,671 27.5 yrs. MM S/L 11.740 property 39 yrs. MM S/I i Nonresidential real 82,740,249 892,312 ММ S/L Total GDS cost 289,930,855 9.795.389 Section C-Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System 20a Class life 726,572 S/L 29,534 **b** 12-year 23,899 12 yrs. S/L 3.640 2,186,374 30 yrs. S/L 54,286 **c** 30-year MM **d** 40-year 19.387 1.110.664 40 yrs. MM S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 12,756,904 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 164,632,094 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . . . . . . . . . 23

For Paperwork Reduction Act Notice, see separate instructions.

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

Form **4562** (2020)

Form	4562 (2020)														Page 2
Pai		nclude aut			ertain	other	vehicle	es, ce	ertain	aircra	ft, and	orq t	perty	use	d for
	entertainment, recrea	•		,											
	Note: For any vehicle for										exper	ise, co	omplet	e on	<b>ly</b> 24a
	24b, columns (a) through	. ,													
-04-	Section A—Depreciation a														<del></del>
248	Do you have evidence to support the	ie business/inve	estment	use ciain	nea? <u></u> (e)	Yes		240		is the e		writte	n? 📋		No
	e of property (list vehicles first)  (b)  Date placed in service percent	nt use Cost or c	<b>d)</b> ther basis		for depreness/investuse only	stment	(f) Recovery period	' I	(g) fethod/ nvention		(h) epreciation deduction		Elected	(i) d secti cost	on 179
25	Special depreciation allowand the tax year and used more the									5 28	34,359				
26	Property used more than 50%	in a qualifie	d busine	ess use	):	-		-							
		%		1	1,569,3	51				1,3	23,802	<u>,</u>			
		%													
		%													
27	Property used 50% or less in	a qualified bu	ısiness	use:											
		%			410,618			S/L		33	30,433				
		%		_	al 26e +			S/L							
	A del case conte in a decree (b) lin	%	.b 07 F		1,904,67		01	9/L		2 4 6	20.000	=			
	Add amounts in column (h), lin Add amounts in column (i), line	_									30,968	29	112,	620	
	Add amounts in column (i), inc						e of Ve				• •	23	112,	JZ3	
Com	plete this section for vehicles use									r related	persor	ı. If vo	u provid	ded v	ehicles
	our employees, first answer the qu														
			(4	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									Vehic	le 6				
31	Total commuting miles driven dur	ring the year													
32	Total other personal (non-miles driven	G,													
33	Total miles driven during the lines 30 through 32														
34	Was the vehicle available for p	personal	Yes	No	Yes	No	Yes	No	Ye	s No	Yes	s N	o Y	es	No
	use during off-duty hours? .														
	Was the vehicle used primarily than 5% owner or related personal transfer of the second secon	son?													
36	Is another vehicle available for pe														
	Section C-Q		•	-					-						
	wer these questions to determine				to con	pleting	g Sectio	n B fo	r vehic	les use	d by en	nploye	es wh	o <b>are</b>	n't
	e than 5% owners or related pe														
	) · · · ·   · · · · · · ·													es	No
	Do you maintain a written po employees? See the instruction	ons for vehic	les used	d by co	rporate										
39	Do you treat all use of vehicles														
40	Do you provide more than five												ne		
_	use of the vehicles, and retain												.		
41	Do you meet the requirements														
Do	Note: If your answer to 37, 38	3, 39, 40, or 4	11 is "Y	es," do	n't com	plete S	Section	3 for ti	he cov	ered ve	hicles.				
Par	t VI Amortization									(6	2)	_			
	(a) Description of costs	(b) Date amortiz begins	ation	Amoi	(c) rtizable ar	mount	С	(d) ode sec	tion	Amort perio		Amo	(f) rtization		is year
42	Amortization of costs that beg	ins during yo	our 2020	tax ye	ear (see	instruc	ctions):								
					00= ==	_						<u> </u>			
	American Control of the Control		000		337,37						1.0	<del> </del>	EGG	E10	
	Amortization of costs that beg	_		-							43		566,		
44	Total. Add amounts in colum	11 (1). See the	ınstruc	uons to	r wnere	to rep	ort .				44		801.	<del>9</del> 32	

Form <b>Pa</b> i		d Propert		ude auto			ertain	other	vehic	les,	cert	ain a	ircraft,	, and	pro	oper	ty us	Page <b>2</b> ed for
	Note:	For any vel olumns (a) t	nicle for w	hich you	are us	ing the							lease 6	expens	se, c	omp	lete <b>o</b> n	ı <b>ly</b> 24a,
		-Deprecia															biles.)	
<b>24</b> a	Do you have ev	vidence to su	pport the bu	usiness/inve	estment	use clain	ned?	Yes		24	lb If "	Yes," is	the evi	dence	writte	en? [	Yes	□ No
	(a) e of property (list vehicles first)	(b) Date placed in service	Business/ investment use percentage		d) ther bas		for depre less/inve use only	stment	(f) Recove period	٠ ١	(g Meth Conve			(h) preciation eduction	n	Elec	(i) cted sect cost	
	Special depo	and used r	more than	50% in a	qualifi	ed busir	ness us					25	6,28	6,823				
26	Property use	ed more tha		1	d busin			.04					0.04	4.000				
			% %			4	8,644,5	31					6,04	4,669				
27	Property use	ed 50% or le	ess in a qu	ualified bu	siness	use:												
			%				,792,69				S/L -		431	,297				
			%				al 26e +				S/L -							
28	Add amount	e in column	% (b) lines		h 27 E		3,436,5		21 na		S/L - 1	28	12 7	56,904				
	Add amount									-					29	1,7	27,335	<u> </u>
			(//			-Infor												
	plete this secti																	/ehicles
to yo	our employees,	first answer	the questi	ons in Sec			Ī .		xceptio		comp					e vel		
30	30 Total business/investment miles driven during the year (don't include commuting miles) . (a) Vehicle 2 (b) Vehicle 2 (c) Vehicle 3 (d) Vehicle 4 (e) Vehicle 5								5	<b>(f)</b> Vehicle 6								
	Total commut Total other miles driven	personal	-	•														
33	Total miles lines 30 thro																	
34	Was the veh				Yes	No	Yes	No	Yes		No	Yes	No	Yes	N	lo	Yes	No
35	use during o Was the veh than 5% own	icle used p	rimarily by	a more														
36	Is another veh		•															
Ansv	wer these que	Section stions to de	C-Ques	tions for f you mee	t an ex	ception						-		-		ees v	who <b>ar</b>	en't
	e than 5% ow																	
	Do you mair your employ	ees?														. [	Yes	No
	Do you mair employees?	See the in:	structions	for vehicl	es use	d by co	rporate	office	rs, dire	ctor	s, or 1	% or 1	more o	wners		.		
	Do you treat		-													- +		
40	use of the ve	hicles, and	retain the	informati	on rec	eived?										. [		
41	Do you meet <b>Note:</b> If you	•		_	•										٠			
Par		tization	137, 30, 38	9, 40, 01 4	-115 1	es, uo	ii i con	ipiete c	Section	Ю	or trie	Coven	eu verii	icies.				
	(a Descriptio	a)	С	(b) Date amortiza begins	ation	Amoi	(c) tizable a	mount		Code	(d) e section	n	(e) Amortiza period percent	or	Amo	ortizat	<b>(f)</b> ion for th	is year
42	Amortization	of costs th	at begins	during yo	ur 202	0 tax ye	ar (see	instru	ctions):									
								2.4										
42	Amortization	of costs th	at bocon	hefore ve	ur 202		,987,43							43		2 1	04,000	<u> </u>
	<b>Total.</b> Add a		-	-		-								43			25.657	
	. o.an / www		(I)	. 555 1116				- 101		•	<u> </u>	• •	•					<b>52</b> (2020)

Form **4684** 

**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

2020
Attachment Sequence No. 26

Department of the Treasury Internal Revenue Service

Name(s) shown on tax return

Total Forms Filed =

127,890 Identifying number

bus thef	TION A—Personal Use Property (Use to ness or for income-producing purposes. to event involving personal use property. It is that apply before completing this sec	You m	ıust ı	use a separate	Form 4684 (th	rough line 12)	for e	each casualty or
If the	casualty or theft loss is attributable to a feder	ally dec	clarec	d disaster, check	k here  and ent	er the DR-		
or E	•	-						
1	Description of properties (show type, location (cit property lost or damaged from the same casualty enter the ZIP code for the property most affected or	or theft	. If yo	ou checked the bo				
	Type of Property			City and Sta	ate	ZIP Code		<b>Date Acquired</b>
	Property A							
	Property <b>B</b>							
	Property C							
	Property <b>D</b>							
	·				Pr	operties		
		_		Α	В	С		D
2	Cost or other basis of each property	[	2					
3	Insurance or other reimbursement (whether or no	ot you						
	filed a claim) (see instructions)	[	3					
	<b>Note:</b> If line 2 is <b>more</b> than line 3, skip line 4.							
4	Gain from casualty or theft. If line 3 is <b>more</b> than enter the difference here and skip lines 5 through that column. See instructions if line 3 includes insu or other reimbursement you did not claim, o	9 for larance r you	4					
_	received payment for your loss in a later tax year		4 5					
5	Fair market value <b>before</b> casualty or theft	F	6					
6	Fair market value <b>after</b> casualty or theft Subtract line 6 from line 5		7					
,	Enter the <b>smaller</b> of line 2 or line 7	- +	8					
8		F	9					
9 10	Subtract line 3 from line 8. If zero or less, enter -0-			rough D			10	
10	Casualty or theft loss. Add the amounts on line 9 in Enter \$100 (\$500 if qualified disaster loss rules app			-			10	
11	Subtract line 11 from line 10. If zero or less, enter -	-		•			12	
12	Caution: Use only one Form 4684 for lines 13 through		•				12	
12	Add the amounts on line 4 of all Forms 4684 .	agii io.					13	1,183
							13	.,
14	Add the amounts on line 12 of all Forms 4684. If yo the instructions		osses	not attributable to	a rederally declar	ed disaster, see	14	95,835
	Caution: See instructions before completing line 15							
15	• If line 13 is <b>more</b> than line 14, enter the differer complete the rest of this section.							
	• If line 13 is <b>equal</b> to line 14, enter -0- here. <b>Do no</b>	t comple	ete th	e rest of this secti	on.			
	• If line 13 is <b>less</b> than line 14, and you have no q \$500 reduction on line 11 on any Form(s) 4684, en have qualified disaster losses subject to the \$500 r and enter the smaller of this difference or the am	nter -0- l eduction	here a	and go to line 16. tract line 13 from l	If you line 14		15	85,102
	reporting those losses. Enter that result here and of Form 1040-NR, Schedule A, line 7. If you claim the Schedule A (Form 1040), line 16, the amount of Instructions for Forms 1040 and 1040-SR). Do not of your casualty or theft losses are subject to the \$50.000.	on Sched e standa of your s complet	dule A ord de standa te the	(Form 1040), line duction, also incluand deduction (se rest of this section	16, or ude on ee the			
16	Add lines 13 and 15. Subtract the result from line 1	4					16	10,907
	Enter 10% of your adjusted gross income from Foinstructions		0, 104	10-SR, or 1040-N	R, line 11. Estates	and trusts, see	17	10,318
40	Subtract line 17 from line 16. If zero or less, enter	Λ ΔIα	0 00+	or the result on C	chodulo A (Earm 1	040) line 15 c		- · · · <del>-</del>
10	Form 1040-NR, Schedule A, line 6. Estates and treturn				•	,	10	7 636

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

2020
Attachment Sequence No. 26

Name(s) shown on tax return

Total Forms Filed = 127,890

Identifying number

busi thef	ness or fo	Personal Use Property (Use the property income-producing purposes. You olving personal use property. It but before completing this sections.	ou n f rep	nust	use a separate f	orm 4684 (thr	ough line 12	) for e	each casualty or
If the	casualty o	r theft loss is attributable to a federa	lly de	clared	d disaster, check h	nere  and enter	r the DR-		
or El	•	declaration number a	•						
	Description property los	of properties (show type, location (city, st or damaged from the same casualty of code for the property most affected on	, state or thef	, and t. If yo	ZIP code), and date ou checked the box Property <b>A</b> .	e acquired for eac and entered the I	FEMA disaster o		ition number above,
		Type of Property			City and State	•	ZIP Code		Date Acquired
	Property A								
	Property <b>B</b>								
	Property C								
	Property <b>D</b>						perties		
					Α	В	С		D
2	Cost or other	er basis of each property		2					
3		or other reimbursement (whether or not							
		n) (see instructions)		3					
		2 is <b>more</b> than line 3, skip line 4.	_						
4	enter the di	casualty or theft. If line 3 is <b>more</b> than ling ifference here and skip lines 5 through 9 in. See instructions if line 3 includes insurations in the same of the	9 for ance						
		yment for your loss in a later tax year .	, ,	4					
5		value <b>before</b> casualty or theft		5					
6		value <b>after</b> casualty or theft		6					
7		e 6 from line 5		7					
8		maller of line 2 or line 7	- 1	8					
9		e 3 from line 8. If zero or less, enter -0		9					
		theft loss. Add the amounts on line 9 in c			rough D			10	
10	•				•				
11		(\$500 if qualified disaster loss rules apply e 11 from line 10. If zero or less, enter -0-			•			11	
12				•				12	
40		se only one Form 4684 for lines 13 throug						40	154,650
				-				13	104,000
14	the instructi	ounts on line 12 of all Forms 4684. If you lons		losses	not attributable to a 	a federally declared	d disaster, see	14	2,161,122
15	• If line 13	is <b>more</b> than line 14, enter the difference		e and	on Schedule D. <b>Do</b>	not \			
	•	ne rest of this section. s <b>equal</b> to line 14, enter -0- here. <b>Do not</b>	oomr	loto th	o root of this soction				
		•	•						
	\$500 reduction have qualified	is less than line 14, and you have no qu tion on line 11 on any Form(s) 4684, ent ed disaster losses subject to the \$500 re- he smaller of this difference or the amo	er -0- ductio	here a	and go to line 16. If tract line 13 from line	you e 14		15	1,518,176
	reporting th Form 1040- Schedule A Instructions	ose losses. Enter that result here and on NR, Schedule A, line 7. If you claim the A (Form 1040), line 16, the amount of for Forms 1040 and 1040-SR). Do not cualty or theft losses are subject to the \$50	Schee standa your comple	dule A ard de stand ete the	(Form 1040), line 16 duction, also include ard deduction (see rest of this section	6, or e on the			
16	Add lines 13	3 and 15. Subtract the result from line 14						16	661,181
	Enter 10%	of your adjusted gross income from For	m 104	i0, 10	10-SR, or 1040-NR,	line 11. Estates a	and trusts, see	17	97,423
18	Form 1040-	e 17 from line 16. If zero or less, enter -NR, Schedule A, line 6. Estates and tru	ısts, eı	nter th	e result on the "Otl	her deductions" li	ne of your tax		
			-	•				18	602,875
For F	aperwork P	Reduction Act Notice, see instructions.			Ca	t. No. 12997O			Form <b>4684</b> (2020)

Form	4684 (2020)	Attach	nment Sequence No. 2	6			Page <b>2</b>			
Name	(s) shown on tax return. Do not enter name and identifying number i	f showr	n on other side.		Identify	ing nui				
050	TION D. D. C. C. D. L. C. D. L. C. D.									
SEC Pa	TION B—Business and Income-Producing P  TI Casualty or Theft Gain or Loss (Use a			ch casualty or t	neft \					
	Description of properties (show type, location, and date at					perty lo	st or damaged from			
	the same casualty or theft. See instructions if claiming a									
	Property A									
	Property B									
	Property C									
	Property <b>D</b>			Prop	erties					
			Α	В	C		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	21								
	Note: If line 20 is more than line 21, skip line 22.									
22	Gain from casualty or theft. If line 21 is <b>more</b> 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 <b>before</b> casualty or theft	23								
24	Fair market value after casualty or theft	24								
25 26	Subtract line 24 from line 23	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			`		28				
Pai	Part II Summary of Gains and Losses (from separate Parts I)  (b) Losses from casualties or thefts  (c) Gains from casualties or thefts  (d) Trade, business, (ii) Income.									
	(a) Identify casualty or theft			rental, or royalty property	(ii) Incom- producing pro		includible in income			
	Casualty or Theft	of Pr	operty Held On							
29				( )	(	)				
				( )	(	)				
30	Totals. Add the amounts on line 29									
31	Combine line 30, columns (b)(i) and (c). Enter the net gair not otherwise required, see instructions				orm 4/9/ is	31	6,728			
32	Enter the amount from line 30, column (b)(ii) here. Individu				property on					
	Schedule A (Form 1040), line 16, or Form 1040-NR, Sched	dule A,	line 7. (Do not inclu	de any loss on prop	erty used as					
	an employee.) Estates and trusts, partnerships, and S corp					32	4,597			
	Casualty or Theft o					00	1 202			
33	Casualty or theft gains from Form 4797, line 32			( )	(	<b>33</b>	1,383			
<b>5</b> 4				( )	(	)				
35	Total losses. Add amounts on line 34, columns (b)(i) and (b	)(ii) .	35	( 13,915 )	( 4,773	)				
36	Total gains. Add lines 33 and 34, column (c)					36	9,141			
37	Add amounts on line 35, columns (b)(i) and (b)(ii)					37	18,678			
38	If the loss on line 37 is <b>more</b> than the gain on line 36: Combine line 35, column (b)(i) and line 36, and enter the n-	ot asin	or (loss) here Partn	perchine and S corn	orations see					
a	the <b>Note</b> below. All others, enter this amount on Form 4									
	instructions					38a	13,391			
b	Enter the amount from line 35, column (b)(ii) here. Individu Schedule A (Form 1040), line 16, or Form 1040-NR, Sched									
	an employee.) Estates and trusts, enter on the "Other									
	corporations, see the <b>Note</b> below					38b	4,759			
39	If the loss on line 37 is <b>less</b> than or <b>equal</b> to the gain on line see the <b>Note</b> below. All others, enter this amount on Form 4			37 and enter here.	• •	39	8,723			
	<b>Note:</b> Partnerships, enter the amount from line 38a, 38b, c					38	0,720			
S corporations, enter the amount from line 38a or 38b on Form 1120-S, Schedule K, line 10.										

Form	4684 (2020)	Attach	ment Sequence No.	. 20	6				Page <b>2</b>
Name	(s) shown on tax return. Do not enter name and identifying number i	f showr	on other side.			Ide	entifying	nuı	mber
CEC	TION D. Dusings and Income Duadusing D								
	TION B—Business and Income-Producing P  TI Casualty or Theft Gain or Loss (Use a				ch casualty or th	oft \			
	Description of properties (show type, location, and date as						proport	v 10	et or damaged from
19	the same casualty or theft. <b>See instructions if claiming a</b>								
	Property A								
	Property <b>B</b>								_
	Property C								
	Property <b>D</b>				Dron	ortico			
			Α		В	erties	С		D
20	Cost or adjusted basis of each property	20							
	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 <b>more</b> 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								
22	claim, or you received payment for your loss in a later tax year Fair market value <b>before</b> casualty or theft	22							
24	Fair market value <b>after</b> casualty or theft	24							
25	Subtract line 24 from line 23	25							
26	Enter the <b>smaller</b> 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.								
	Subtract line 21 from line 26. If zero or less, enter -0	27		$\Box$					
28 Pat	Casualty or theft loss. Add the amounts on line 27. Enter the Summary of Gains and Losses (from s			29	(b) Losses from o			8	
ı aı	<u> </u>	сран	ate i arts ij		(i) Trade, business,	1	ncome-		(c) Gains from casualties or thefts
	(a) Identify casualty or theft				rental, or royalty property	producin		ty	includible in income
	Casualty or Theft	of Pr	operty Held (	)n		Ι.			
29					( )	(			
20	Totals Add the amounts on line 20		30		( )	(			
30	Totals. Add the amounts on line 29					- 4707	7 :0		
31	Combine line 30, columns (b)(i) and (c). Enter the net gair not otherwise required, see instructions			orr	n 4797, line 14. lī F	orm 4797	I	1	-169,578
32	Enter the amount from line 30, column (b)(ii) here. Individu	ıals. er	nter the amount fr	om	income-producina	property			,
	Schedule A (Form 1040), line 16, or Form 1040-NR, Sched	dule A,	line 7. (Do not inc	clu	de any loss on prop	erty used	as		
	an employee.) Estates and trusts, partnerships, and S corp						. 3	2	217,153
	Casualty or Theft o		·					_	70.405
33	Casualty or theft gains from Form 4797, line 32			i			.   3	3	73,435
34					( )	(		_ <u>/</u>	
35	Total losses. Add amounts on line 34, columns (b)(i) and (b	)(ii) .	35	5	·	( 739,5	580	)	
36	Total gains. Add lines 33 and 34, column (c)	, ,			· · · · · · · · · · · · · · · · · · ·			6	192,173
37	Add amounts on line 35, columns (b)(i) and (b)(ii)						. 3	7	1,478,448
38	If the loss on line 37 is <b>more</b> than the gain on line 36:								
а	Combine line 35, column (b)(i) and line 36, and enter the note below. All others, enter this amount on Form 4								
	instructions			31				Ва	-723,187
b	Enter the amount from line 35, column (b)(ii) here. Individu								
	Schedule A (Form 1040), line 16, or Form 1040-NR, Schedule A (Form 1040), Fototop and trusts, anter an the "Other								
	an employee.) Estates and trusts, enter on the "Other corporations, see the <b>Note</b> below					snips and		3b	738,961
39	If the loss on line 37 is <b>less</b> than or <b>equal</b> to the gain on line					Partnershi			
	see the <b>Note</b> below. All others, enter this amount on Form 4							9	176,313
	Note: Partnerships, enter the amount from line 38a, 38b, c								
	S corporations, enter the amount from line 38a or 38b on F	-orm 1	120-S, Schedule	Κ,	ine 10.				Form <b>4684</b> (2020)

Form	4684 (2020) Attachment Sequence No. 26		Page <b>3</b>
Name	e(s) shown on tax return		Identifying number
SEC Pro	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	g the Proceedure 200	cedures in Revenue 09-20. See instructions.)
Pa	rt 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%) 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	1,299
Pa	rt II Required Statements and Declarations (See instructions.)		
	m claiming a theft loss deduction pursuant to Revenue Procedure 2009-20 from a specified fr	audulent arra	ingement conducted by the following
	ividual or entity.		
	me of individual or entity		
Tax	payer identification number (if known)		
	dress		
	ave written documentation to support the amounts reported in Part I of this Section C.		
lar	n 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 $^{\prime}$		pursued and do not intend to pursue
l aç	gree to comply with the conditions and agreements set forth in Revenue Procedure 2009-20 and	this Section	C.
adj	have already filed a return or amended return that does not satisfy the conditions in section 6 ustments or actions that are necessary to comply with those conditions. The tax year(s) for white e(s) on which they were filed are as follows:		, 3

# 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form	4684 (2020) Attachment Sequence No. <b>26</b>			Page <b>3</b>
Name	e(s) shown on tax return		Identifying	number
SE0 Pro	CTION C—Theft Loss Deduction for Ponzi-Type Investment Scheme Uscedure 2009-20 (Complete this section in lieu of Appendix A in Revenue Pr	ing the Pro	ocedures in 109-20. See i	Revenue nstructions.)
Pa	rt 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%) if you have			
	potential third-party recovery	46	<u> </u>	
47		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			
Do	Part II	51		697,015
Pa	Required Statements and Declarations (See instructions.)			
	m claiming a theft loss deduction pursuant to Revenue Procedure 2009-20 from a specified	fraudulent arr	angement cond	ducted by the following
	ividual or entity.			
	me of individual or entity			
	xpayer identification number (if known)			
	dress			
	ave written documentation to support the amounts reported in Part I of this Section C.			
	n a qualified investor, as defined in section 4.03 of Revenue Procedure 2009-20.	Heat I bearing		de a d'Estandita a conse
	have determined the amount of my theft loss deduction using 0.95 on line 46 above, I declare $\gamma$ potential third-party recovery, as that term is defined in section 4.10 of Revenue Procedure 2		it pursued and o	do not intend to pursue
• I a	gree to comply with the conditions and agreements set forth in Revenue Procedure 2009-20 at	nd this Section	1 C.	
adj	have already filed a return or amended return that does not satisfy the conditions in section ustments or actions that are necessary to comply with those conditions. The tax year(s) for we(s) on which they were filed are as follows:			
				Form <b>4684</b> (2020)

Form	4684 (2020)	Attachment Sequence No. 26	Page <b>4</b>
Name	e(s) shown on	tax return	Identifying number
SEC	CTION D	Election To Deduct Federally Declared Disaster Loss in Preceding Tax Yea	r (See instructions.)
Pa	rti E	ection Statement	
		of the information below, the taxpayer elects, under section 165(i) of the Internal Revenue Code, to dedur and that occurred in a federally declared disaster area in the tax year immediately preceding the tax year	
	ch this Sect deduction.	on D 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 th	e name or a description of the federally declared disaster.	_
53	Provide th	e date or dates (mm/dd/yyyy) of the loss or losses attributable to the federally declared disaster.	
54	. ,	e address, including the city or town, county or parish, state and ZIP code where the damaged or des the disaster.	troyed property was located at
Pa	rt II R	evocation of Prior Election	
attrib		of the information below, the taxpayer revokes the prior election under section 165(i) of the Internal federally declared disaster and that occurred in a federally declared disaster area in the tax year imtained.	
	ch this Sec	ion D to your amended return for the tax year immediately preceding the tax year the loss was suction.	ustained to remove the previous
55		e name or a description of the federally declared disaster and the address of the property that was da election was claimed.	maged or destroyed and for
56	. ,	e date (mm/dd/yyyy) you filed the prior election, which you are now revoking. (See instructions and no r 13, 2016.)	te that new rules went into effect
57	•	our payment or otherwise provide evidence for, or explanation of, your arrangements for the repayment ch you received and which resulted from the prior election (which you are now revoking).	•

Form **4684** (2020)

# 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form	4684 (2020)	Attachment Sequence No. 26	Page <b>4</b>
Name	e(s) shown on tax return		Identifying number
SEC	CTION D-Election To	Deduct Federally Declared Disaster Loss in Pr	receding Tax Year (See instructions.)
Pa	art I Election Staten	nent	
	•	below, the taxpayer elects, under section 165(i) of the Internal d d in a federally declared disaster area in the tax year immediate	•
	ch this Section D to your retu deduction.	n or amended return for the tax year immediately preceding	the tax year the loss was sustained to claim the disaster
52	Provide the name or a desc	ription of the federally declared disaster.	
53	Provide the date or dates (n	nm/dd/yyyy) of the loss or losses attributable to the federally of	declared disaster.
54	•	ng the city or town, county or parish, state and ZIP code whe	, , , ,
Pa	rt II Revocation of I	Prior Election	
attrik	· ·	n below, the taxpayer revokes the prior election under section disaster and that occurred in a federally declared disaster	•
	ch this Section D to your am ster loss deduction.	nended return for the tax year immediately preceding the tax	ax year the loss was sustained to remove the previous
55		ription of the federally declared disaster and the address of the	,
56	Specify the date (mm/dd/yy on October 13, 2016.)	yy) you filed the prior election, which you are now revoking. (\$	See instructions and note that new rules went into effect
57		nerwise provide evidence for, or explanation of, your arranger and which resulted from the prior election (which you are now	
			Form <b>4684</b> (2020)

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** 

Nam	e(s) shown on return	Total Forms Fi	led = 3,16	69,087		Identifying n	umber	•
1	Enter the gross proceeds substitute statement) that						1	291,961
Pa	rt I Sales or Excha	nges of Proper	ty Used in a T	rade or Busine	ess and Involunt	ary Conver	sions	From Other
	Than Casualty	or Theft-Most	Property Hel	d More Than 1	Year (see instru	ctions)		
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)
								2,061,493
3	Gain, if any, from Form 46	84, line 39					3	9,010
4	Section 1231 gain from ins						4	176,863
5	Section 1231 gain or (loss)	from like-kind exch	anges from Form	8824			5	10,644
6	Gain, if any, from line 32, f	rom other than casu	alty or theft .				6	665,000
7	Combine lines 2 through 6	. Enter the gain or (lo	oss) here and on t	he appropriate line	as follows		7	2,677,128
	Partnerships and S corp line 10, or Form 1120-S, S				tions for Form 1065,	Schedule K,		
	Individuals, partners, S of line 7 on line 11 below ar losses, or they were reca Schedule D filed with your	nd skip lines 8 and suptured in an earlier	9. If line 7 is a gay	ain and you didn't l gain from line 7 as	have any prior year s	ection 1231		
8	Nonrecaptured net section	•					8	227.826
9	Subtract line 8 from line 7.9 is more than zero, ente capital gain on the Schedu	r the amount from I	ine 8 on line 12 b	pelow and enter the	e gain from line 9 as	a long-term	9	144,459
Pa	rt II Ordinary Gains	and Losses (se	ee instructions	3)				
10	Ordinary gains and losses	not included on line	s 11 through 16 (i	nclude property held	d 1 year or less):			
								394,898
11	Loss, if any, from line $7$ .						11 (	939,374
12	Gain, if any, from line 7 or	amount from line 8,	if applicable .				12	227,823
13	Gain, if any, from line 31						13	604,954
14	Net gain or (loss) from For	m 4684, lines 31 and	138a				14	8,063
15	Ordinary gain from installn						15	2,163
16	Ordinary gain or (loss) from	n like-kind exchange	s from Form 8824	1			16	1,016
17	Combine lines 10 through	16					17	1,926,206
18	For all except individual reand b below. For individual				ine of your return and	l skip lines a		
а	If the loss on line 11 include from income-producing proemployee.) Identify as from	perty on Schedule A	(Form 1040), line	e 16. (Do not include	any loss on property	used as an	18a	0
b	Redetermine the gain or	(loss) on line 17 ex	cluding the loss,	if any, on line 18a	. Enter here and on	Schedule 1		
For F	(Form 1040), Part I, line 4 Paperwork Reduction Act			<u> </u>	Cat. No. 13086I	· · · ·	18b	1,926,206 Form <b>4797</b> (2020)

Form **4797** 

#### Sales of Business Property

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

Department of the Treasury Internal Revenue Service

► Attach to your tax return.

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

OMB No. 1545-0184

Attachment

Sequence No. 27 Name(s) shown on return Identifying number Total Forms Filed = 3.169.087 Enter the gross proceeds from sales or exchanges reported to you for 2020 on Form(s) 1099-B or 1099-S (or 135,048,615 Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (a) Gain or (loss) (d) Gross 2 (a) Description (b) Date acquired (c) Date sold allowed or basis, plus Subtract (f) from the sales price improvements and of property (mo., day, yr.) (mo., day, yr.) allowable since sum of (d) and (e) acquisition expense of sale 155,556,326 183,727 Gain, if any, from Form 4684, line 39 . . . . . . . . . . . . . . . 3 8,042,380 Section 1231 gain from installment sales from Form 6252, line 26 or 37. 4 1,831,654 5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 . . . 65.597.169 6 231,211,257 7 7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows. Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 10.699.019 Nonrecaptured net section 1231 losses from prior years. See instructions . 8 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term 49,147,000 capital gain on the Schedule D filed with your return. See instructions Part II Ordinary Gains and Losses (see instructions) 10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 30,411,897 14,362,928 11 11 3,381,319 12 Gain, if any, from line 7 or amount from line 8, if applicable 12 13 Gain, if any, from line 31 . . . . . . . . . . . 13 15,121,948 14 -223.791 Net gain or (loss) from Form 4684, lines 31 and 38a . . . . . . 14 194,220 Ordinary gain from installment sales from Form 6252, line 25 or 36 . . . 15 84,491 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 34.607.156 17 17 18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below. If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an 0 18a Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 . 18b 34,607,156 Form 4797 (2020) For Paperwork Reduction Act Notice, see separate instructions. Cat. No. 13086I

Form 4797 (2020) Page **2** 

Par	<b>Gain From Disposition of Property Und</b> (see instructions)	ier Se	ctions 1245, 12	250, 1252,	1254,	, and 1255		
19	(a) Description of section 1245, 1250, 1252, 1254, or 125	5 prope	rty:			(b) Date acquimo., 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	/ B	Property	С	Property D
20	Gross sales price (Note: See line 1 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:	T-1						
	Depreciation allowed or allowable from line 22	25a						
	Enter the <b>smaller</b> of line 24 or 25a	25b	589,384					
26	If section 1250 property: If straight line depreciation was used,							
20	enter -0- on line 26g, except for a corporation subject to section 291.							
a	Additional depreciation after 1975. See instructions .	26a						
	·	200						
D	Applicable percentage multiplied by the <b>smaller</b> 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						
	Additional depreciation after 1969 and before 1976	26d						
е	Enter the <b>smaller</b> of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
g	Add lines 26b, 26e, and 26f	26g	16,130					
27	<b>If section 1252 property:</b> Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
_	Soil, water, and land clearing expenses	27a						
	Line 27a multiplied by applicable percentage. See instructions	27b						
		27c	0					
	-	2/6						
20	If section 1254 property:	1						
а	Intangible drilling and development costs, expenditures for development of mines and other natural deposits,	00-						
h	mining exploration costs, and depletion. See instructions Enter the <b>smaller</b> of line 24 or 28a	28a	1,500					
		28b	1,000					
29	If section 1255 property:							
а	Applicable percentage of payments excluded from income under section 126. See instructions	200						
L		29a 29b	*					
un	Enter the <b>smaller</b> of line 24 or 29a. See instructions . <b>Imary of Part III Gains.</b> Complete property column		through D through	gh line 29b l	befor	e going to lin	ie 30.	
30	Total gains for all properties. Add property columns A thro	ough D.	line 24				30	1,079,494
31	Add property columns A through D, lines 25b, 26g, 27c, 2	_					31	604,966
32	Subtract line 31 from line 30. Enter the portion from casu	ualty or	theft on Form 4684	I, line 33. Ent	er the	portion from		
ar	IV Recapture Amounts Under Sections 17		1 280F(b)(2) Wh				32 50%	665,773 or Less
	(see instructions)							
						(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			

# 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

	4797 (2020)  Tt III Gain From Disposition of Property Und	ler Se	ections 1245, 13	250, 1252	1254	and 1255		Page
	(see instructions)		, 		,	(b) Date acq	uirod	(c) Date sold
19	(a) Description of section 1245, 1250, 1252, 1254, or 125	5 prope	erty:			(mo., day, y		(mo., day, yr.)
A								
E	3							
(	-							
	)							
	These columns valids to the granulties on lines 404 through 400		Property A	Property	y B	Property	C	Property D
20	These columns relate to the properties on lines 19A through 19E Gross sales price (Note: See line 1 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:							
	Depreciation allowed or allowable from line 22	25a	44.007.000					
	Enter the <b>smaller</b> of line 24 or 25a	25b	14,627,820					
26	If section 1250 property: If straight line depreciation was used,							
_	enter -0- on line 26g, except for a corporation subject to section 291.  Additional depreciation after 1975. See instructions	26a						
	·	20a						
į.	Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a. See instructions	26b						
C	Subtract line 26a from line 24. If residential rental property	26c						
,	or line 24 isn't more than line 26a, skip lines 26d and 26e  Additional depreciation after 1969 and before 1976.	26d						
	Enter the <b>smaller</b> of line 26c or 26d	26e						
f		26f						
	Add lines 26b, 26e, and 26f	26g	470,846					
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. Soil, water, and land clearing expenses	27a						
	Line 27a multiplied by applicable percentage. See instructions	27b						
	Enter the <b>smaller</b> of line 24 or 27b	27c	0					
28	If section 1254 property:							
a	Intangible drilling and development costs, expenditures							
	for development of mines and other natural deposits,							
	mining exploration costs, and depletion. See instructions	28a						
	Enter the <b>smaller</b> of line 24 or 28a	28b	47,265					
29	If section 1255 property:							
a	Applicable percentage of payments excluded from income under section 126. See instructions	29a						
Ł	Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b	*					
	nmary of Part III Gains. Complete property colur		through D throu	gh line 29b	before	going to lir	ne 30.	
30	Total gains for all properties. Add property columns A thro	ough D,	line 24				30	80,792,551
31	Add property columns A through D, lines 25b, 26g, 27c, 2	8b, and	l 29b. Enter here an	d on line 13			31	15,121,948
32	Subtract line 31 from line 30. Enter the portion from case other than casualty or theft on Form 4797, line 6		theft on Form 468				32	65,670,603
Par	Recapture Amounts Under Sections 17 (see instructions)	79 and	d 280F(b)(2) Wh	en Busine	ss Us	se Drops to	50%	or Less
	,					(a) Section	on	(b) Section
						179		280F(b)(2)
33	Section 179 expense deduction or depreciation allowable	in prior	years		33			
34		•			34			
35	Recapture amount. Subtract line 34 from line 33. See the	instruct	ions for where to re	port	35			Form <b>4797</b> (202

Department of the Treasury Internal Revenue Service (99)

Farm Rental Income and Expenses
(Crop and Livestock Shares (Not Cash) Received by Landowner (or Sub-Lessor))
(Income not subject to self-employment tax)

▶ Attach to Form 1040, Form 1040-SR, or Form 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 so	cial secu	ırity numbe	r
	Total Forms	Filed	<b>=</b> 461,875				Fmploye	r ID nur	nber (EIN),	if any
Α	Did you actively participate in the operati	on of	this farm during 2	2020?	See instruc	tions			Yes	No
Part	<u> </u>								the equi	valent.
1	Income from production of livestock, pro	duce,	grains, and other	crops				1	191,	051
2a	Cooperative distributions (Form(s) 1099-F	PATR)	2a	74,0	075	<b>2b</b> Taxable am	ount	2b		
3a	Agricultural program payments (see instru	uction	ıs) <b>3a</b>	185,	376	<b>3b</b> Taxable am	ount	3b	183,	395
4	Commodity Credit Corporation (CCC) loa	ıns (se	ee instructions):							
а	CCC loans reported under election							4a	*	
b	CCC loans forfeited			C		<b>4c</b> Taxable am	ount	4c		
5	Crop insurance proceeds and federal cro		1 1				_		0.4.6	
а	Amount received in 2020			23.2		<b>5b</b> Taxable am		5b	21,6	89
C	If election to defer to 2021 is attached, ch					deferred from (	2019	5d 6	226,	580
6 7	Other income, including federal and state <b>Gross farm rental income.</b> Add amount						al here	0	220,	
•	and on Schedule E (Form 1040), line 42							7	447,	120
Part	II Expenses—Farm Rental Prope	erty.	Do not include	perso	nal or livin	ng expenses.				
8	Car and truck expenses (see			21		and profit-	U			
	Schedule F (Form 1040) instructions).				•			21	0	
_	Also attach Form 4562	8	37,838	22	Rent or le					
9	Chemicals	9 10	60,337 6,436	а	Vehicles,	machinery, nt (see instruct		00		
	Conservation expenses (see instructions)  Custom hire (machine work)		38,799			-		22a 22b		
11 12	Depreciation and section 179 expense	11	30,733	23	-	nd, animals, etc and maintenan		23	121,	106
'-	deduction not claimed elsewhere	12	137,988	24	-	nd plants		24	44,C	
13	Employee benefit programs other than		,	25		and warehousi		25	11,0	
.0	on line 21 (see Schedule F (Form 1040)			26	_		_	26	60,4	72
	instructions)	13	*	27				27	316,	
14	Feed	14	7,952	28	Utilities.			28	,	
15	Fertilizers and lime	15	72,095	29	Veterinar					
16	Freight and trucking	16			medicine			29		
17	Gasoline, fuel, and oil	17	71,538	30	Other exp	penses (specif	y):			
18	Insurance (other than health)	18	199,019	a				30a		
19	Interest (see instructions):	40	44.004	b				30b		
a	Mortgage (paid to banks, etc.) Other	19a	44,821	C				30c		
b 20	Labor hired (less employment credits)	19b	17,446	d e				30d 30e		
20	(see Schedule F (Form 1040)			f				30f		
	instructions)	20	10,948	g				30g		
31	Total expenses. Add lines 8 through 30c						. ▶	31	390,	923
32	Net farm rental income or (loss). Subtra on Schedule E (Form 1040), line 40. If the	act lin	e 31 from line 7. I			•		32	454,	830
33				_				33		
34	If line 32 is a loss, check the b	oox 1	that describes	your	investment	t in this ac	tivity.	34a	All investm	nent is at risk.
							. }	34b		estment is not
_			le loss (+) / susp						at risk.	
С	You may have to complete <b>Form 8582</b> you checked. If you checked box 34b, you		•							
	either case, enter the <b>deductible loss</b> he							34c	78,1	153

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

Form **4835** 

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

(Crop and Livestock Shares (Not Cash) Received by Landowner (or Sub-Lessor))
(Income not subject to self-employment tax)

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

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

OMB No. 1545-0074

2020

Attachment
Sequence No. 37

Name(s) shown on tax return Your social security number Total Forms Filed = 461,875 Employer ID number (EIN), if any Part I Gross Farm Rental Income - Based on Production. Include amounts converted to cash or the equivalent. 1 Income from production of livestock, produce, grains, and other crops . . . . . . . . . . . . . . . 4,780,232 2a Cooperative distributions (Form(s) 1099-PATR) . . 2a 1,235,234 **2b** Taxable amount 2b Agricultural program payments (see instructions) . . 3a 3b 1,237,186 1,247,976 **3b** Taxable amount 4 Commodity Credit Corporation (CCC) loans (see instructions): CCC loans reported under election . . . . . . 4a CCC loans forfeited . . . . . . . . . . . . . . . 4b 4c Taxable amount b 4c 0 5 Crop insurance proceeds and federal crop disaster payments (see instructions): Amount received in 2020 . . . . . . . . . . . . . . . . 5a 229,519 **5b** Taxable amount 5b If election to defer to 2021 is attached, check here ▶ □ 5d Amount deferred from 2019 5d С 3,430,872 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) 6 7 Gross farm rental income. Add amounts in the right column for lines 1 through 6. Enter the total here 7 10,642,564 Part II Expenses - Farm Rental Property. Do not include personal or living expenses. Pension and profit-sharing 8 Car truck expenses (see Schedule F (Form 1040) instructions). plans . . . . . . . . 21 0 Also attach Form 4562 . . . . . 44.899 8 22 Rent or lease: 414.249 9 Vehicles, 9 Chemicals . . . . . . . . . machinery, 29,314 equipment (see instructions) Conservation expenses (see instructions) 10 10 22a 283,157 11 Custom hire (machine work) . . . . 11 Other (land, animals, etc.) . . 22b 12 Depreciation and section 179 expense 23 23 Repairs and maintenance . 338,227 deduction not claimed elsewhere . . 988,603 12 24 Seeds and plants . . . . 24 338.654 25 25 Employee benefit programs other than Storage and warehousing 13 on line 21 (see Schedule F (Form 1040) 26 Supplies . . . . . . . 26 73.141 instructions) . . . . . . . . . . 13 27 Taxes . . . . . . . . 27 1,014,868 14 14 13.995 28 Utilities . . . . . . 28 29 480,846 Veterinary, breeding, and 15 Fertilizers and lime . . . . . 15 medicine . . . . . . 16 Freight and trucking . . . . . . 16 29 17 Gasoline, fuel, and oil . . . . . . 17 68.749 30 Other expenses (specify): 18 Insurance (other than health) . . 18 316,383 30a а Interest (see instructions): 30b 19 b 414,298 30c Mortgage (paid to banks, etc.) . . . 19a а 80,166 b Other . . . . . . . . . . . . . 19b d 30d 20 Labor hired (less employment credits) 30e (see Schedule F (Form 1040) 30f instructions) . . . . . . . . . . . 20 53,578 30g 6,066,613 31 31 Net farm rental income or (loss). Subtract line 31 from line 7. If the result is income, enter it here and 32 on Schedule E (Form 1040), line 40. If the result is a loss, you must go to line 34. See instructions. . . 4,575,951 32 33 33 If line 32 is a loss, check the box that describes your investment in this activity. **34a** All investment is at risk. 34b Some investment is not Nondeductible loss (+) / suspended carryover (-) = 317,230 You may have to complete Form 8582 to determine your deductible loss, regardless of which box you checked. If you checked box 34b, you must complete Form 6198 before going to Form 8582. In either case, enter the deductible loss here and on Schedule E (Form 1040), line 40. See instructions. 34c 524.933

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

Form **4952** 

Department of the Treasury Internal Revenue Service (99)

#### **Investment Interest Expense Deduction**

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

► Attach to your tax return.

OMB No. 1545-0191

2020
Attachment
Sequence No. 51

Identifying number Name(s) shown on return Total Forms Filed = Part I **Total Investment Interest Expense** Investment interest expense paid or accrued in 2020 (see instructions) 917,467 2 Disallowed investment interest expense from 2019 Form 4952, line 7 . . . . . . . 2 636,500 3 **Total investment interest expense.** Add lines 1 and 2 . . . . . . . . . . . . . . . . 1,315,547 Part II **Net Investment Income** Gross income from property held for investment (excluding any net gain from 4a 4a 1,198,106 4b 986,452 4c 1,140,734 **d** Net gain from the disposition of property held for investment . . . . . . 4d 596,057 Enter the **smaller** of line 4d or your net capital gain from the disposition of property held for investment. See instructions . . . . . . . . . . . . . . . . 4e 522,678 4f f 285,807 Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 115,248 1,162,821 h 4h 5 5 338,722 **Net investment income.** Subtract line 5 from line 4h. If zero or less, enter -0-. 6 1,120,074 6 Part III **Investment Interest Expense Deduction** 7 Disallowed investment interest expense to be carried forward to 2021. Subtract line 6 from 7 638.500 8 1,115,094 Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions

For Paperwork Reduction Act Notice, see page 4.

Cat. No. 13177Y

Form **4952** (2020)

For Paperwork Reduction Act Notice, see page 4.

#### **Investment Interest Expense Deduction**

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

OMB No. 1545-0191

Form **4952** (2020)

Department of the Treasury Attachment Sequence No. **51** Internal Revenue Service (99) Identifying number Name(s) shown on return Total Forms Filed = 1,323,023 Part I **Total Investment Interest Expense** 1 Investment interest expense paid or accrued in 2020 (see instructions) 21,465,043 2 Disallowed investment interest expense from 2019 Form 4952, line 7 . . . . . . . . . . 2 30,332,127 3 51,797,169 Part II **Net Investment Income** Gross income from property held for investment (excluding any net gain from 4a 169,325,824 4a Qualified dividends included on line 4a . . . . . . . . . . . 89,871,158 4c 79,454,666 **d** Net gain from the disposition of property held for investment . . . . . . 381,980,022 Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions . . . . . . . . . . . . . . . 319,707,313 4f 62,272,709 Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 4,354,734 146,082,109 h 4h 9,316,310 5 5 **Net investment income.** Subtract line 5 from line 4h. If zero or less, enter -0- . . . . 137,618,087 6 Part III **Investment Interest Expense Deduction** 7 Disallowed investment interest expense to be carried forward to 2021. Subtract line 6 from 7 29.616.078 Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions 22,181,092 8

Cat. No. 13177Y

(Rev. February 2021) Department of the Treasury Internal Revenue Service (99)

# Additional Taxes on Qualified Plans (Including IRAs) and Other Tax-Favored Accounts Attach to Form 1040, 1040-SR, or 1040-NR.

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

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

Name o	of individual subject to additional	tax. If married filing jointly, see instructions  Total For	s. <b>ms Filed =</b> 2,590,5	04	Your soc	ial security number
		Home address (number and street), or F	P.O. box if mail is not delivered	to your home		Apt. no.
if You Form	Your Address Only Are Filing This by Itself and Not Your Tax Return	City, town or post office, state, and ZIP spaces below. See instructions.	code. If you have a foreign add	dress, also complete the		an amended heck here ▶ □
******	Foreign country name Foreign province/state/county Fo					
-	-	10% tax on the full amount of without filing Form 5329. See ins		you may be able to r	eport thi	s tax directly on
Par	Additional Tax of 59½ from a qualified directly on Schedu	on Early Distributions. Compled retirement plan (including an Iule 2 (Form 1040)—see above). Ye additional tax on early distributi	lete this part if you took RA) or modified endowr 'ou may also have to co	nent contract (unless mplete this part to ind	you are i	reporting this tax at you qualify for
1	Early distributions include	dible in income (see instructions).	For Roth IRA distribution	ns, see instructions.	1	1,685,945
2	Early distributions include	ded on line 1 that are not subject	to the additional tax (see	e instructions).		
	Enter the appropriate ex	ception number from the instruct	tions:		2	987,305
3	Amount subject to addit	ional tax. Subtract line 2 from line	e1		3	884,241
4		0% (0.10) of line 3. Include this an		•	4	868,688
	- · · · · · · · · · · · · · · · · · · ·	the amount on line 3 was a distri ount on line 4 instead of 10%. Se		RA, you may have to		
Part		on Certain Distributions Fror				
		amount in income, on Scheduluition program (QTP), or an ABLE		, from a Coverdell ed	lucation	savings account
				unt .	- F	074.000
5		income from a Coverdell ESA, and line 5 that are not subject to the			6	274,398
6 7		ional tax. Subtract line 6 from line	•	ructions)	7	180,447
8	· ·	19% (0.10) of line 7. Include this an			8	178,539
Part		on Excess Contributions to	•	•		•
		2020 than is allowable or you ha				tod more to your
9		outions from line 16 of your 2019 F				
10	•	contributions for 2020 are less				
	•	see instructions. Otherwise, enter		10		
11	2020 traditional IRA dist	ributions included in income (see	e instructions)	11		
12	2020 distributions of price	or year excess contributions (see	instructions)	12		
13	Add lines 10, 11, and 12				13	
14	<u> </u>	butions. Subtract line 13 from line			14	
15		2020 (see instructions)			15	
16		ns. Add lines 14 and 15			16	38,204
17		(0.06) of the <b>smaller</b> of line 16 <b>or</b> contributions made in 2021). Include			17	29,462
Part		on Excess Contributions to	•		buted m	ore to your Roth
		is allowable or you had an amou	<del>-</del>			
18	•	outions from line 24 of your 2019 F		ns. If zero, go to line 23	18	64,121
19		utions for 2020 are less than you tions. Otherwise, enter -0		19		
20		your Roth IRAs (see instructions)		<b>20</b> 10,546		
21	Add lines 19 and 20 .				21	
22	Prior year excess contrib	outions. Subtract line 21 from line	e 18. If zero or less, ente	r-0	22	
23		2020 (see instructions)			23	48,914
24	Total excess contributio	ns. Add lines 22 and 23			24	85,388
25		5 (0.06) of the <b>smaller</b> of line 24 <b>o</b> stributions made in 2021). Include t			25	76,040

OMB No. 1545-0074

5329 Form

### **Additional Taxes on Qualified Plans**

Form (Rev. February 2021) Department of the Treasury Internal Revenue Service (99)	(1	ncluding IRAs) and C  Attach to Form  Attach to Form 5  Go to www.irs.gov/Form5329 f	1040, 104	•	Ä	2020 Attachment Sequence No. 29
Name of individual subject to a	dditional	tax. If married filing jointly, see instruction <b>Total Fo</b> i	ns. 'ms File	<b>d</b> = 2,590,504	Your so	ocial security number
		Home address (number and street), or	P.O. box it	f mail is not delivered to your home		Apt. no.
i offit by itself and not				If this is an amended return, check here ▶		
Foreign country name Foreign province/state/county Foreign province/state/county				Foreign postal code		
		10% tax on the full amount of without filing Form 5329. See in		y distributions, you may be able to re	eport tl	his tax directly on
59½ from a directly on S	qualifie Schedu	ed retirement plan (including an le 2 (Form 1040)—see above).	IRA) or r ⁄ou may	part if you took a taxable distribution modified endowment contract (unless y also have to complete this part to ind or certain Roth IRA distributions. See i	ou are licate t	e reporting this tax hat you qualify for
•		,		th IRA distributions, see instructions.	1	27,466,424
•		led on line 1 that are not subject		•	2	18,259,286
• • • •	Enter the appropriate exception number from the instructions:					
· · · · · · · · · · · · · · · · · · ·					3	9,207,138 930,493
4 Additional tax. Enter 10% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040), line 6 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.						
include 25 % Of the	<u> </u>	Julit off life 4 firstead of 1076. Se	- IIISIIU	CHOIS.		

Additional Tax on Certain Distributions From Education Accounts and ABLE Accounts. Complete this part Part II if you included an amount in income, on Schedule 1 (Form 1040), line 8, from a Coverdell education savings account (ESA), a qualified tuition program (QTP), or an ABLE account.

5	Distributions included in income from a Coverdell ESA, a QTP, or an ABLE account	5	825,892
6	Distributions included on line 5 that are not subject to the additional tax (see instructions)	6	
7	Amount subject to additional tax. Subtract line 6 from line 5	7	557,218
8	Additional tax. Enter 10% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040), line 6	8	56,043

Part III Additional Tax on Excess Contributions to Traditional IRAs. Complete this part if you contributed more to your traditional IRAs for 2020 than is allowable or you had an amount on line 17 of your 2019 Form 5329.

9	Enter your excess contributions from line 16 of your 2019 Form 5329. See instruction	zero, go to line 15	9		
10	If your traditional IRA contributions for 2020 are less than your maximum				
	allowable contribution, see instructions. Otherwise, enter -0				
11	2020 traditional IRA distributions included in income (see instructions)				
12	2020 distributions of prior year excess contributions (see instructions)				
13	Add lines 10, 11, and 12	13			
14	Prior year excess contributions. Subtract line 13 from line 9. If zero or less, enter		14		
15	Excess contributions for 2020 (see instructions)			15	
16	Total excess contributions. Add lines 14 and 15		16	681,538	
17	Additional tax. Enter 6% (0.06) of the smaller of line 16 or the value of your traditional IRAs on December				
	31, 2020 (including 2020 contributions made in 2021). Include this amount on Schedule	17	31,052		
Dart	V Additional Tay on Execus Contributions to Both IDAs Complete	+bio +	and if you contribu	,+ a d   a	acre to vour Deth

Additional Tax on Excess Contributions to Roth IRAs. Complete this part if you contributed more to your Roth IRAs for 2020 than is allowable or you had an amount on line 25 of your 2019 Form 5329.

18	Enter your excess contributions from line 24 of your 2019 Form 5329. See instructions. If zero, go to line 23		18	280,117
19	If your Roth IRA contributions for 2020 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0			
20	2020 distributions from your Roth IRAs (see instructions)	,946		
21	Add lines 19 and 20		21	
22	Prior year excess contributions. Subtract line 21 from line 18. If zero or less, enter -0		22	
23	Excess contributions for 2020 (see instructions)		23	152,782
24	Total excess contributions. Add lines 22 and 23		24	308,021
25	<b>Additional tax.</b> Enter 6% (0.06) of the <b>smaller</b> of line 24 <b>or</b> the value of your Roth IRAs on Dece 2020 (including 2020 contributions made in 2021). Include this amount on Schedule 2 (Form 1040)		25	16,707

### 2020 Line Item Estimates—All figures are estimates based on samples

		of returns filed for selected lin		pics.	
Form F3		or returns med for selected in			Daga 2
	29 (2020)	butions to Coverdell ESAs C		:6 +1	Page <b>2</b>
Part	Additional Tax on Excess Contri Coverdell ESAs for 2020 were more that				
26	Enter the excess contributions from line 32 of				1 3029.
20 27	If the contributions to your Coverdell ES		s. II 2 <del>0</del> 10, go to II	20	
21	maximum allowable contribution, see instruc		27		
28	2020 distributions from your Coverdell ESAs	·	28		
29	<u> </u>			29	
30	Prior year excess contributions. Subtract line				
31	Excess contributions for 2020 (see instruction				
32	Total excess contributions. Add lines 30 and				*
33	Additional tax. Enter 6% (0.06) of the sm				
	December 31, 2020 (including 2020 contribution				
	(Form 1040), line 6				*
<b>Part</b>					oloyer contributed
	more to your Archer MSAs for 2020 tha	n is allowable or you had an amount	on line 41 of yo	our 2019 Forn	า 5329.
34	Enter the excess contributions from line 40 of	your 2019 Form 5329. See instruction	s. If zero, go to	line 39 <b>34</b>	
35	If the contributions to your Archer MSAs for	2020 are less than the maximum			
	allowable contribution, see instructions. Other	·	35		
36	2020 distributions from your Archer MSAs from		36		
37					
38	Prior year excess contributions. Subtract line				
39	Excess contributions for 2020 (see instruction				
40	Total excess contributions. Add lines 38 and				9,345
41	Additional tax. Enter 6% (0.06) of the sn				
	December 31, 2020 (including 2020 contributions 1040), line 6				0.700
Dort V	(Form 1040), line 6				6,792
Part '	Additional Tax on Excess Contr someone on your behalf, or your emp	_	•	•	•
	amount on line 49 of your 2019 Form 5		A3 101 2020 til	an is allowar	ne or you had an
42	Enter the excess contributions from line 48 of		line 47	42	
43	If the contributions to your HSAs for 20			42	
70	allowable contribution, see instructions. Other		43		
44	2020 distributions from your HSAs from Forr	·	44		
45	<u> </u>			45	
46	Prior year excess contributions. Subtract line			46	_
47	Excess contributions for 2020 (see instruction	ns)		47	
48	Total excess contributions. Add lines 46 and	•			436,235
49	Additional tax. Enter 6% (0.06) of the small	er of line 48 or the value of your HS	SAs on Decemb	er 31,	
	2020 (including 2020 contributions made in 20	21). Include this amount on Schedule	2 (Form 1040),	line 6 <b>49</b>	335,873
Part \	Additional Tax on Excess Contrib	outions to an ABLE Account. Co	omplete this pa	rt if contributi	ons to your ABLE
	account for 2020 were more than is allo	wable.			
50	Excess contributions for 2020 (see instruction	•			0
51	Additional tax. Enter 6% (0.06) of the sm				_
	December 31, 2020. Include this amount on				0
Part			•	•	Complete this part
	if you did not receive the minimum requ				
52	Minimum required distribution for 2020 (see	•			
53 54	Amount actually distributed to you in 2020 .				*
54 55	Subtract line 53 from line 52. If zero or less, 6				*
55	Additional tax. Enter 50% (0.50) of line 54. I	`			et of my knowledge and
	lere Only if You belief, it is true, correct, and completing This Form	re that I have examined this form, including accordete. Declaration of preparer (other than taxpayer) is	based on all informa	ition of which prep	arer has any knowledge.
	ing This Form		<b>k</b>		
	Tax Return Your signature		<b>)</b> <sub>□</sub>	ate	
		reparer's signature	Date	Chock D if	PTIN

Check if self-employed Paid **Preparer** Firm's name Firm's EIN ▶ **Use Only** Firm's address ▶ Phone no.

Form **5329** (2020)

## 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 53	29 (2020	0)				Page 2
Part '		Additional Tax on Excess Contributions to Coverdell ESAs. Comp		•		-
		Coverdell ESAs for 2020 were more than is allowable or you had an amount on I				<u>1 5329.</u>
26		the excess contributions from line 32 of your 2019 Form 5329. See instructions. If z	zero, go t	o line 31	26	
27	maxir	contributions to your Coverdell ESAs for 2020 were less than the num allowable contribution, see instructions. Otherwise, enter -0 27				
28		distributions from your Coverdell ESAs (see instructions)				
29		nes 27 and 28			29	
30 31		year excess contributions. Subtract line 29 from line 26. If zero or less, enter -0- ss contributions for 2020 (see instructions)		+	30 31	
31 32		excess contributions. Add lines 30 and 31			32	*
		ional tax. Enter 6% (0.06) of the smaller of line 32 or the value of your Co		1	32	
33	Dece	mber 31, 2020 (including 2020 contributions made in 2021). Include this amount 1040), line 6	nt on Scl	hedule 2	33	*
Part \		Additional Tax on Excess Contributions to Archer MSAs. Complete th				oloyer contributed
		more to your Archer MSAs for 2020 than is allowable or you had an amount on I				•
34	Enter	the excess contributions from line 40 of your 2019 Form 5329. See instructions. If	zero, go t	to line 39	34	
35		contributions to your Archer MSAs for 2020 are less than the maximum able contribution, see instructions. Otherwise, enter -0				
36		distributions from your Archer MSAs from Form 8853, line 8				
37	Add I	nes 35 and 36			37	
38		year excess contributions. Subtract line 37 from line 34. If zero or less, enter -0-			38	
39		ss contributions for 2020 (see instructions)			39	
40		excess contributions. Add lines 38 and 39		1	40	23,725
41		ional tax. Enter 6% (0.06) of the smaller of line 40 or the value of your				
		mber 31, 2020 (including 2020 contributions made in 2021). Include this amou			41	E74
Part \		1040), line 6				571
		someone on your behalf, or your employer contributed more to your HSAs f	•	•		
		amount on line 49 of your 2019 Form 5329.				
42	Enter	the excess contributions from line 48 of your 2019 Form 5329. If zero, go to line	e 47 .		42	
43		contributions to your HSAs for 2020 are less than the maximum				
		able contribution, see instructions. Otherwise, enter -0				
44		distributions from your HSAs from Form 8889, line 16				
45		nes 43 and 44		+	45	
46 47		year excess contributions. Subtract line 45 from line 42. If zero or less, enter -0-		+	46	
47 48		ss contributions for 2020 (see instructions)			47 48	007.044
		ional tax. Enter 6% (0.06) of the smaller of line 48 or the value of your HSAs	on Dogor	 mbor 21	40	887,641
43		(including 2020 contributions made in 2021). Include this amount on Schedule 2 (F			49	30,319
Part V	_	Additional Tax on Excess Contributions to an ABLE Account. Comp		•	ributi	
		account for 2020 were more than is allowable.				
50		ss contributions for 2020 (see instructions)			50	0
51		ional tax. Enter 6% (0.06) of the smaller of line 50 or the value of your Amber 31, 2020. Include this amount on Schedule 2 (Form 1040), line 6			51	0
Part I		Additional Tax on Excess Accumulation in Qualified Retirement Pla			_	
		if you did not receive the minimum required distribution from your qualified retire	•	•	,-	
52		num required distribution for 2020 (see instructions)			52	
53	Amou	int actually distributed to you in 2020		[	53	
54	Subtr	act line 53 from line 52. If zero or less, enter -0		[	54	1,171
55	Addit	ional tax. Enter 50% (0.50) of line 54. Include this amount on Schedule 2 (Form			55	586
Are Fil	ing Th	unly if You his Form I Not With Under penalties of perjury, I declare that I have examined this form, including accompanies Form I Not With Under penalties of perjury, I declare that I have examined this form, including accompanies to belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is base	nying attachred on all info	ments, and to rmation of which	the bes ch prepa	at of my knowledge and arer has any knowledge.
Your T			— <i>•</i>	Date		
Paid		Print/Type preparer's name Preparer's signature Date	9	Check [self-emp		PTIN
Prepa		Firm's name	Fi	rm's EIN ▶		
Use (	וחע	Firm's address ▶		hone no.		

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

Department of the Treasury Internal Revenue Service

# **Repayment of the First-Time**

Homebuyer Credit

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

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

OMB No. 1545-0074

Attachment Sequence No. **58** 

Name shown on return

Total Forms Filed = 124,793

Your social security number

Par	Disposition or Change in Use of Main Home for Which the Credit Was Claimed				
1	Enter the date you disposed of, or ceased using as your main home, the home for which you claimed the credit (MM/DD/YYYY). See instructions	ne ▶			
2	If you meet the following conditions, check here				
	I (or my spouse if married) am, or was, a member of the uniformed services or Foreign Service, or an 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 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-spous settlement). Go to Part II below.	se as	part of my divorce		
d	I converted the entire home to a rental or business use OR I still own the home but no longer use it as my below.	main l	nome. Go to Part II		
е	☐ I transferred the home to my spouse (or ex-spouse as part of my divorce settlement). The full name of my expouse (or ex-spouse as part of my divorce settlement).	ex-spc	ouse is <b>&gt;</b>		
	The responsibility for repayment of the credit is transferred to your spouse or ex-spouse. Stop here.				
f	My home was destroyed, condemned, or sold under threat of condemnation and I had a gain. See instruct				
g h	<ul> <li>✓ My home was destroyed, condemned, or sold under threat of condemnation and I didn't have a gain. See</li> <li>✓ The taxpayer who claimed the credit died in 2020. No repayment of the credit is required of the deceased</li> </ul>				
"	a joint return for 2020 with the deceased taxpayer, see instructions. Otherwise, stop here.	ιαχρα	yer. II you are iiiiig		
Part	II Repayment of the Credit				
4	Enter the amount of the credit you claimed on Form 5405 for 2008. See instructions if you filed a joint return for 2008 or you checked the box on line 3f or 3g	4	60,688		
5	Enter the amount of the credit you repaid with your tax returns for the years 2010 through 2019	5	57,094		
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	56,368		
7	Enter the gain on the disposition of your main home (from line 15 below)	7	17,833		
8	Amount of the credit to be repaid. See instructions	8	79,813		
	Next: Enter the amount from line 8 on your 2020 Schedule 2 (Form 1040), line 7b.				
Part					
hroug and 12	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	26,167		
10	Selling expenses (including commissions, advertising and legal fees, and seller-paid loan charges) or expenses in getting the condemnation award	10	22,637		
11	Subtract line 10 from line 9. This is the amount realized on the sale of the home	11	26,167		
12	Adjusted basis of home sold (see instructions)	12	25,162		
13	Enter the first-time homebuyer credit claimed on Form 5405 <b>minus</b> the amount of the credit you repaid with your tax returns for the years 2010 through 2019	13	23,863		
14	Subtract line 13 from line 12. This is the adjusted basis for purposes of repaying the credit	14	25,164		
15	Subtract line 14 from line 11	15	26,170		
	• If line 15 is more than -0-, you have a gain. Check the box on line 3a and complete Part II. <b>However,</b> 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 2018.				
	• 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.				

Department of the Treasury

#### **Repayment of the First-Time Homebuyer Credit**

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

OMB No. 1545-0074

Attachment

Sequence No. 58 ▶ Go to www.irs.gov/Form5405 for instructions and the latest information. Internal Revenue Service Your social security number Name shown on return Total Forms Filed = 124.793 Disposition or Change in Use of Main Home for Which the Credit Was Claimed Part I 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 2 I (or my spouse if married) am, or was, a member of the uniformed services or Foreign Service, or an employee of the intelligence community. I sold the home, or it ceased to be my main home, in connection with U.S. Government orders for qualified official extended duty service. No repayment of the credit is required. See instructions. Stop here. Check the box below that applies to you. See the instructions for the definition of "related person." 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. 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. I sold the home to a related person OR I gave the home to someone other than my spouse (or ex-spouse as part of my divorce settlement). Go to Part II below. I converted the entire home to a rental or business use OR I still own the home but no longer use it as my main home. Go to Part II ☐ I transferred the home to my spouse (or ex-spouse as part of my divorce settlement). The full name of my ex-spouse is The responsibility for repayment of the credit is transferred to your spouse or ex-spouse. Stop here. My home was destroyed, condemned, or sold under threat of condemnation and I had a gain. See instructions. My home was destroyed, condemned, or sold under threat of condemnation and I didn't have a gain. See instructions. The taxpayer who claimed the credit died in 2020. No repayment of the credit is required of the deceased taxpayer. If you are filing a joint return for 2020 with the deceased taxpayer, see instructions. Otherwise, stop here. Part II Repayment of the Credit Enter the amount of the credit you claimed on Form 5405 for 2008. See instructions if you filed a joint return 401.295 4 5 Enter the amount of the credit you repaid with your tax returns for the years 2010 through 2019 . . . 5 253.777 6 Subtract line 5 from line 4. If you checked the box on line 3f or 3g, see instructions. If you checked the box 147,518 6 945,730 Enter the gain on the disposition of your main home (from line 15 below) . . . . . 7 7 72,044 8 Next: Enter the amount from line 8 on your 2020 Schedule 2 (Form 1040), line 7b. Part III Form 5405 Gain or (Loss) Worksheet Note: Complete this part only if your home was destroyed or you sold your home to someone who isn't related to you (including a sale through condemnation or under threat of condemnation). See Pub. 523, Selling Your Home, for information on what to enter on lines 9, 10, and 12. But if you sold your home through condemnation, see chapter 1 in Pub. 544, Sales and Other Dispositions of Assets, for information on what to enter on lines 9 and 10. 9 6,213,013 10 Selling expenses (including commissions, advertising and legal fees, and seller-paid loan charges) or 10 737,306 Subtract line 10 from line 9. This is the amount realized on the sale of the home . . . . 11 11 5,475,708 12 Adjusted basis of home sold (see instructions) . . . . . . . . . . . . 12 5,086,138 13 Enter the first-time homebuyer credit claimed on Form 5405 minus the amount of the credit you repaid with 13 66,250 Subtract line 13 from line 12. This is the adjusted basis for purposes of repaying the credit 14 14 5,019,888 15 455,820

• 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 2018. • If line 15 is -0- or less, check the box on line 3b. However, if your home was destroyed or you sold the home through condemnation or under threat of condemnation, check the box on line 3g instead. You don't

have to repay the credit.

### Form **5695**

Department of the Treasury Internal Revenue Service

#### **Residential Energy Credits**

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

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

OMB No. 1545-0074

2020

Attachment
Sequence No. 158

Name(s) shown on return

Total Forms Filed = 2,416,669

Attachment Sequence No. **158** Your social security number

Part I Residential Energy Efficient Property Credit (See instructions before completing this part.) Note: Skip lines 1 through 11 if you only have a credit carryforward from 2019. 1 1 Qualified solar electric property costs 603.644 2 Qualified solar water heating property costs 2 113,673 3 Qualified small wind energy property costs . . . . 29,342 Qualified geothermal heat pump property costs . . . 4 55,204 5 Add lines 1 through 4 . . . . . . . . . . . . . 5 711,161 6 Multiply line 5 by 26% (0.26) 6 708.884 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 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 Qualified fuel cell property costs . . . . . 8 14,961 9 14,961 Multiply line 8 by 26% (0.26) 9 10 Kilowatt capacity of property on line 8 above . . . 13,962 11 Enter the smaller of line 9 or line 10 . 11 12,948 12 Credit carryforward from 2019. Enter the amount, if any, from your 2019 Form 5695, line 16 12 367,094 13 Add lines 6, 11, and 12 . . . . . . . . . . 13 1,024,921 14 Limitation based on tax liability. Enter the amount from the Residential Energy Efficient Property 14 1,037,901 15 Residential energy efficient property credit. Enter the smaller of line 13 or line 14. Also include this 15 897.624 16 Credit carryforward to 2021. If line 15 is less than line 13, subtract line 15 16 402,595 

### Form **5695**

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

Name(s) shown on return

Total Forms Filed = 2,416,669

Attachment Sequence No. **158** Your social security number

Part	Residential Energy Efficient Property Credit (See instructions before completing this pa	art.)	
Note:	Skip lines 1 through 11 if you only have a credit carryforward from 2019.		
1	Qualified solar electric property costs	1	12,564,265
2	Qualified solar water heating property costs	2	626,541
3	Qualified small wind energy property costs	3	134,142
4	Qualified geothermal heat pump property costs	4	570,400
5	Add lines 1 through 4	5	13,895,349
6	Multiply line 5 by 26% (0.26)	6	3,624,087
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 26% (0.26)		
10	Kilowatt capacity of property on line 8 above   x \$1,000  10 6,508,930		
11	Enter the smaller of line 9 or line 10	11	29,137
12	Credit carryforward from 2019. Enter the amount, if any, from your 2019 Form 5695, line 16	12	1,638,769
13	Add lines 6, 11, and 12	13	5,291,993
14	Limitation based on tax liability. Enter the amount from the Residential Energy Efficient Property Credit Limit Worksheet (see instructions)	14	20,828,486
15	Residential energy efficient property credit. Enter the smaller of line 13 or line 14. Also include this amount on Schedule 3 (Form 1040), line 5	15	3,468,514
16	Credit carryforward to 2021. If line 15 is less than line 13, subtract line 15 from line 13		
For Pa	perwork Reduction Act Notice, see your tax return instructions. Cat. No. 13540P		Form <b>5695</b> (2020)

Form 5695 (2020) Page **2** 

Par	Nonbusiness Energy Property Credit				
17a	Were the qualified energy efficiency improvements or residential energy proper home located in the United States? (see instructions)	٠	•	17a	☐ Yes ☐ No
	Caution: If you checked the "No" box, you cannot claim the nonbusiness energed not complete Part II.	gy pro	perty credit. Do		
b	Print the complete address of the main home where you made the qualifying imp	oroven	nents.		
	Caution: You can only have one main home at a time.				
	Number and street		Unit No.		
	City, State, and ZIP code				
С	Were any of these improvements related to the construction of this main home?			17c	Yes No
	<b>Caution:</b> If you checked the "Yes" box, you can only claim the nonbusiness ene qualifying improvements that were not related to the construction of the home. Do related to the construction of your main home, even if the improvements were reinto the home.	not ir	nclude expenses		
18	Lifetime limitation. Enter the amount from the Lifetime Limitation Worksheet (see	instru	ctions)	18	252,331
19	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				
а	Insulation material or system specifically and primarily designed to reduce heat home that meets the prescriptive criteria established by the 2009 IECC		or gain of your	19a	391,414
b	Exterior doors that meet or exceed the version 6.0 Energy Star program requirer	nents		19b	368,080
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	180,682
d	Exterior windows and skylights that meet or exceed the version 6.0 Energy Star program requirements	19d	486,142		
е	Maximum amount of cost on which the credit can be figured	19e	\$2,000		
f	If you claimed window expenses on your Form 5695 prior to 2020, enter the amount from the Window Expense Worksheet (see instructions); otherwise		00 505		
~	enter -0	19f 19g	99,525 1,860,917	-	
g h	Enter the smaller of line 19d or line 19g			19h	473,454
20	Add lines 19a, 19b, 19c, and 19h			20	1,002,373
21	Multiply line 20 by 10% (0.10)			21	1,002,373
22	Residential energy property costs (must be placed in service by you; include preparation, assembly, and original installation) (see instructions).				
a	Energy-efficient building property. Do not enter more than \$300			22a 22b	363,395
b c	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			220	429,218
	than \$50			22c	129,963
23 24	Add lines 22a through 22c			23	742,234
2 <del>4</del> 25	Maximum credit amount. (If you jointly occupied the home, see instructions)			25	<b>1,502,574</b> \$500
26	Enter the amount, if any, from line 18			26	ΨΟΟΟ
27	Subtract line 26 from line 25. If zero or less, <b>stop</b> ; you cannot take the nonbus credit	iness	energy property	27	1,681,047
28	Enter the smaller of line 24 or line 27			28	1,496,553
29	Limitation based on tax liability. Enter the amount from the Nonbusiness Energy Worksheet (see instructions)	/ Prop	erty Credit Limit	29	
30	<b>Nonbusiness energy property credit.</b> Enter the smaller of line 28 or line 29. Als on Schedule 3 (Form 1040), line 5			30	1,471,525

# 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 5695 (2020) Page **2** 

Par	t II Nonbusiness Energy Property Credit		
17a	Were the qualified energy efficiency improvements or residential energy property costs for your main		
	home located in the United States? (see instructions)	17a	☐ Yes ☐ No
	<b>Caution:</b> If you checked the "No" box, you cannot claim the nonbusiness energy property credit. Do not complete Part II.		
b	Print the complete address of the main home where you made the qualifying improvements.		
	Caution: You can only have one main home at a time.		
	Number and street Unit No.		
	City, State, and ZIP code		
С	Were any of these improvements related to the construction of this main home?	17c	☐ Yes ☐ No
	<b>Caution:</b> If you checked the "Yes" box, you can only claim the nonbusiness energy property credit for qualifying improvements that were not related to the construction of the home. Do not include expenses related to the construction of your main home, even if the improvements were made after you moved into the home.		
18	Lifetime limitation. Enter the amount from the Lifetime Limitation Worksheet (see instructions)	18	123,589
19	Qualified energy efficiency improvements (original use must begin with you and the component must reasonably be expected to last for at least 5 years; do not include labor costs) (see instructions).		
а	Insulation material or system specifically and primarily designed to reduce heat loss or gain of your	10-	4 246 005
h	home that meets the prescriptive criteria established by the 2009 IECC	19a 19b	1,246,085 839,639
b	Exterior doors that meet or exceed the version 6.0 Energy Star program requirements  Metal or asphalt roof that meets or exceeds the Energy Star program requirements and has appropriate	190	033,033
С	pigmented coatings or cooling granules which are specifically and primarily designed to reduce the heat gain of your home	19c	1,383,559
d	Exterior windows and skylights that meet or exceed the version 6.0 Energy		· ·
	Star program requirements		
е	Maximum amount of cost on which the credit can be figured		
f	If you claimed window expenses on your Form 5695 prior to 2020, enter the amount from the Window Expense Worksheet (see instructions); otherwise		
	enter -0	-	
g h	Subtract line 19f from line 19e. If zero or less, enter -0	19h	770 440
20	Add lines 19a, 19b, 19c, and 19h	20	778,110 4,247,393
21	Multiply line 20 by 10% (0.10)	21	424,766
22	Residential energy property costs (must be placed in service by you; include labor costs for onsite preparation, assembly, and original installation) (see instructions).		424,700
а	Energy-efficient building property. Do not enter more than \$300	22a	107,644
b	Qualified natural gas, propane, or oil furnace or hot water boiler. Do not enter more than \$150	22b	64,191
С	Advanced main air circulating fan used in a natural gas, propane, or oil furnace. Do not enter more		·
00	than <b>\$50</b>	22c	6,456
23	Add lines 22a through 22c	23	178,292
24 25	Add lines 21 and 23	25	<b>603,058</b> \$500
26	Enter the amount, if any, from line 18	26	Ψ 300
27	Subtract line 26 from line 25. If zero or less, stop; you cannot take the nonbusiness energy property		
	credit	27	789,259
28	Enter the smaller of line 24 or line 27	28	417,933
29	Limitation based on tax liability. Enter the amount from the Nonbusiness Energy Property Credit Limit Worksheet (see instructions)	29	
30	Nonbusiness energy property credit. Enter the smaller of line 28 or line 29. Also include this amount		
	on Schedule 3 (Form 1040), line 5	30	406,334
			Form <b>5695</b> (2020)

(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

Sequence No. 884

Attachment

Name(s) shown on return

Identifying number Total Forms Filed = 17.290 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) 7,509 you at least 120 hours but fewer than 400 hours . . . **b** Qualified first-year wages of employees who worked for \$\_\_\_\_× 40% (0.40) 1b 5,311 **c** Qualified second-year wages of employees certified as long-term family assistance recipients . . . . . . . 1c 7,064 Add lines 1a, 1b, and 1c. See instructions for the adjustment you must make to your 2 12,586 3 Work opportunity credit from partnerships, S corporations, cooperatives, estates, and 3 4.854 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 17,290 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)

5884

**Work Opportunity Credit** 

OMB No. 1545-0219

(Rev. March 2021) ► Attach to your tax return. Attachment Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form5884 for instructions and the latest information. Sequence No. 884 Name(s) shown on return Identifying number Total Forms Filed = 17.290 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 . . . 12,050 **b** Qualified first-year wages of employees who worked for \$ × 40% (0.40) 1b 21,997 c Qualified second-year wages of employees certified as long-term family assistance recipients . . . . . . . 1c 15,614 Add lines 1a, 1b, and 1c. See instructions for the adjustment you must make to your 2 49,662 3 Work opportunity credit from partnerships, S corporations, cooperatives, estates, and 3 28,579 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 78,241 5 Amount allocated to patrons of the cooperative or beneficiaries of the estate or trust (see 5 Cooperatives, estates, and trusts, subtract line 5 from line 4. Report this amount on Form For Paperwork Reduction Act Notice, see separate instructions. Form **5884** (Rev. 3-2021) Cat. No. 13570D

Form **6251** 

**Alternative Minimum Tax—Individuals** 

OMB No. 1545-0074

2020

Attachment Sequence No. **32** 

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

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

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

Total Forms Filed = 5 597 802

Your social security number

rvarric(s	Total Forms Filed = 5,597,802	1001 3001	ai scou	inty number
Par	Alternative Minimum Taxable Income (See instructions for how to complete each	h line.)		
1	Enter the amount from Form 1040 or 1040-SR, line 15, if more than zero. If Form 1040 or 1040-SR, lis zero, subtract lines 12 and 13 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and the result here. (If less than zero, enter as a negative amount.)	ine 15, d enter	1	5,596,096
2a	If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount	nt from		· · · · · · · · · · · · · · · · · · ·
	Form 1040 or 1040-SR, line 12		2a	5,574,554
b	Tax refund from Schedule 1 (Form 1040), line 1 or line 8		2b	( 233,752 )
С	Investment interest expense (difference between regular tax and AMT)		2c	36,303
d	Depletion (difference between regular tax and AMT)		2d	21,724
е	Net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount		2e	167,032
f	Alternative tax net operating loss deduction		2f	( 95,243 )
g	Interest from specified private activity bonds exempt from the regular tax		2g	621,848
h	Qualified small business stock, see instructions		2h	11,200
i	Exercise of incentive stock options (excess of AMT income over regular tax income)		2i	17,354
j	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)		2j	107,797
k	Disposition of property (difference between AMT and regular tax gain or loss)		2k	351,611
I	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)		21	623,658
m	Passive activities (difference between AMT and regular tax income or loss)		2m	633,138
n	Loss limitations (difference between AMT and regular tax income or loss)		2n	352,919
0	Circulation costs (difference between regular tax and AMT)		20	1,044
р	Long-term contracts (difference between AMT and regular tax income)		2р	5,113
q	Mining costs (difference between regular tax and AMT)		2q	11,512
r	Research and experimental costs (difference between regular tax and AMT)		2r	9,288
s	Income from certain installment sales before January 1, 1987		2s	( * )
t	Intangible drilling costs preference		2t	961
3	Other adjustments, including income-based related adjustments		3	91,597
4	Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and limore than \$745,200, see instructions.)		4	5,583,545
Part	Alternative Minimum Tax (AMT)			
5	Exemption.			
	IF your filing status is AND line 4 is not over THEN enter on line 5			
	Single or head of household \$ 518,400 \$ 72,900			
	Married filing jointly or qualifying widow(er) 1,036,800			E 400 000
	Married filing separately		5	5,400,899
	If line 4 is <b>over</b> 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, 11, and go to line 10	9, and 	6	2,783,235
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; <b>or</b> you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.		7	2,732,811
	• All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.			
8	Alternative minimum tax foreign tax credit (see instructions)		8	1,137,649
9	Tentative minimum tax. Subtract line 8 from line 7		9	2,675,194
10	Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J completing this line (see instructions)	edule J before	10	A 722 945
11	completing this line (see instructions)		10	4,733,845 156,549
11 For Pa	perwork Reduction Act Notice, see your tax return instructions.  Cat. No. 13600G	, 11110 1	11	Form <b>6251</b> (2020)
	.p			(2020)

Form **6251** 

**Alternative Minimum Tax—Individuals** 

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99) ▶ Go to www.irs.gov/Form6251 for instructions and the latest information. ► Attach to Form 1040, 1040-SR, or 1040-NR.

Attachment Sequence No. **32** 

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number **Total Forms Filed =** 5,597,802

Enter the amount from Form 1040 or 1040-SR, line 15, if more than zero. If Form 1040 or 1040-SR, line 15, is zero, subtract lines 12 and 13 of Form 1040 or 1040-SR from line 17 of Form 1040 or 1040-SR, line 15, is zero, subtract lines 12 and 13 of Form 1040 or 1040-SR from line 17 of Form 1040 or 1040-SR and enter the result there. If lies than zero, writer as a negative amount.)  2a If filing Schedula A (Form 1040), enter the tures from Schedule A, line 7; otherwise, enter the amount from Form 1040 or 1040-SR, line 12.  2b Tax refund from Schedule I (Form 1040), line 1 or line 8.  2c Tax refund from Schedule I (Form 1040), line 1 or line 8.  2d Schedula (Ifference between regular tax and AMT).  2d In58(215)  2e R8,184,533  2f Alternative tax net operating loss deduction from Schedule I (Form 1040), line 8. Enter as a positive amount.  2e R8,184,533  2f Alternative tax net operating loss deduction from Schedule I (Form 1040), line 8. Enter as a positive amount.  2e R8,184,533  2f Alternative stax net operating loss deduction from Schedule I (Form 1040), line 8. Enter as a positive amount.  2e R8,184,533  2f Alternative stax net operating loss deduction from Schedule I (Form 1040), line 8. Enter as a positive amount.  2e R8,184,533  2f Alternative stax net operating loss deduction from Schedule I (Form 1041), box 12, code A).  2g 19,357,677  Qualified amal business sock, see instructions.  2h 2state and trusts (amount from Schedule Srt. (Form 1041), box 12, code A).  2g 19,357,677  k Disposition of property (difference between AMT and regular tax income).  2g 2g 5,128,008  2g 14,9718  k Disposition of property (difference between AMT and regular tax income or loss).  2g 2g 5,128,008  2g 14,9718  k Disposition of property (difference between AMT and regular tax income or loss).  2g 14,0718  2g 15,128,008  2g 16,369  2g 16,369  2g 17,389  2g 17,389  2g 17,389  2g 18,399		10tal 10ths 1 lieu = 5,597,002			
is zero, subtract lines 12 and 13 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the result here. (If less than zero, enter as a negative amount.)  2a. If filing Schedule A, Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040 or 1040-SR, line 12.  b Tax refund from Schedule 1 (Form 1040), line 1 or line 8  2b (483,251)  c Investment interest expense (difference between regular tax and AMT)  2d (383,251)  e Net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount.  2e (177,50,303)  g Interest from specified private activity bonds exempt from the regular tax.  2e (39,357,67)  d Qualified small business stock, see instructions.  1e (177,50,303)  g Interest from specified private activity bonds exempt from the regular tax.  2e (39,357,67)  d Qualified small business stock, see instructions.  2e (39,357,67)  d Qualified small business stock, see instructions.  2e (39,357,67)  d Qualified and trusts (amount from Schedule K-I (Form 1041), box 12, code A)  g Estates and trusts (amount from Schedule K-I (Form 1041), box 12, code A)  g Estates and trusts (amount from Schedule K-I (Form 1041), box 12, code A)  g Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)  g Passive activities (difference between AMT and regular tax income or loss)  n Loss limitations (difference between AMT and regular tax income or loss)  n Loss limitations (difference between AMT and regular tax income)  2e (36,984)  n Long-term contracts (difference between regular tax income)  2e (36,984)  p Long-term contracts (difference between regular tax and AMT)  2e (36,984)  p Long-term contracts (difference between regular tax income)  2e (36,984)  p Long-term contracts (difference between regular tax income)  2e (36,984)  p Long-term contracts (difference between regular tax income)  2e (36,984)  p Long-term contracts (difference between regular tax income)  2e (36,984)  p Long-term contracts (difference bet	Part	Alternative Minimum Taxable Income (See instructions for how to complete each	n line.)		
Erom 1040 or 1040-SR, line 12 b Tax return from Schedule 1 (Form 1040), line 1 or line 8 c	1	is zero, subtract lines 12 and 13 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and	enter	1	1,670,109,570
b Tax refund from Schedule 1 (Form 1040), line 1 or line 8 Investment interest expense (difference between regular tax and AMT).  c Investment interest expense (difference between regular tax and AMT).  d Depletion (difference between regular tax and AMT).  e Net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount.  2e 81,845,533 f Alternative tax net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount.  2e 83,184,533 f Alternative tax net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount.  2e 83,184,533 f Alternative tax net operating loss deduction from Schedule K-1 (Form 1040), line 8. Enter as a positive amount.  2e 83,184,533 f Alternative tax net operating loss deduction from Schedule K-1 (Form 1040), line 8. Enter as a positive amount.  2e 83,184,533 f Alternative tax net operating loss deduction from Schedule K-1 (Form 1041), box 12, code No.  2e 1 (17,50,303) g Interest from specified private activity bonds exempt from the regular tax income) g Interest from specified private activity bonds exempt from the frequitar tax gain or loss) g Interest from specified private activities (difference between AMT and regular tax income or loss) g Interest from specified private activities (difference between AMT and regular tax income or loss) g Interest from specified private activities (difference between AMT and regular tax income or loss) g Interest from specified private activities (difference between AMT and regular tax income or loss) g Interest from specified private activities (difference between explain tax and AMT) g Interest from specified private activities (difference between AMT and regular tax income or loss) g Interest from specified private activities (difference between explain tax and AMT) g Interest from specified private activities (difference between explain tax and AMT) g Interest from specified private activities (difference between explain tax and AMT) g Interest from specified	<b>2</b> a			2a	95,138,382
c Investment interest expense (difference between regular tax and AMT). d Depletion (difference between regular tax and AMT). e Net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount. 2d 158.215 e Net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount. 2d 158.215 g Interest from specified private activity bonds exempt from the regular tax. 2g 935,767 h Qualified small business stock, see instructions 2 12 5,128.008 j Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A). 2 13 5,128.008 j Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A). 2 149,718 k Disposition of property (difference between AMT and regular tax gain or loss). 2 149,718 l Depreciation on assets placed in service after 1986 (difference between regular tax and AMT). 2 1 -1,078.840 m Passive activities (difference between AMT and regular tax income or loss). 2 2 2 358,2028 n Loss limitations (difference between AMT and regular tax income or loss). 2 2 358,909 q Mining costs (difference between AMT and regular tax income). 2 2 358,909 q Mining costs (difference between regular tax and AMT). 2 2 358,909 q Mining costs (difference between regular tax and AMT). 2 2 358,909 q Mining costs (difference between regular tax and AMT). 2 2 358,909 q Mining costs (difference between regular tax and AMT). 2 358,093 s Income from certain installment sales before January 1, 1987 q Seesarch and experimental costs (difference between regular tax and AMT). 2 358,093 s Income from certain installment sales before January 1, 1987 q Seesarch and experimental costs (difference between regular tax and AMT). 3 10 Other adjustments, including income-based related adjustments. 4 18,88,51 3 18,861 3	b			2b	
e Not operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount.  Alternative tax net operating loss deduction  Interest from specified private activity bonds exempt from the regular tax  2g. 393,5767  h Qualified small business stock, see instructions  Exercises of incentive stock options (excessed of AMT income over regular tax income)  Exercises of incentive stock options (excessed of AMT income over regular tax income)  Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)  Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)  Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)  Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)  Estates and trusts (amount from Schedule K-1 (Form 1040), inc 1. 1978, 840  Estates and trusts (amount from Schedule J both and and regular tax gain or loss)  2d. 149,718  k Disposition of property (difference between AMT and regular tax income or loss)  2d. 3,102,433  1d. 2,1078,840  Passive activities (difference between AMT and regular tax income or loss)  2m. 532,028  2m. 532,028  2n. 47,889  Circulation costs (difference between AMT and regular tax income or loss)  2n. 47,889  Circulation costs (difference between AMT and regular tax income)  2p. 358,909  Qualified comments (difference between AMT and regular tax income)  2p. 358,909  Am Mining costs (difference between AMT and regular tax income)  2p. 358,909  2p. 368,909  2p. 369,923  2p	С	Investment interest expense (difference between regular tax and AMT)	[	2c	729,377
f Alternative tax net operating loss deduction g Interest from specified private activity bonds exempt from the regular tax 2g 935,767 h Qualified small business stock, see instructions i Exercise of incentive stock options (excess of AMT income over regular tax income). 2h 281,181 i Exercise of incentive stock options (excess of AMT income over regular tax income). 2l 5,128,008 j Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A). 2l 149,718 k Disposition of property (difference between AMT and regular tax gain or loss). 2k 3,102,433 m Passive activities (difference between AMT and regular tax income or loss). 2m -532,028 n Loss limitations (difference between AMT and regular tax income or loss). 2m -532,028 n Loss limitations (difference between AMT and regular tax income or loss). 2n -47,889 o'Circulation costs (difference between equalar tax and AMT). 20 -960 p Long-term contracts (difference between equalar tax income). 2p -356,909 q Mining costs (difference between regular tax and AMT). 2p -356,909 q Mining costs (difference between regular tax and AMT). 2p -356,909 t Intrangible dirilling costs preference. 2p -369,84 r Research and experimental costs (difference between regular tax and AMT). 2r -326,923 s Income from certain installment sales before January 1, 1987. 2s (	d	Depletion (difference between regular tax and AMT)	[	<b>2</b> d	168,215
g Interest from specified private activity bonds exempt from the regular tax  A Qualified small business stock, see instructions  Exercise of incentive stock options (excess of ANT income over regular tax income).  Jestates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A).  Jestates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A).  Jestates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A).  Jestates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A).  Jestates and trusts (amount from Schedule K-1 (Form 1040), line 1. If you used Schedule J before completing this line 6 is \$197,900 or less (\$98,909 and \$1,979 if you specified to figure your tax on Form 1040 or 1040-SR, line 16, refigure that x without using Schedule J before completing this line (see instructions).  Jestates and trusts (amount from line 9. If zero or less, enter -0 - Erner here and on Schedule 2 (Form 1040), line 1. If you used Schedule J before completing this line (see instructions).  Jestates and trusts (amount from line 9. If zero or less, enter -0 - Erner here and on Schedule 2 (Form 1040), line 1. In 2,937,322.  Jentate Canada (and the schedule 2 (Form 1040), line 1. In 2,937,322.  Jestates and trusts (amount from line 9. If zero or less, enter -0 - Erner here and on Schedule 2 (Form 1040), line 1. In 2,937,322.  Jentates (and the schedule 2 (Form 1040), line 1. In 2,937,322.	е	Net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount	[	2e	88,184,533
h Qualified small business stock, see instructions i Exercise of incentive stock options (excess of AMT income over regular tax income) . 2i 5,128,008 j Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) . 2j 149,718 k Disposition of property (difference between AMT and regular tax gain or loss) . 2k 3,102,433 l Depreciation on assests placed in service after 1986 (difference between regular tax and AMT) . 2l 1-1,078,840 m Passive activities (difference between AMT and regular tax income or loss) . 2m -532,028 n Loss limitations (difference between AMT and regular tax income or loss) . 2m -47,869 o Circulation costs (difference between AMT and regular tax income or loss) . 2m -47,869 o Circulation costs (difference between AMT and regular tax income or loss) . 2m -47,869 or Mining costs (difference between AMT and regular tax income) . 2p -358,909 q Mining costs (difference between and AMT) . 2c -360,934 q Mining costs (difference between regular tax and AMT) . 2r -326,923 s Income from certain installment sales before January 1, 1987 . 2s (	f		-	2f	( 17,750,303 )
i Exercise of incentive stock options (excess of AMT income over regular tax income).  j Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)  j Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)  j Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)  l Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)  passive activities (difference between AMT and regular tax income or loss)  l Coss limitations (difference between AMT and regular tax income or loss)  c Circulation costs (difference between AMT and regular tax income or loss)  c Circulation costs (difference between AMT and regular tax income or loss)  c Circulation costs (difference between AMT and regular tax income or loss)  d Mining costs (difference between AMT and regular tax income)  p Long-term contracts (difference between AMT and regular tax income)  p Mining costs (difference between regular tax and AMT)  p Research and experimental costs (difference between regular tax and AMT)  p Research and experimental costs (difference between regular tax and AMT)  p Text III and translationer stales before January 1, 1987  d Intangible drilling costs preference  d Material in the state of the s	g			2g	
j Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)  k Disposition of property (difference between AMT and regular tax gain or loss).  Depreciation on assets placed in service after 1986 (difference between regular tax and AMT).  Passive activities (difference between AMT and regular tax income or loss).  Loss limitations (difference between AMT and regular tax income or loss).  Croulation costs (difference between regular tax and AMT).  Long-term contracts (difference between regular tax and AMT).  Passive activities (difference between regular tax and AMT).  Long-term contracts (difference between regular tax and AMT).  Research and experimental costs (difference between regular tax and AMT).  Research and experimental costs (difference between regular tax and AMT).  Intangible drilling costs preference.  Cother adjustments, including income-based related adjustments.  Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$745,200. see instructions).  Exemption.  Fyour filing status is  AND line 4 is not over THEN enter on line 5  Single or head of household \$ 518,400 \$ 72,900  Married filing jointy or qualifying widower) 1.036,800 113,400  Married filing jointy or qualifying widower) 1.036,800 113,400  Married filing 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 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.  All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 26	h				
k Disposition of property (difference between AMT and regular tax gain or loss).  1 Depreciation on assets placed in service after 1986 (difference between Feylar tax and AMT).  2 1-1,078,840  m Passive activities (difference between AMT and regular tax income or loss).  2 2 1-1,078,840  n Loss limitations (difference between AMT and regular tax income or loss).  2 2 2 2 47,889  c Circulation costs (difference between AMT and regular tax income or loss).  2 2 2 358,909  d Mining costs (difference between AMT and regular tax income).  2 2 359,909  d Mining costs (difference between regular tax and AMT).  2 3 36,904  The Research and experimental costs (difference between regular tax and AMT).  2 4 36,984  The Research and experimental costs (difference between regular tax and AMT).  2 5 28 (	i	, ,			
In Depreciation on assets placed in service after 1986 (difference between regular tax and AMT).  Passive activities (difference between AMT and regular tax income or loss).  Loss limitations (difference between AMT and regular tax income or loss).  Circulation costs (difference between regular tax and AMT).  Long-term contracts (difference between regular tax and AMT).  Long-term contracts (difference between regular tax and AMT).  Passive activities (difference between regular tax and AMT).  Long-term contracts (difference between regular tax and AMT).  Research and experimental costs (difference between regular tax and AMT).  Research and experimental costs (difference between regular tax and AMT).  Intangible drilling costs preference.  2t 188,851  Other adjustments, including income-based related adjustments.  Other adjustments, including income-based related adjustments.  Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$745,200, see instructions).  Part II Alternative Minimum Tax (AMT)  Exemption.  If your filing status is  AND line 4 is not over THEN enter on line 5  Single or head of household.  \$ 518,400  \$ 72,900  Married filing separately  Married filing separately  \$ 518,400  \$ 72,900  Married filing separately  \$ 518,400  \$ 72,900  Married filing separately  \$ 518,400  \$ 72,900  Married filing separately  \$ 518,400  \$ 57,00  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 3; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.  Alternative minimum tax. Subtract line 8 from line 7  Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2.  Subtract from the result any foreign tax credit	- 1		-		
m Passive activities (difference between AMT and regular tax income or loss)  n Loss limitations (difference between AMT and regular tax income or loss)  2n 47.889  c Circulation costs (difference between regular tax and AMT)  20 -8.860  p Long-term contracts (difference between regular tax and AMT)  21 358.909  q Mining costs (difference between regular tax and AMT)  22 -326.923  s Income from certain installment sales before January 1, 1987  t Intangible drilling costs preference  3 -246.242  4 Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$745,200, see instructions.)  Part III Alternative Minimum Tax (AMT)  Exemption.  Fy our filing status is  AND line 4 is not over THEN enter on line 5 Single or head of household \$ 518.400 \$ 72.900  Married filing spenarely 518.400 \$ 72.900  Married filing spenarely 518.400 \$ 72.900  Married filing spenarely 518.400 \$ 72.900  Married filing spenarely 518.400 \$ 6,700  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 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3; you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 mer on line 40 married filing separately) from the result.  8 Alternative minimum tax. Subtract line 8 from line 7 9 343,843,701  10 Add Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see instructions)  11 AMT. Subtract line 10 from line 9. If zero or less, enter -0. Enter here and on Schedule 2 (Form 1040), line 1. 1, 2,937,322	_				
n Loss limitations (difference between AMT and regular tax income or loss)  o Circulation costs (difference between regular tax and AMT).  20					
o Circulation costs (difference between regular tax and AMT).  p Long-term contracts (difference between AMT and regular tax income)  q Mining costs (difference between regular tax and AMT)  2q 358,909  q Mining costs (difference between regular tax and AMT)  2r -326,923  s Income from certain installment sales before January 1, 1987  2 lt 188,851  3 Other adjustments, including income-based related adjustments  3 -246,242  4 Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$745,200, see instructions)  Exemption.  If your filing status is  AND line 4 is not over THEN enter on line 5 Single or head of household \$ 518,400 \$ 72,900  Married filing separately 518,400 \$ 72,900  Married filing separately 518,400 \$ 72,900  Married filing jointly or qualifying widow(er) 1,036,800 113,400  Married filing separately 518,400 \$ 72,900  Married filing is esparately 518,400 \$ 72,900  Married filing separately 518,400 \$ 72,900  Married filing is perately 518,400 \$ 72,900  Married filing separately 518,400 \$ 72,900  Married filing separately 518,400 \$ 73,900  Married filing separately 518,400 56,700  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 38; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) or 1040-SR, line 16 by 28% (0.28) and subtract \$ 3,958 (\$ 1,979 if		·	- +		
p Long-term contracts (difference between AMT and regular tax income) q Mining costs (difference between regular tax and AMT) r Research and experimental costs (difference between regular tax and AMT) 1 (2r) 326,923 s Income from certain installment sales before January 1, 1987 t Intangible drilling costs preference 2 t 188,851 3 Other adjustments, including income-based related adjustments 3 (246,242 4 Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$745,200, see instructions). 4 1,838,307,899 Part II Alternative Minimum Tax (AMT)  Exemption.  If your filing status is AND line 4 is not over THEN enter on line 5 Single or head of household \$ 518,400 \$ 72,900 Married filing jointly or qualifying widow(er) 1,036,800 113,400 Married filing separately 518,400 \$ 56,700 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.  7 If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.  • All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 26% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.  8 Alternative minimum tax foreign tax credit (see instructions)  9 Tentative minimum tax. Subtract line 8 from line 7  10 Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040)		,	- +		· · · · · · · · · · · · · · · · · · ·
mining costs (difference between regular tax and AMT)  Research and experimental costs (difference between regular tax and AMT)  Research and experimental costs (difference between regular tax and AMT)  Intangible drilling costs preference  2t 188,851  Other adjustments, including income-based related adjustments  Other adjustments, including income-based related adjustments  Alternative minimum taxable income. Combine lines 1 through 3. (If married filling separately and line 4 is more than \$745,200, see instructions.)  Part II Alternative Minimum Tax (AMT)  Exemption.  If your filing status is AND line 4 is not over THEN enter on line 5  Single or head of household \$ 518,400 \$ 72,900  Married filing separately \$ 58,400 \$ 72,900  Married filing separately \$ 518,400 \$ 72,900  Married filing separately \$ 518,400 \$ 6,700 \$ 5 510,945,882  If line 4 is over the amount shown above for your filing status, see instructions.  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		,	- +		
r Research and experimental costs (difference between regular tax and AMT)  s Income from certain installment sales before January 1, 1987  t Intangible drilling costs preference  2t 188,851  3 Other adjustments, including income-based related adjustments  3 -246,242  4 Alternative minimum taxable income. Combine lines 1 through 3. (If married filling separately and line 4 is more than \$745,200, see instructions.)  4 Internative Minimum Tax (AMT)  5 Exemption.  If your filing status is AND line 4 is not over THEN enter on line 5 Single or head of household \$ 518,400 \$ 72,900  Married filing separately \$ 518,400 \$ 72,900  Married filing separately \$ 518,400 \$ 56,700  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.  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 3; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.  • All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.28). Otherwise, multiply line 6 by 26% (0.28). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.  8 Alternative minimum tax. Subtract line 8 from line 7  9 343,843,701  10 Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see in	-	· · · · · · · · · · · · · · · · · · ·	-		
t Intangible drilling costs preference  1	-				
t Intangible drilling costs preference  3 Other adjustments, including income-based related adjustments  4 Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$745,200, see instructions.)  4 1,838,307,899  Part II Alternative Minimum Tax (AMT)  Exemption.  IF your filing status is AND line 4 is not over THEN enter on line 5 Single or head of household \$ 518,400 \$ 72,900  Married filing separately \$ 518,400 \$ 72,900  Married filing separately \$ 518,400 \$ 5,700  If ine 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.  7 If you are filing Form 2555, see instructions for the amount to enter.  If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.  All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.  8 Alternative minimum tax. Subtract line 8 from line 7  10 Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see instructions)  10 AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040), line 1  11 2,937,322					
3					188 851
Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$7.45,200, see instructions.).  Alternative Minimum Tax (AMT)  Exemption.  IF your filing status is  AND line 4 is not over  THEN enter on line 5  Single or head of household  \$ 518,400  \$ 72,900  Married filing jointly or qualifying widow(er) 1,036,800  If line 4 is over the amount shown above for your filing status, see instructions.  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  If you are filing Form 2555, see instructions for the amount to enter.  If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.  All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.  Alternative minimum tax. Subtract line 8 from line 7  Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see instructions)  AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040), line 1  10 AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040), line 1			-		
more than \$745,200, see instructions.)  Alternative Minimum Tax (AMT)  Exemption.  IF your filing status is  Single or head of household  \$518,400  \$72,900  Married filing spearately  \$18,400  \$56,700  If line 4 is over the amount shown above for your filing status, see instructions.  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  If you are filing Form 2555, see instructions for the amount to enter.  If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.  Alternative minimum tax foreign tax credit (see instructions)  Alternative minimum tax Subtract line 8 from line 7  Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see instructions)  AMT. Subtract line 10 from line 9. If zero or less, enter -0- Enter here and on Schedule 2 (Form 1040), line 1  AMT. Subtract line 10 from line 9. If zero or less, enter -0- Enter here and on Schedule 2 (Form 1040), line 1  AMT. Subtract line 10 from line 9. If zero or less, enter -0- Enter here and on Schedule 2 (Form 1040), line 1  AMT. Subtract line 10 from line 9. If zero or less, enter -0- Enter here and on Schedule 2 (Form 1040), line 1  11 AMT. Subtract line 10 from line 9. If zero or less, enter -0- Enter here and on Schedule 2 (Form 1040), line 1	4				,
Exemption.  IF your filing status is Single or head of household \$ 518,400 \$ 72,900  Married filing jointly or qualifying widow(er) 1,036,800				4	1,838,307,899
IF your filing status is AND line 4 is not over THEN enter on line 5  Single or head of household . \$ 518,400 . \$ 72,900  Married filing jointly or qualifying widow(er) 1,036,800 . 113,400  Married filing separately . 518,400 . 56,700  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	Part	Alternative Minimum Tax (AMT)			
Single or head of household \$ 518,400 \$ 72,900  Married filing jointly or qualifying widow(er) 1,036,800	5	·			
Married filing jointly or qualifying widow(er)  Married filing separately  518,400  56,700  If line 4 is over the amount shown above for your filing status, see instructions.  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.  If you are filing Form 2555, see instructions for the amount to enter.  If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.  All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.  Alternative minimum tax foreign tax credit (see instructions)  Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see instructions)  AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040), line 1  11 AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040), line 1					
Married filing separately					
If line 4 is <b>over</b> 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.  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; <b>or</b> you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.  • All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.  8 Alternative minimum tax foreign tax credit (see instructions)		<b>3</b>			E40 04E 000
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				5	510,945,882
11, and go to line 10	_				
<ul> <li>If you are filing Form 2555, see instructions for the amount to enter.</li> <li>If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.</li> <li>All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.</li> <li>Alternative minimum tax foreign tax credit (see instructions)</li> <li>Tentative minimum tax. Subtract line 8 from line 7</li> <li>Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see instructions)</li> <li>AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040), line 1</li> <li>11 2,937,322</li> </ul>	6			6	1 507 156 454
<ul> <li>If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.</li> <li>All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.</li> <li>Alternative minimum tax foreign tax credit (see instructions)</li> <li>Tentative minimum tax. Subtract line 8 from line 7</li> <li>Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see instructions)</li> <li>AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040), line 1</li> <li>2,937,322</li> </ul>	7			0	1,507,150,454
qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here.  • All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.  8 Alternative minimum tax foreign tax credit (see instructions)	,	1			
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.  • All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.  8 Alternative minimum tax foreign tax credit (see instructions)					
back and enter the amount from line 40 here.  • All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.  8 Alternative minimum tax foreign tax credit (see instructions)			[	7	360,248,133
6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result.  8 Alternative minimum tax foreign tax credit (see instructions)			İ		
Tentative minimum tax. Subtract line 8 from line 7		6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979 if			
Tentative minimum tax. Subtract line 8 from line 7	8		[	8	16,504,206
Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see instructions)	9	Tentative minimum tax. Subtract line 8 from line 7	[	9	343,843,701
AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040), line 1 1 2,937,322	10	Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J k	dule J	10	444 070 042
0054	11		· · line 1		
		perwork Reduction Act Notice, see your tax return instructions.  Cat. No. 13600G	IC I		Form <b>6251</b> (2020)

Form 6251 (2020) 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 Forms 1040 and 1040-SR 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	2,296,588
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	258,232
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 <b>smaller</b> 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	2,293,239
16	Enter the <b>smaller</b> of line 12 or line 15	16	2,200,200
17	Subtract line 16 from line 12	17	
18	If line 17 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result	18	1,623,594
19	Enter:		
	<ul> <li>\$80,000 if married filing jointly or qualifying widow(er),</li> <li>\$40,000 if single or married filing separately, or</li> <li>\$53,600 if head of household.</li> </ul>	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 <b>smaller</b> of line 12 or line 13	22	
23 24	Enter the <b>smaller</b> of line 21 or line 22. This amount is taxed at 0%	23 24	
25	Enter:	24	
	• \$441,450 if single		
	• \$248,300 if married filing separately	25	
	• \$496,600 if married filing jointly or qualifying widow(er)		
	• \$469,050 if head of household		
26	Enter the amount from line 21	26	
27	Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0 If you are filing Form 2555, see instructions for the amount to enter	27	
28	Add line 26 and line 27	28	
29	Subtract line 28 from line 25. If zero or less, enter -0-	29	
30	Enter the smaller of line 24 or line 29	30	
31	Multiply line 30 by 15% (0.15)	31	1,499,812
32	Add lines 23 and 30	32	
	If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33.		
33	Subtract line 32 from line 22	33	
34	Multiply line 33 by 20% (0.20)	34	503,936
0.5	If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35.		
35 26	Add lines 17, 32, and 33	35	
36 37	Subtract line 35 from line 12	36 37	170,913
38	Add lines 18, 31, 34, and 37	38	170,010
39	If line 12 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 12 by 26% (0.26).		
40	Otherwise, multiply line 12 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result Enter the <b>smaller</b> of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this	39	1,917,998
70	amount on line 7. Instead enter it on line 30 if the worksheet in the instruction for line 7.	40	

Form 6251 (2020) Page **2** 

Part					
	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.				
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 Forms 1040 and 1040-SR 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	699,504,219		
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	17,931,614		
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 <b>smaller</b> 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	716,935,676		
16	Enter the <b>smaller</b> of line 12 or line 15	16	1 10,000,010		
17	Subtract line 16 from line 12	17			
18	If line 17 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result	18	203,777,554		
19	Enter:				
	• \$80,000 if married filing jointly or qualifying widow(er),				
	• \$40,000 if single or married filing separately, or	19			
	• \$53,600 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 <b>smaller</b> of line 12 or line 13	22			
23	Enter the <b>smaller</b> of line 21 or line 22. This amount is taxed at 0%	23			
24	Subtract line 23 from line 22	24			
25	Enter:				
	• \$441,450 if single				
	• \$248,300 if married filing separately	25			
	• \$496,600 if married filing jointly or qualifying widow(er)				
	• \$469,050 if head of household				
26	Enter the amount from line 21	26			
27	Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0 If you are filing Form 2555, see instructions for the amount to enter	27			
28	Add line 26 and line 27	28			
29	Subtract line 28 from line 25. If zero or less, enter -0-	29			
30	Enter the smaller of line 24 or line 29	30			
31	Multiply line 30 by 15% (0.15)	31	12,469,184		
32	Add lines 23 and 30	32			
	If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33.				
33	Subtract line 32 from line 22	33			
34	Multiply line 33 by 20% (0.20)	34	109,112,204		
	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	3,019,418		
38	Add lines 18, 31, 34, and 37	38			
39	If line 12 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 12 by 26% (0.26).	-	204 044 027		
	Otherwise, multiply line 12 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result	39	384,014,027		
40	Enter the <b>smaller</b> 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 <b>6251</b> (2020)		

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

2020
Attachment
Sequence No. 67

Name(s) shown on return Identifying number Total Forms Filed = 465,993 Description of property ▶ -----Date acquired (mm/dd/yyyy) ▶ 2a b Date sold (mm/dd/yyyy) ► Was the property sold to a related party (see instructions) after May 14, 1980? If "No," skip line 4 . . . . . . 3 Was the property you sold to a related party a marketable security? If "Yes," complete Part III. If "No." complete Yes No Gross Profit and Contract Price. Complete this part for all years of the installment agreement. Selling price including mortgages and other debts. **Don't** include interest, whether stated or unstated 418.876 5 6 Mortgages, debts, and other liabilities the buyer assumed or took the property 7 7 Subtract line 6 from line 5 . . . . . . . . . . . . . . . Cost or other basis of property sold . . . . . . . . . . . . . . . . 8 9 9 10 10 11 Commissions and other expenses of sale . . . . . . . . . . . . . . . 11 12 Income recapture from Form 4797, Part III (see instructions) . . . . . 12 13 13 365.385 14 Subtract line 13 from line 5. If zero or less, don't complete the rest of this form. See instructions . . . 416,940 14 If the property described on line 1 above was your main home, enter the amount of your excluded 15 4,621 15 414,887 16 16 17 5.773 17 18 18 415,982 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 1,447 21 Payments received during year (see instructions). Don't include interest, whether stated or unstated . 21 411,030 22 413,965 Payments received in prior years (see instructions). Don't include interest, 23 24 24 408.887 25 25 Enter the part of line 24 that is ordinary income under the recapture rules. See instructions . . . . 339 26 Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797. See instructions . . . 26 408,878 Part III Related Party Installment Sale Income. Don't complete if you received the final payment this tax year. 27 Name, address, and taxpayer identifying number of related party ► 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 first disposition was a sale or exchange of stock to the issuing corporation. b ☐ The second disposition was an involuntary conversion and the threat of conversion occurred after the first disposition. С d ☐ The second disposition occurred after the death of the original seller or buyer. ☐ It can be established to the satisfaction of the IRS that tax avoidance wasn't a principal purpose for 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) . . . . . . . . . . . . . . . . . 30 31 31 32 32 33 Total payments received by the end of your 2020 tax year (see instructions) . . . . . 33 34 34 35 35 Multiply line 34 by the gross profit percentage on line 19 for year of first sale . . . . . . Enter the part of line 35 that is ordinary income under the recapture rules. See instructions . . . 36 36 0 37 Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797. See instructions . . . 37

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

### 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

2020 Attachment Sequence No. 67

Name(s) shown on return Identifying number Total Forms Filed = 465,993 Description of property ▶ ..... Date acquired (mm/dd/yyyy) ▶ 2a **b** Date sold (mm/dd/yyyy) ▶ 3 Was the property you sold to a related party a marketable security? If "Yes," complete Part III. If "No," complete 4 Yes No Gross Profit and Contract Price. Complete this part for all years of the installment agreement. Selling price including mortgages and other debts. **Don't** include interest, whether stated or unstated 387.053.365 5 6 Mortgages, debts, and other liabilities the buyer assumed or took the property 7 7 Subtract line 6 from line 5 . . . . . . . . . . . . . . . . 8 9 9 10 10 11 11 12 Income recapture from Form 4797, Part III (see instructions) . . . . . . 13 13 99.647.806 14 Subtract line 13 from line 5. If zero or less, don't complete the rest of this form. See instructions . . . 287,405,559 14 If the property described on line 1 above was your main home, enter the amount of your excluded 15 653,888 15 16 286,800,313 16 17 17 557.771 18 18 384,827,265 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- . . . . . . . . . . . . . . . 20 216,292 21 Payments received during year (see instructions). Don't include interest, whether stated or unstated . 21 64,943,275 22 22 65,500,886 Payments received in prior years (see instructions). Don't include interest, 23 23 24 48.676.602 25 25 Enter the part of line 24 that is ordinary income under the recapture rules. See instructions . . . . 108,984 26 Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797. See instructions . . . 48,567,618 Part III Related Party Installment Sale Income. Don't complete if you received the final payment this tax year. 27 Name, address, and taxpayer identifying number of related party ► 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 first disposition was a sale or exchange of stock to the issuing corporation. b ☐ The second disposition was an involuntary conversion and the threat of conversion occurred after the first disposition. С ☐ The second disposition occurred after the death of the original seller or buyer. d ☐ It can be established to the satisfaction of the IRS that tax avoidance wasn't a principal purpose for either of the dispositions. If this box is checked, attach an explanation. See instructions. 30 Selling price of property sold by related party (see instructions) . . . . . . . . . . . . . . . . . 30 31 31 32 32 33 Total payments received by the end of your 2020 tax year (see instructions) . . . . . . . 33 34 34 35 35 36 36 Enter the part of line 35 that is ordinary income under the recapture rules. See instructions . . . 0 37 Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797. See instructions . . . 37

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

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 =

9,491

Identifying number

Castia	A Decular Credit Chin this section and so to Costion D if you are cleating o	r provinced (an	- d o r o	not reveleined the
	on A-Regular Credit. Skip this section and go to Section B if you are electing on ative simplified credit.	r previously elected (an	id are	not revoking) the
1	Certain amounts paid or incurred to energy consortia (see instructions)		1	42
2	Basic research payments to qualified organizations (see instructions)	2		
3	Qualified organization base period amount	3		
4	Subtract line 3 from line 2. If zero or less, enter -0		4	*
5	Wages for qualified services (do not include wages used in figuring the work			
	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 <b>smaller</b> of line 13 or line 14		15	1,193
16	Add lines 1, 4, and 15		16	1,283
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%	6 (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	1,283
Section	on B-Alternative Simplified Credit. Skip this section if you are completing Section	on A.		
18	Certain amounts paid or incurred to energy consortia (see the line 1 instructions)		18	0
19	Basic research payments to qualified organizations (see the line 2 instructions)	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		
32	Multiply line 31 by 14% (0.14). If you skipped lines 30 and 31, multiply line 28 by		32	410
33	Add lines 23 and 32		33	418
34	Are you electing the reduced credit under section 280C? ► Yes ☐ No ☐		55	410
J <del>-1</del>	If "Yes," multiply line 33 by 79% (0.79). If "No," enter the amount from line 33	and soo the line 17		
	instructions for the statement that must be attached. Members of controlled c			
	under common control, see instructions for the statement that must be attached		34	121
	and. Common Control, Coo metabalone for the statement that must be attached		<b>34</b>	421

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 13700H

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

<sup>\*</sup> 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 =

9,491

Identifying number

Basic research payments to qualified organizations (see instructions)	% 15 16 ee the nesses 17	21,040
Subtract line 3 from line 2. If zero or less, enter -0-  Wages for qualified services (do not include wages used in figuring the work opportunity credit).  Cost of supplies  Rental or lease costs of computers (see instructions).  Total qualified research expenses. Add lines 5 through 8.  Enter the applicable percentage, but not more than 16% (0.16) (see instructions)  Enter average annual gross receipts. See instructions  In Multiply line 11 by the percentage on line 10.  Subtract line 12 from line 9. If zero or less, enter -0-  Multiply line 9 by 50% (0.50).  Enter the smaller of line 13 or line 14.  Add lines 1, 4, and 15.  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 s instructions for the statement that must be attached. Members of controlled groups or busin under common control, see instructions for the statement that must be attached.  Certain amounts paid or incurred to energy consortia (see the line 1 instructions)  Basic research payments to qualified organizations (see the line 1 instructions)  Cualified organization base period amount (see the line 3 instructions)  Qualified organization base period amount (see the line 3 instructions)  Qualified organization base period amount (see the line 3 instructions)  Qualified organization base period amount (see the line 3 instructions)  Qualified organization base period amount (see the line 3 instructions)  Qualified organization base period amount (see the line 3 instructions)  Subtract line 20 from line 19. If zero or less, enter -0-  Add lines 18 and 21  Multiply line 22 by 20% (0.20)  Wages for qualified services (do not include wages used in figuring the work opportunity credit)  Cost of supplies  Rental or lease costs of computers (see the line 7 instructions)  Enter the applicable percentage of contract research expenses. See the line 8 instructions  Total qualified research expenses. Add lines 24 through 27  Enter your total qualified	% 15 16 ee the nesses 17	124,726 126,304 21,040
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Enter the applicable percentage of contract research expenses. See instructions Total qualified research expenses. Add lines 5 through 8  Enter fixed-base percentage, but not more than 16% (0.16) (see instructions) Enter average annual gross receipts. See instructions  In Multiply line 11 by the percentage on line 10  Subtract line 12 from line 9. If zero or less, enter -0-  Multiply line 9 by 50% (0.50)  Enter the smaller of line 13 or line 14  Add lines 1, 4, and 15  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 s instructions for the statement that must be attached. Members of controlled groups or busin under common control, see instructions for the statement that must be attached.  Certain amounts paid or incurred to energy consortia (see the line 1 instructions) Basic research payments to qualified organizations (see the line 1 instructions) Qualified organization base period amount (see the line 3 instructions) Qualified organization base period amount (see the line 3 instructions)  Subtract line 20 from line 19. If zero or less, enter -0-  Add lines 18 and 21  Multiply line 22 by 20% (0.20)  Wages for qualified services (do not include wages used in figuring the work opportunity credit)  Cost of supplies  Rental or lease costs of computers (see the line 7 instructions)  Enter the applicable percentage of contract research expenses. See the line 8 instructions  Total qualified research expenses. Add lines 24 through 27  Enter your total qualified research expenses for the prior 3 tax years. If you had	15 16 ee the nesses 17	21,040
Enter fixed-base percentage, but not more than 16% (0.16) (see instructions)  Enter average annual gross receipts. See instructions	15 16 ee the nesses 17	21,040
Enter average annual gross receipts. See instructions  Multiply line 11 by the percentage on line 10  Subtract line 12 from line 9. If zero or less, enter -0-  Multiply line 9 by 50% (0.50)  Enter the smaller of line 13 or line 14  Add lines 1, 4, and 15  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 s instructions for the statement that must be attached. Members of controlled groups or busin under common control, see instructions for the statement that must be attached  Certain amounts paid or incurred to energy consortia (see the line 1 instructions)  Basic research payments to qualified organizations (see the line 2 instructions)  Qualified organization base period amount (see the line 3 instructions)  Qualified organization base period amount (see the line 3 instructions)  Subtract line 20 from line 19. If zero or less, enter -0-  Add lines 18 and 21  Multiply line 22 by 20% (0.20)  Wages for qualified services (do not include wages used in figuring the work opportunity credit)  Cost of supplies  Rental or lease costs of computers (see the line 7 instructions)  Enter the applicable percentage of contract research expenses. See the line 8 instructions  Total qualified research expenses. Add lines 24 through 27  Enter your total qualified research expenses for the prior 3 tax years. If you had	15 16 ee the nesses 17	21,040
Multiply line 11 by the percentage on line 10	ee the nesses	21,040
Multiply line 11 by the percentage on line 10	ee the nesses	21,040
Subtract line 12 from line 9. If zero or less, enter -0	ee the nesses	21,040
Enter the smaller of line 13 or line 14  Add lines 1, 4, and 15  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 s instructions for the statement that must be attached. Members of controlled groups or busin under common control, see instructions for the statement that must be attached.  Certain amounts paid or incurred to energy consortia (see the line 1 instructions)  Basic research payments to qualified organizations (see the line 2 instructions)  Qualified organization base period amount (see the line 3 instructions)  Subtract line 20 from line 19. If zero or less, enter -0-  Add lines 18 and 21  Multiply line 22 by 20% (0.20)  Wages for qualified services (do not include wages used in figuring the work opportunity credit)  Cost of supplies  Rental or lease costs of computers (see the line 7 instructions)  Enter the applicable percentage of contract research expenses. See the line 8 instructions  Total qualified research expenses. Add lines 24 through 27  Enter your total qualified research expenses for the prior 3 tax years. If you had	ee the nesses	21,040
Add lines 1, 4, and 15	ee the nesses	21,040
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 s instructions for the statement that must be attached. Members of controlled groups or busing under common control, see instructions for the statement that must be attached	ee the nesses	21,040
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under common control, see instructions for the statement that must be attached	17	0
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Certain amounts paid or incurred to energy consortia (see the line 1 instructions)  Basic research payments to qualified organizations (see the line 2 instructions)  Qualified organization base period amount (see the line 3 instructions)  Subtract line 20 from line 19. If zero or less, enter -0-  Add lines 18 and 21  Multiply line 22 by 20% (0.20)  Wages for qualified services (do not include wages used in figuring the work opportunity credit)  Cost of supplies  Rental or lease costs of computers (see the line 7 instructions)  Enter the applicable percentage of contract research expenses. See the line 8 instructions  Total qualified research expenses. Add lines 24 through 27  Enter your total qualified research expenses for the prior 3 tax years. If you had	18	0
Subtract line 20 from line 19. If zero or less, enter -0- Add lines 18 and 21  Multiply line 22 by 20% (0.20)  Wages for qualified services (do not include wages used in figuring the work opportunity credit)  Cost of supplies  Rental or lease costs of computers (see the line 7 instructions)  Enter the applicable percentage of contract research expenses. See the line 8 instructions  Total qualified research expenses. Add lines 24 through 27  Enter your total qualified research expenses for the prior 3 tax years. If you had		*
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Multiply line 22 by 20% (0.20)  Wages for qualified services (do not include wages used in figuring the work opportunity credit)  Cost of supplies  Rental or lease costs of computers (see the line 7 instructions)  Enter the applicable percentage of contract research expenses. See the line 8 instructions  Total qualified research expenses. Add lines 24 through 27  Enter your total qualified research expenses for the prior 3 tax years. If you had		
Wages for qualified services (do not include wages used in figuring the work opportunity credit)		
opportunity credit)	23	*
Rental or lease costs of computers (see the line 7 instructions)		
Enter the applicable percentage of contract research expenses. See the line 8 instructions		
instructions		
Total qualified research expenses. Add lines 24 through 27		
no qualified research expenses in any one of those years, skip lines 30 and 31   29		
Divide line 29 by 6.0		
Subtract line 30 from line 28. If zero or less, enter -0		
Multiply line 31 by 14% (0.14). If you skipped lines 30 and 31, multiply line 28 by 6% (0.06)	32	22,389
Add lines 23 and 32		22,695
Are you electing the reduced credit under section 280C? ▶ Yes □ No □	33	
If "Yes," multiply line 33 by 79% (0.79). If "No," enter the amount from line 33 and see the		
instructions for the statement that must be attached. Members of controlled groups or busing	33	
under common control, see instructions for the statement that must be attached	<b>33</b> line 17	

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

Section C-Current Year Credit

Form 6765 (Rev. 12-2020)

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	1,705
37	Credit for increasing research activities from partnerships, S corporations, estates, and trusts	37	8,124
38	Add lines 36 and 37	38	9,491
	• 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.		
	<b>Note:</b> 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	
Secti	on D-Qualified Small Business Payroll Tax Election and Payroll Tax Credit. Skip this section if the p	ayrol	tax election does
not a	oply. See instructions.		
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	32
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)

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

# 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 6	765 (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	39,922
37	Credit for increasing research activities from partnerships, S corporations, estates, and trusts	37	143,083
38	Add lines 36 and 37	38	183,006
	• 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.		
	<b>Note:</b> 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 poply. 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	1.354
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	*
			<b>6765</b> (Rev. 12-2020)
* Dat	a not shown because of the small number of sample returns on which they are based.	. 5.111	(1.51.12.2020)

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

OMB No. 1545-0644

► Go to www.irs.gov/Form6781 for the latest information. Attachment Sequence No. **82** Department of the Treasury ► Attach to your tax return. Internal Revenue Service Identifying number Name(s) shown on tax return Total Forms Filed = 552,813 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** (c) Gain (a) Identification of account (b) (Loss) 1 Add the amounts on line 1 in columns (b) and (c) . . . . . . 2 3 Net gain or (loss). Combine line 2, columns (b) and (c) . . . . . . . . . . 547,319 4 4 5,299 5 5 544.281 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 -0-2.687 7 7 544.105 Short-term capital gain or (loss). Multiply line 7 by 40% (0.40). Enter here and include on line 4 of 8 534,662 Long-term capital gain or (loss). Multiply line 7 by 60% (0.60). Enter here and include on line 11 of 544,105 Gains and Losses From Straddles. Attach a separate statement listing each straddle and its components. Part II Section A—Losses From Straddles (f) Loss. (a) Description of property (b) Date (c) Date (d) Gross (e) Cost or (h) Recognized loss. (g) If column (e) is Unrecognized If column (f) is entered into closed out sales price other basis more than (d), more than (g), or acquired or sold plus expense gain on enter difference. of sale offsetting enter difference. Otherwise. positions Otherwise, enter -0-. enter -0-. 10 Enter the short-term portion of losses from line 10, column (h), here and include on line 4 of Schedule 2,141 11a Enter the long-term portion of losses from line 10, column (h), here and include on line 11 of Schedule 11b 1.273 Section B-Gains From Straddles (f) Gain. (a) Description of property (b) Date (c) Date (d) Gross (e) Cost or If column (d) is entered into closed out sales price other basis more than (e), or acquired plus expense or sold enter difference. of sale Otherwise, enter -0-. 12 Enter the short-term portion of gains from line 12, column (f), here and include on line 4 of Schedule D 13a 1,632 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) Part III (e) Unrecognized (a) Description of property (b) Date (c) Fair market (d) Cost or gain. If column (c) acquired value on last other basis is more than (d), business day as adjusted enter difference. of tax year Otherwise, enter -0-. 14

6781

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

OMB No. 1545-0644 ► Go to www.irs.gov/Form6781 for the latest information. Department of the Treasury Attachment Sequence No. 82 ► Attach to your tax return. Internal Revenue Service Name(s) shown on tax return Identifying number Total Forms Filed = 552,813 Check all applicable boxes. A ☐ Mixed straddle election **C** Mixed straddle account election See instructions. **B** Straddle-by-straddle identification election **D** ☐ Net section 1256 contracts loss election Part I **Section 1256 Contracts Marked to Market** (a) Identification of account (b) (Loss) (c) Gain 1 Add the amounts on line 1 in columns (b) and (c) . . . . . . 2 3 Net gain or (loss). Combine line 2, columns (b) and (c) . . . . . . . . . . . . . -982,192 4 Form 1099-B adjustments. See instructions and attach statement . . . . . . . . . . . . . . . . 4 41,336 5 -940.855 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 -0-1,027,115 7 86.259 Short-term capital gain or (loss). Multiply line 7 by 40% (0.40). Enter here and include on line 4 of 34,503 Long-term capital gain or (loss). Multiply line 7 by 60% (0.60). Enter here and include on line 11 of 51,757 Gains and Losses From Straddles. Attach a separate statement listing each straddle and its components. Part II Section A-Losses From Straddles (f) Loss. (a) Description of property (b) Date (c) Date (d) Gross (e) Cost or (h) Recognized loss. (g) If column (e) is Unrecognized If column (f) is entered into closed out sales price other basis more than (d), gain on more than (g), or acquired plus expense or sold enter difference. enter difference. of sale offsetting 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 60.098 11a Enter the long-term portion of losses from line 10, column (h), here and include on line 11 of Schedule 11b 118.914 Section B-Gains From Straddles (f) Gain. (a) Description of property (b) Date (c) Date (d) Gross (e) Cost or If column (d) is entered into closed out sales price other basis more than (e), or acquired plus expense or sold enter difference. of sale Otherwise, enter -0-. 12 Enter the short-term portion of gains from line 12, column (f), here and include on line 4 of Schedule D 13a 1,423,874 Enter the long-term portion of gains from line 12, column (f), here and include on line 11 of Schedule 878,837 Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo entry only (see instructions) Part III (e) Unrecognized (a) Description of property (b) Date (c) Fair market (d) Cost or gain. If column (c) acquired value on last other basis is more than (d), business day as adjusted enter difference. of tax year Otherwise, enter -0-14

Cat. No. 13715G

Form **8283**(Rev. December 2020)
Department of the Treasury
Internal Revenue Service

#### **Noncash Charitable Contributions**

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

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

OMB No. 1545-0074

Attachment

Sequence No. 155

Name	(s) shown on you	r income tax return	Total F	orms File	d =	3,080,803					Idei	ntifying number
Note:	Figure the am	ount of your cont	ribution ded	duction be	fore	completing this	fo	rm. See yo	ur tax	return instruction	ons.	
Sect	(or a g securi	ted Property of proup of similar ties and certain	tems) for other pro	which yo perty eve	u cla n if	aimed a deduct the deduction i	tic is	on of \$5,00 more thar	00 or 1 \$5,0	less. Also list p 100. See instru	oubl	icly traded
1	(a) Na	ation on Donal ame and address of the lonee organization	-	(b) If donated property is a vehicle (see instructions), check the box. Also enter the vehicle identification number (unless Form 1098-C is attached).			(c) Description and condition of donated properl (For a vehicle, enter the year, make, model, and mileage. For securities and other property,			make, model, and other property,		
Α										see instru	uction	ns.)
В												
E												
Note:	If the amount	you claimed as a	deduction	for an iten	n is S	\$500 or less, you	ı d	lo not have	to co	mplete columns	(e),	(f), and (g).
	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)		acquired donor		(g) Donor's cost or adjusted basis		n) Fair market (see instruction				to determine et value
Α						1,976,690		2,997,4	90			
В												
_C												
D 												
Sect	Invent which Sectio	ted Property O tory Reportable you claimed a on A). Provide a ed appraisal is g	e in Section deduction separate f	on A) — C of more orm for e	omp than each	olete this section \$5,000 per ite In item donated	on em ur	for one ite or group nless it is p	em (o (exce part o	r a group of sirept contribution of a group of sire	mila ns re	r items) for eportable in
Par	t I Inform	ation on Dona	ted Prope	rty								
2	a	ox that describes ontribution of \$20 ed Conservation ment ontribution of less orabilia, and other solude coins, stamp	0,000 or mo Contributio than \$20,0 s, watercolor similar object	re) n 000) s, prints, dr	e f g h rawin	Other Real Securities Collectibles Intellectual ags, ceramics, antic	s** Pr que	roperty es, decorativ	e arts,	k ☐ Other textiles, carpets,	silve	nousehold items
		es, you must atta	•								[	
3		otion of donated prope pace, attach a separate				ny tangible personal pr ny of the overall physic						(c) Appraised fair market value
A B												123,030
С												
	(d) Date acquired by donor (mo., yr.)	d <b>(e)</b> Ho	w acquired by	donor		(f) Donor's cost or adjusted basis		(g) For bargai enter amo received and a separate sta	ount attach	as a deduction		(i) Date of contribution (see instructions)
Δ						106 465	1	3.013	2	02 570		

В

# 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

(Rev. December 2020) Department of the Treasury

### **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.

Attachment

OMB No. 1545-0074

Interna	l Revenue	Service	<b>▶</b> Go	to www.irs.	gov/Forn	n8283	3 for instructions a	nd the lates	informa	ation.	Sequ	uence No. 133
Name	(s) show	n on your	income tax return	Total F	orms Fi	orms Filed = 3,080,803					Identi	fying number
Note	: Figure	the amo	unt of your cont	ribution de	duction l	befor	e completing this	form. See	our tax	return instruction	ons.	
Sect	ion A.	(or a gro	oup of similar i	tems) for	which y	ou c	Publicly Tradeo laimed a deduct f the deduction i	tion of \$5,	000 or	less. Also list p	oublic	ly traded
Par	t I						need more spac					
1			ne and address of the nee organization	Э	check th	(b) If donated property is a vehicle (see instructions), check the box. Also enter the vehicle identification number (unless Form 1098-C is attached).  (c) Description and condition (For a vehicle, enter the mileage. For securities see instructions), (c) Description and conditions (For a vehicle, enter the mileage. For securities see instructions), (b) If donated property is a vehicle (see instructions), (For a vehicle, enter the mileage. For securities see instructions), (For a vehicle, enter the mileage. For securities see instructions), (For a vehicle, enter the mileage. For securities see instructions), (For a vehicle, enter the mileage. For securities see instructions), (For a vehicle, enter the mileage. For securities see instructions), (For a vehicle, enter the mileage. For securities see instructions), (For a vehicle, enter the mileage. For securities see instructions), (For a vehicle, enter the mileage. For securities see instructions), (For a vehicle, enter the mileage), (For a			year, ma s and ot	ake, model, and ther property,		
A												
В												
С												
D												
E												
Note	: If the a	amount yo	ou claimed as a	deduction	for an ite	em is	\$500 or less, you	do not hav	e to co	mplete columns	(e), (f)	, and (g).
		te of the ribution	(e) Date acquired by donor (mo., yr.)		acquired donor		(g) Donor's cost or adjusted basis	(h) Fair market value (see instructions)		(i) Method used the fair mar		
A							28,265,059	71,25	2,478			
В												
D E												
		which y Section qualified	ory Reportable you claimed a d A). Provide a d appraisal is g	e in Section deduction separate t generally r	on A) — of more form for equired	Come that eac	ublicly Traded an plete this section \$5,000 per ite this term donated items reportable.	n for one m or grou unless it is	item (o p (exce s part o	r a group of sine pt contribution of a group of sine proup of sine sine sine sine sine sine sine sin	milar i ns rep milar i	items) for portable in
Par			that describes	-		, don	actod					
2	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 item  c ☐ Equipment g ☐ Collectibles** k ☐ Other  d ☐ Art* (contribution of less than \$20,000) h ☐ Intellectual Property  * Art includes paintings, sculptures, watercolors, prints, drawings, ceramics, antiques, decorative arts, textiles, carpets, silver, rare manuscriphistorical memorabilia, and other similar objects.											
Note			· '	, , ,		•	ports memorabilia, of of the property. Se			as defined above.		
3	(		on of donated prope ce, attach a separate				any tangible personal pr ary of the overall physic					(c) Appraised fair market value
Α												34,289,330
В												
С								T			$\perp$	
	by	te acquired donor no., yr.)	<b>(e)</b> Ho	w acquired by	donor		(f) Donor's cost or adjusted basis	(g) For bary enter a received a a separate	mount nd attach	as a deduction		(i) Date of contribution (see instructions)
_A_							8,095,882	673,	571	9,004,290	$\perp$	
B											-	
С	I		1				1	1		1	1	

Form 82	83 (Rev. 12-2020)			Page <b>2</b>
Name(s	s) shown on your income tax return		Identifying number	er
Part	Partial Interests and Restricted Use Property (On Complete lines 4a through 4e if you gave less than Complete lines 5a through 5c if conditions were play attach the required statement. See instructions.	an entire interest in a property li	sted in Section B	3, Part I.
4a	Enter the letter from Section B, Part I that identifies the proper		entire interest ►	
	If Section B, Part II applies to more than one property, attach a	•	_	
b	Total amount claimed as a deduction for the property listed in Se	ection B, Part I: <b>(1)</b> For this tax yea <b>(2)</b> For any prior ta		
С	Name and address of each organization to which any such c		•	if different
·	from the donee organization above):	onanganen was made in a prior ye	ar (complete omy	
	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 loc	 cated or kept ▶		
e	Name of any person, other than the donee organization, having		<b>&gt;</b>	
b	Is there a restriction, either temporary or permanent, on the dorn Did you give to anyone (other than the donee organization or organization in cooperative fundraising) the right to the income the property, including the right to vote donated securities, to designate the person having such income, possession, or right	or another organization participating e from the donated property or to t acquire the property by purchase out to acquire?	g with the donee he possession of ir otherwise, or to	Yes No
	Is there a restriction limiting the donated property for a particular			: -l <b>t</b> : <b>f</b> :
Part	Taxpayer (Donor) Statement—List each item incluas having a value of \$500 or less. See instructions.	ided in Section B, Part I above t	nat tne appraisai	identifies
of not  Signatu			tem. See instructio	
Part	er (donor) ►  V Declaration of Appraiser		Date ►	
l declare married	e that I am not the donor, the donee, a party to the transaction in which the donor to any person who is related to any of the foregoing persons. And, if regularly use als during my tax year for other persons.			
of prope fraudule abetting substan under se of the ap	eclare that I perform appraisals on a regular basis; and that because of my qualifi- orty 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 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 re- section 6695A of the Internal Revenue Code, as well as other applicable penalties. opraisal barred from presenting evidence or testimony before the Department of the	of the appraised property value. Furthermore nis Form 8283 may subject me to the penalty connection with a return or claim for refund. I turn or claim for refund that is based on my ap I affirm that I have not been at any time in the	, I understand that a fals under section 6701(a) (a I also understand that, if ppraisal, I may be subjec three-year period endin	se or aiding and there is a ct to a penalty g on the date
Sign	Appraiser signature ▶		Date ►	
Here Busine	Appraiser name ► ss address (including room or suite no.)	Title ►	Identifying number	er
City or	town, state, and ZIP code			
Part	V Donee Acknowledgment			
	naritable organization acknowledges that it is a qualified organiza	tion under section 170(c) and that it	received the donate	ed property
as des	cribed in Section B, Part I, above on the following date ▶	.,		
B, Par	rmore, this organization affirms that in the event it sells, exchan t I (or any portion thereof) within 3 years after the date of receip ve the donor a copy of that form. This acknowledgment does no	t, it will file Form 8282, Donee Infor	rmation Return, wit	h the IRS
	the organization intend to use the property for an unrelated use		▶ □Ye	es 🗌 No
Name o	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	

# 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 82	283 (Rev. 12-2020)				F	Page 2
Name(s	s) shown on your income tax return			Identifying number	er	
Part	Partial Interests and Restricted Us Complete lines 4a through 4e if you go Complete lines 5a through 5c if cond attach the required statement. See in	gave less than an litions were place	entire interest in a property list	ted in Section B	, Par	t I.
4a	Enter the letter from Section B, Part I that iden	tifies the property f	or which you gave less than an en	tire interest ►		
	If Section B, Part II applies to more than one p		•			
b	Total amount claimed as a deduction for the pro-	operty listed in Secti				
С	Name and address of each organization to w	hich any such cont	(2) For any prior tax	• —	f diffe	
Ū	from the donee organization above):  Name of charitable organization (donee)	Their arry such com	inibation was made in a prior year	r (complete only i	i dilic	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Address (number, street, and room or suite no	p.)	City or town, state, and ZIP cod	le		
	For tangible property, enter the place where the		· -			
е	Name of any person, other than the donee org	janization, naving a	ctual possession of the property	·		
					Yes	No
b	Is there a restriction, either temporary or perma Did you give to anyone (other than the done organization in cooperative fundraising) the rig the property, including the right to vote donate designate the person having such income, pos	e organization or a ght to the income fr ed securities, to acc ssession, or right to	nother organization participating rom the donated property or to the quire the property by purchase or acquire?	with the donee e possession of otherwise, or to		
c Part	Is there a restriction limiting the donated properties.  Taxpayer (Donor) Statement—List as having a value of \$500 or less. Se	each item include			ident	ifies
► Signatu	more than \$500 (per item). Enter identifying lett  ure of er (donor) ▶	<u> </u>	·	Date ►		
Part	• •					
married	e that I am not the donor, the donee, a party to the transactio to any person who is related to any of the foregoing persons als during my tax year for other persons.					
of prope fraudule abetting substant under se	leclare that I perform appraisals on a regular basis; and that I erty being valued. I certify that the appraisal fees were not ba ent overstatement of the property value as described in the qi y the understatement of tax liability). I understand that my app itial or gross valuation misstatement of the value of the prope ection 6695A of the Internal Revenue Code, as well as other ppraisal barred from presenting evidence or testimony before	sed on a percentage of the ualified appraisal or this Foraisal will be used in con- orty claimed on the return applicable penalties. I affi	the appraised property value. Furthermore, I Form 8283 may subject me to the penalty un innection with a return or claim for refund. I a or claim for refund that is based on my app irm that I have not been at any time in the th	understand that a fals nder section 6701(a) (a also understand that, if braisal, I may be subject aree-year period ending	e or iding ar there is at to a p g on the	nd s a penalty
Sign	Appraiser signature ▶			Date ►		
Here	Appraiser name ►		Title ▶			
Busines	ss address (including room or suite no.)			Identifying number	er	
City or	town, state, and ZIP code					
Part	V Donee Acknowledgment					
This ch	haritable organization acknowledges that it is a c scribed in Section B, Part I, above on the followin		n under section 170(c) and that it re	eceived the donate	ed pro	perty
B, Pari and give	ermore, this organization affirms that in the event I (or any portion thereof) within 3 years after the the donor a copy of that form. This acknowledges	ne date of receipt, it edgment does not r	will file <b>Form 8282</b> , Donee Inform epresent agreement with the claim	nation Return, wit ned fair market va	h the llue	IRS
	the organization intend to use the property for a of charitable organization (donee)		mployer identification number	▶ ∐Ye	s L	No
	<u> </u>					
Addres	ss (number, street, and room or suite no.)	C	ity or town, state, and ZIP code			
Authori	ized signature	Ti	tle	Date		

14

15

16

#### 2020 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

**Mortgage Interest Credit** 

(For Holders of Qualified Mortgage Credit Certificates Issued by State or Local Governmental Units or Agencies) ▶ Go to www.irs.gov/Form8396 for the latest information.

OMB No. 1545-0074

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

Sequence No. 138

Name(s) shown on your tax return Your social security number Total Forms Filed = 102,226 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. **Current Year Mortgage Interest Credit** 1 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 % If line 2 is 20% or less, multiply line 1 by line 2. If line 2 is more than 20%, or you refinanced your 3 mortgage and received a reissued certificate, see the instructions for the amount to enter 3 94.556 You must reduce your deduction for home mortgage interest on Schedule A (Form 1040) by the amount on line 3. Enter any 2017 credit carryforward from line 16 of your 2019 Form 8396 . 8,314 5 Enter any 2018 credit carryforward from line 14 of your 2019 Form 8396 . 5 10,588 6 Enter any 2019 credit carryforward from line 17 of your 2019 Form 8396 . 6 13,591 7 7 98.856 Add lines 3 through 6 . . 8 Limitation based on tax liability. Enter the amount from the Credit Limit Worksheet. See instructions . 8 96,662 Current year mortgage interest credit. Enter the smaller of line 7 or line 8. Also include this amount in the total on Schedule 3 (Form 1040), line 6. Check box c on that line and enter "8396" in the space 93.292 Part II Mortgage Interest Credit Carryforward to 2021 (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 Enter the larger of line 9 or line 10. . 12 13 Subtract line 12 from line 11. . . 13

Subtract line 14 from line 13. . .

2019 credit carryforward to 2021. Enter the smaller of line 6 or line 13

2018 credit carryforward to 2021. Enter the smaller of line 5 or line 15 . . .

2020 credit carryforward to 2021. Subtract line 9 from line 3. If zero or less, enter -0-

14

15

16

17

Mortgage Interest Credit

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

OMB No. 1545-0074

▶ Go to www.irs.gov/Form8396 for the latest information. Department of the Treasury Sequence No. **138** ► Attach to Form 1040, 1040-SR, or 1040-NR. Internal Revenue Service (99) Name(s) shown on your tax return Your social security number Total Forms Filed = 102,226 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. **Current Year Mortgage Interest Credit** 1 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 % If line 2 is 20% or less, multiply line 1 by line 2, If line 2 is more than 20%, or you refinanced your 3 mortgage and received a reissued certificate, see the instructions for the amount to enter 3 155,663 You must reduce your deduction for home mortgage interest on Schedule A (Form 1040) by the amount on line 3. Enter any 2017 credit carryforward from line 16 of your 2019 Form 8396 . . . 49,604 5 Enter any 2018 credit carryforward from line 14 of your 2019 Form 8396 . 5 18,448 6 Enter any 2019 credit carryforward from line 17 of your 2019 Form 8396 . 6 21,667 245,382 7 7 Add lines 3 through 6 . . . . . . . . . . . . 8 Limitation based on tax liability. Enter the amount from the Credit Limit Worksheet. See instructions . 8 802,434 Current year mortgage interest credit. Enter the smaller of line 7 or line 8. Also include this amount in the total on Schedule 3 (Form 1040), line 6. Check box c on that line and enter "8396" in the space 152,225 Part II Mortgage Interest Credit Carryforward to 2021 (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 Enter the **larger** of line 9 or line 10. . . 12 13 Subtract line 12 from line 11 . . . . . . . 13 14 **2019 credit carryforward to 2021.** Enter the **smaller** of line 6 or line 13 14 15 15 Subtract line 14 from line 13 . . . . 16 2018 credit carryforward to 2021. Enter the smaller of line 5 or line 15 . . . 16

2020 credit carryforward to 2021. Subtract line 9 from line 3. If zero or less, enter -0-

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**Passive Activity Loss Limitations** 

OMB No. 1545-1008

► See separate instructions. ► Attach to Form 1040, 1040-SR, or 1041.

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

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

Attachment Sequence No. **858** 

Form **8582** (2020)

Name(s	s) shown on return  Total Forms Filed = 7,804,876	lentifying n	umber
Par	<u> </u>		
Dant	Caution: Complete Worksheets 1, 2, and 3 before completing Part I.		
	al Real Estate Activities With Active Participation (For the definition of active participation, sec ial Allowance for Rental Real Estate Activities in the instructions.)	e	
1a	Activities with net income (enter the amount from Worksheet 1, column (a)) .   1a   2,552,425		
b	Activities with net loss (enter the amount from Worksheet 1, column (b)) 1b ( 3,358,506	7	
c	Prior years' unallowed losses (enter the amount from Worksheet 1, column (c))  1c ( 1,710,769	<u> </u>	
d	Combine lines 1a, 1b, and 1c	1d	4,800,730
	mercial Revitalization Deductions From Rental Real Estate Activities		.,,
2a	Commercial revitalization deductions from Worksheet 2, column (a)   2a   ( *	)	
b	Prior year unallowed commercial revitalization deductions from Worksheet 2,		
	column (b)	)	
С	Add lines 2a and 2b	2c	( 44 )
All O	ther Passive Activities		
3a	Activities with net income (enter the amount from Worksheet 3, column (a)) . 3a 2,520,903		
b	Activities with net loss (enter the amount from Worksheet 3, column (b)) 3b ( 1,911,669	)	
С	Prior years' unallowed losses (enter the amount from Worksheet 3, column (c)) 3c ( 1,415,807	)	
d	Combine lines 3a, 3b, and 3c	3d	3,874,925
4	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with you	ır	
	return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c	1 1	
	Report the losses on the forms and schedules normally used	4	7,791,256
	If line 4 is a loss and:  • Line 1d is a loss, go to Part II.		
	• Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.		
Courti	• Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III	_	
	i <b>on:</b> If your filing status is married filing separately and you lived with your spouse at any time during t I or Part III. Instead, go to line 15.	ne year,	do not complete
Pari			
T GIT	Note: Enter all numbers in Part II as positive amounts. See instructions for an example.		
5	Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4	5	2,856,091
6	Enter \$150,000. If married filing separately, see instructions		_,000,000
7	Enter modified adjusted gross income, but not less than zero. See instructions 7 2,993,874		
	Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on		
	line 10. Otherwise, go to line 8.		
8	Subtract line 7 from line 6		
9	Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions	ns <b>9</b>	1,452,053
10	Enter the <b>smaller</b> of line 5 or line 9	10	1,451,615
	If line 2c is a loss, go to Part III. Otherwise, go to line 15.		
Part	•		tivities
	Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instruct		
11	Enter $$25,000$ reduced by the amount, if any, on line 10. If married filing separately, see instructions .		*
12	Enter the loss from line 4		
13	Reduce line 12 by the amount on line 10		32
14	Enter the <b>smallest</b> of line 2c (treated as a positive amount), line 11, or line 13	14	*
Part			4 00=
15	Add the income, if any, on lines 1a and 3a and enter the total		1,297,774
16	Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions		
	to find out how to report the losses on your tax return	16	3.747.341

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

For Paperwork Reduction Act Notice, see instructions.

Department of the Treasury Internal Revenue Service (99) **Passive Activity Loss Limitations** 

► See separate instructions. ► Attach to Form 1040, 1040-SR, or 1041.

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

OMB No. 1545-1008

2020

Attachment Sequence No. 858

Name(s) shown on return

Total Forms Filed = 7.804.876

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

Identifying number

Caution: Complete Worksheets 1, 2, and 3 before completing Part I.  Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)  1 a   96,146,557   1 b   Activities with net lose (enter the amount from Worksheet 1, column (a))   1 a   96,146,557   1 b   Activities with net lose (enter the amount from Worksheet 1, column (b))   1 c   84,175,596   0 d   Combine lines 1a, 1b, and 1c   1 d   40,369,930   2 c   Commercial Revitalization Deductions From Rental Real Estate Activities 2 a   Commercial revitalization deductions from Worksheet 2, column (a)   2 a (		10tal 1 011115 1 fleti = 1,004,070				
Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities in the instructions.)  1a Activities with net income (enter the amount from Worksheet 1, column (a)) .  b Activities with net loss (enter the amount from Worksheet 1, column (b)) .  c Prior years' unallowed losses (enter the amount from Worksheet 1, column (b)) .  d Commercial Revitalization Deductions From Rental Real Estate Activities  2a Commercial revitalization deductions from Worksheet 2, column (a) .  b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b) .  d Add lines 2a and 2b .  2b ( 944 )  All Other Passive Activities  3a Activities with net income (enter the amount from Worksheet 3, column (a)) .  b Activities with net loss (enter the amount from Worksheet 3, column (b)) .  d Combine lines 3a, 3b, and 3c .  4 Combine lines 3d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses enterted on line 1c, 2b, or 3c.  Report the losses on the forms and schedules normally used .  If line 4 is a loss and:  Line 2c is a loss, gand line 1d is zero or more), skip Part II and go to Part III.  Line 2c is a loss, gand line 1d is zero or more), skip Part II and go to Part III.  Line 2c is a loss, gand line 1d is zero or more), skip Part II and go to Part III.  Line 2c is a loss, gand line 1d is zero or more), skip Part II and go to Part III.  Line 2c is a loss, gand line 1d is zero or more), skip Part II and go to Part III.  Line 2c is a loss, gand line 1d is zero or more), skip Part II and go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III II. Instead, go to line 15.  Fart III Special Allowance for Rental Real Estate Activities With Active Participation  Note: Enter the smaller of the loss on line 10 or	Part			•		
Special Allowance for Rental Real Estate Activities in the instructions.)  1a Activities with net loss (enter the amount from Worksheet 1, column (a))  b Activities with net loss (enter the amount from Worksheet 1, column (b))  c Prior years' unallowed losses (enter the amount from Worksheet 1, column (c))  b Prior year unallowed losses (enter the amount from Worksheet 1, column (c))  c Nommercial Revitalization Deductions From Rental Real Estate Activities  2a Commercial revitalization deductions from Worksheet 2, column (a)  c Add lines 2a and 2b  c Add lines 2a and 2b  c Add lines 2a and 2b  d Activities with net loss (enter the amount from Worksheet 3, column (a))  b Prior year unallowed commercial revitalization deductions from Worksheet 3, column (a))  c Add lines 2a and 2b  d Activities with net loss (enter the amount from Worksheet 3, column (a))  d Activities with net loss (enter the amount from Worksheet 3, column (b))  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 3a, 3b, and 3c  d Combine lines 4b, 2c, and 3a. If this line is zero or more, skip Part II and go to Part III.  Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.  Line 3c is a loss (and line 1d is zero or more), skip Part II and go to Part III.  Line 3c is a loss, go to Part III.  Line 3c is a loss, go to Part III.  Line 4b, 3c is a loss, go to Part III.  Line 4b, 3c is a loss, go to Part III.  Line 4b, 3c is a loss, go to Part III.  Line 4b, 3c is a loss, go to Part III.  Line 4b, 3c is a loss, go to Part III.  Line 4b, 3c is a loss, go to Part III.  Line 4b, 3c is a loss, go to Part III.  Line 4b, 3c is a loss, go to Part III.		Caution: Complete Worksheets 1, 2, and 3 before completing Part I.				
1a Activities with net losc (enter the amount from Worksheet 1, column (a))  1b Activities with net loss (enter the amount from Worksheet 1, column (b))  1c Prior years' unallowed closses (enter the amount from Worksheet 1, column (c))  1c Ray175,596 )  1d Combine lines 1a, 1b, and 1c			ive par	rticipation, see	•	
b Activities with net loss (enter the amount from Worksheet 1, column (b)) c Prior years' unallowed losses (enter the amount from Worksheet 1, column (c)) d Combine lines 1a, 1b, and 1c  Commercial Revitalization Deductions From Rental Real Estate Activities 2a Commercial revitalization deductions from Worksheet 2, column (a) b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (a) c Add lines 2a and 2b c Add lines 2a and 2b d Activities with net income (enter the amount from Worksheet 3, column (a)) c Add lines 2a and 2b d Activities with net loss (enter the amount from Worksheet 3, column (a)) d Activities with net loss (enter the amount from Worksheet 3, column (b) d Combine lines 3a, 3b, and 3c d Combine lines 3a, 3b, and 3c d Combine lines 4d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used line 4 is a loss and: line 3 is a loss, and is a loss, and in a loss, and in a loss and in a loss and in a loss and in a loss and in a loss and in a loss and in a loss and line 1 d is zero or more), skip Part II and go to Part III.  line 2b is a loss and line 3d and 2c are zero or more), skip Part II and go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.  Caution: If your filing status is married filing separately, see instructions for an example.  5 Enter the smaller of the loss on line 1 dor the loss on line 4  Line 3d so loss (and lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  Subtract line 7 is greater than or equal to line 6, skip lines 8 and 9, ente	•	•				
c Prior years' unallowed losses (enter the amount from Worksheet 1, column (c)) d Combine lines 1a, 1b, and 1c  Commercial Revitalization Deductions From Rental Real Estate Activities 2a Commercial revitalization deductions from Worksheet 2, column (a) b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b) c Add lines 2a and 2b  Add lines 2a and 2b  Activities with net lincome (enter the amount from Worksheet 3, column (a)) b Activities with net lincome (enter the amount from Worksheet 3, column (b)) c Prior years' unallowed losses (enter the amount from Worksheet 3, column (c)) d Combine lines 3, ab, and 3d c Prior years' unallowed losses (enter the amount from Worksheet 3, column (c)) d Combine lines 3, ab, and 3d c Prior years' unallowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used Line 3d is a loss (and line 1d is zero or more), skip Part II and go to Part III. line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III. line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III. Special Allowance for Rental Real Estate Activities With Active Participation Note: Enter all numbers in Part II as positive amounts. See instructions for an example.  Special Allowance for Rental Real Estate Activities With Active Participation Note: In line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0 on line 10. Otherwise, go to line 8.  Subtract line 7 from line 6  Enter the smaller of the loss on line 1d or the loss on line 1d  Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions  In line 2c is a loss, go to Part III. Otherwise, go to line 15.  Enter the smaller of line 5 or line 9  If line 2c is a loss, go to Part III and go to rea	1a	Activities with net income (enter the amount from Worksheet 1, column (a)) .	1a	96,146,557		
Commercial Revitalization Deductions From Rental Real Estate Activities 2a Commercial revitalization deductions from Worksheet 2, column (a) b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b) c Add lines 2a and 2b 2c (944)  All Other Passive Activities 3a Activities with net income (enter the amount from Worksheet 3, column (a)) b Activities with net loss (enter the amount from Worksheet 3, column (a)) c Prior years' unallowed losses (enter the amount from Worksheet 3, column (b)) d Combine lines 3a, 3b, and 3c d Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used l Line 2c is a loss, and: e Line 2c is a loss, and line 1d is zero or more), skip Part II and go to Part III. e Line 3d is a loss (and lines 1d and 2c are zero or more), skip Part II and go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Otherwise, go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Otherwise, go to line 8.  Subtract line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  Subtract line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  Enter the smaller of the loss on line 10.  Tenter	b	Activities with net loss (enter the amount from Worksheet 1, column (b))	<b>1b</b> (	52,340,890	)	
Commercial Revitalization Deductions From Rental Real Estate Activities  2a Commercial revitalization deductions from Worksheet 2, column (a)  b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)  c Add lines 2a and 2b  Activities with net lincome (enter the amount from Worksheet 3, column (a))  b Activities with net loss (enter the amount from Worksheet 3, column (b))  c Prior years' unallowed losses (enter the amount from Worksheet 3, column (c))  d Combine lines 3a, 3b, and 3c  4 Combine lines 3a, 3b, and 3c  4 Combine lines 1a, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used  4 Line 4 is a loss and:  • Line 2 is a loss, (and line 1d is zero or more), skip Part II and go to Part III.  • Line 2c is a loss (and lines 1d and 2c are zero or more), skip Part III and go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.  Caution: If your filing status is married filing separately with Active Participation  Note: Enter all numbers in Part II as positive amounts. See instructions for an example.  5 Enter the smaller of the loss on line 1d or the loss on line 4  6 Enter \$150,000. If married filing separately, see instructions  Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0 on line 10. Otherwise, go to line 8.  8 Subtract line 7 from line 6  8 Subtract line 7 from line 6  8 Subtract line 7 from line 6  8 Subtract line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0 on line 10. Otherwise, go to line 8.  8 Subtract line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0 on line 10. Otherwise, go to line 8.  8 Subtract line 7 is greater than or equal to line 6, skip lines 8 and 9,	С		1c (	84,175,596	)	
2a Commercial revitalization deductions from Worksheet 2, column (a) b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b) c Add lines 2a and 2b d Add lines 3a, 3b, and 3c d Add lines 3a, 3b, and 3c d Combine lines 3a, 3b, and 3c d Combine lines 3d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used d Line 2c is a loss (and lines 1d is zero or more), skip Part II and go to Part III.	d	Combine lines 1a, 1b, and 1c			1d	-40,369,930
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (c) c Add lines 2a and 2b	Comn	nercial Revitalization Deductions From Rental Real Estate Activities				
column (b)	<b>2</b> a	Commercial revitalization deductions from Worksheet 2, column (a)	2a (	*	)	
c Add lines 2a and 2b	b	Prior year unallowed commercial revitalization deductions from Worksheet 2,				
All Other Passive Activities 3a Activities with net income (enter the amount from Worksheet 3, column (a))		column (b)	<b>2</b> b (	*	)	
3a Activities with net income (enter the amount from Worksheet 3, column (a)) . 3a   172,358,253   3b   (77,613,427 )   3c   77,613,427	С	Add lines 2a and 2b			2c	( 944 )
b Activities with net loss (enter the amount from Worksheet 3, column (b)) 3b (77,613,427) c Prior years' unallowed losses (enter the amount from Worksheet 3, column (c)) 3d (119,154,727) d (70mbine lines 3a, 3b, and 3c 3d -24,409,902  4 Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used 464,780,775  If line 4 is a loss and: • Line 1d is a loss, go to Part II. • Line 3d is a loss (and line 1d is zero or more), skip Part II and go to Part III. • Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.  Caution: If your filing status is married filing separately and you lived with Active Participation  Note: Enter all numbers in Part II as positive amounts. See instructions  Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  8 Subtract line 7 from line 6 8 8 89,880,735  9 Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions  10 Enter the smaller of line 5 or line 9 10 14,855,780  If line 2c is a loss, go to Part III. as positive amounts. See the example for Part II in the instructions.  Note: Enter all numbers in Part III as positive amounts. See the example for Part II in th	All Ot	ner Passive Activities				
c Prior years' unallowed losses (enter the amount from Worksheet 3, column (c)) d Combine lines 3a, 3b, and 3c	3a	Activities with net income (enter the amount from Worksheet 3, column (a)) .	3a	172,358,253		
d Combine lines 3a, 3b, and 3c	b	Activities with net loss (enter the amount from Worksheet 3, column (b))	<b>3b</b> (	77,613,427	)	
Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used .  If line 4 is a loss and:  • Line 1d is a loss, go to Part II.  • Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.  • Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part III or Part III. Instead, go to line 15.  Part III. Special Allowance for Rental Real Estate Activities With Active Participation  Note: Enter all numbers in Part II as positive amounts. See instructions for an example.  5 Enter the smaller of the loss on line 1d or the loss on line 4  6 Enter \$150,000. If married filing separately, see instructions  Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  8 Subtract line 7 from line 6  9 Line 3d is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities  Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  10 Inter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  12 Enter the loss from line 4  13 Reduce line 12 by the amount on line 10  14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13  15 Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities  16 Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions to find out how to report	С	Prior years' unallowed losses (enter the amount from Worksheet 3, column (c))	3c (	119,154,727	)	
Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used .  If line 4 is a loss and:  • Line 1d is a loss, go to Part II.  • Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.  • Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part III or Part III. Instead, go to line 15.  Part III. Special Allowance for Rental Real Estate Activities With Active Participation  Note: Enter all numbers in Part II as positive amounts. See instructions for an example.  5 Enter the smaller of the loss on line 1d or the loss on line 4  6 Enter \$150,000. If married filing separately, see instructions  Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  8 Subtract line 7 from line 6  9 Line 3d is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities  Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  10 Inter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  12 Enter the loss from line 4  13 Reduce line 12 by the amount on line 10  14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13  15 Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities  16 Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions to find out how to report	d	Combine lines 3a, 3b, and 3c			3d	-24.409.902
return; all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on the forms and schedules normally used	4					, ,
Report the losses on the forms and schedules normally used.  If line 4 is a loss and:  • Line 1d is a loss, go to Part II.  • Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.  • Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.  Caution: If your filling status is married filling separately and you lived with your spouse at any time during the year, do not complete Part III or Part III. Instead, go to line 15.  Part III. Special Allowance for Rental Real Estate Activities With Active Participation  Note: Enter all numbers in Part II as positive amounts. See instructions for an example.  5 Enter the smaller of the loss on line 1d or the loss on line 4  6 Enter \$150,000. If married filing separately, see instructions  Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  8 Subtract line 7 from line 6  9 Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions  10 Enter the smaller of line 5 or line 9  11 If line 2c is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities  Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  12 Enter the loss from line 4  13 17,442  14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13  14 *  Part IV Total Losses Allowed  15 Add the income, if any, on lines 1a and 3a and enter the total.  16 Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return  16 86,652,134	-					
If line 4 is a loss and:  • Line 1d is a loss, go to Part II.  • Line 2d is a loss (and line 1d is zero or more), skip Part II and go to Part III.  • Line 3d is a loss (and line 1d and 2c are zero or more), skip Parts II and III and go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part III or Part III. Instead, go to line 15.  Part III Special Allowance for Rental Real Estate Activities With Active Participation  Note: Enter all numbers in Part II as positive amounts. See instructions for an example.  5 Enter the smaller of the loss on line 1 d or the loss on line 4  6 Enter \$150,000. If married filing separately, see instructions  Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  8 Subtract line 7 from line 6  9 Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions  10 Enter the smaller of line 5 or line 9  11 If line 2c is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities  Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  12 Enter the loss from line 4  13 17,442  14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13  14 *  Part IV Total Losses Allowed  15 Add the income, if any, on lines 1a and 3a and enter the total  16 Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return  16 86,652,134					-64.780.775	
Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.  Part III Special Allowance for Rental Real Estate Activities With Active Participation Note: Enter all numbers in Part II as positive amounts. See instructions for an example.  5 Enter the smaller of the loss on line 1d or the loss on line 4 6 Enter \$150,000. If married filing separately, see instructions Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  8 Subtract line 7 from line 6 9 Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions If line 2c is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions  12 Enter the loss from line 4 13 17,442 14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13 15 35,661,980  16 Total Losses Allowed 16 Total Losses Allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return  16 86,652,134		If line 4 is a loss and: • Line 1d is a loss, go to Part II.				
Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.  Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.  Part III Special Allowance for Rental Real Estate Activities With Active Participation Note: Enter all numbers in Part II as positive amounts. See instructions for an example.  5 Enter the smaller of the loss on line 1d or the loss on line 4 6 Enter \$150,000. If married filing separately, see instructions Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  8 Subtract line 7 from line 6 9 Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions If line 2c is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions  12 Enter the loss from line 4 13 17,442 14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13 15 35,661,980  16 Total Losses Allowed 16 Total Losses Allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return  16 86,652,134		<ul> <li>Line 2c is a loss (and line 1d is zero or more), skip Par</li> </ul>	t II and	go to Part III.		
Part II or Part III. Instead, go to line 15.  Part II Special Allowance for Rental Real Estate Activities With Active Participation Note: Enter all numbers in Part II as positive amounts. See instructions for an example.  5 Enter smaller of the loss on line 1d or the loss on line 4					and go	to line 15.
Part II Special Allowance for Rental Real Estate Activities With Active Participation Note: Enter all numbers in Part II as positive amounts. See instructions for an example.  5 Enter the smaller of the loss on line 1d or the loss on line 4  6 Enter \$150,000. If married filing separately, see instructions 7 Enter modified adjusted gross income, but not less than zero. See instructions Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  8 Subtract line 7 from line 6  9 Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions If line 2c is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  12 Enter the loss from line 4  13 Reduce line 12 by the amount on line 10  14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13  15 Add the income, if any, on lines 1a and 3a and enter the total  16 Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return  16 86,652,134			at any	time during t	ne year,	do not complete
Note: Enter all numbers in Part II as positive amounts. See instructions for an example.  5	Part II	or Part III. Instead, go to line 15.				
Enter the smaller of the loss on line 1d or the loss on line 4	Part	II Special Allowance for Rental Real Estate Activities With Active I	Partici	ipation		
Enter \$150,000. If married filing separately, see instructions		Note: Enter all numbers in Part II as positive amounts. See instructions for a	an exan	mple.		
Enter \$150,000. If married filing separately, see instructions  Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  Subtract line 7 from line 6  Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions  If line 2c is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities  Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  Inter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount on line 10. If married fi	5	Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4			5	112,410,118
Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  8 Subtract line 7 from line 6	6	Enter \$150,000. If married filing separately, see instructions	6	424,064,457		
Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.  8 Subtract line 7 from line 6	7	Enter modified adjusted gross income, but not less than zero. See instructions	7	924.555.713		
line 10. Otherwise, go to line 8.  8  Subtract line 7 from line 6				, ,		
Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions  Enter the smaller of line 5 or line 9 If line 2c is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions .  12 Enter the loss from line 4						
Inter the smaller of line 5 or line 9 If line 2c is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  Inter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  Inter the loss from line 4. Inter the loss from line 4. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the small Estate Activities	8	Subtract line 7 from line 6	8	89,880,735		
Inter the smaller of line 5 or line 9 If line 2c is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  Inter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  Inter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions.  Inter the loss from line 4. Inter the loss from line 4. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the smallest of line 2c (treated as a positive amount), line 11, or line 13. Inter the small Estate Activities	9	Multiply line 8 by 50% (0.50). Do not enter more than \$25,000. If married filing sepa	rately, s	see instructions	9	27.505.025
If line 2c is a loss, go to Part III. Otherwise, go to line 15.  Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions .	10	Enter the <b>smaller</b> of line 5 or line 9			10	
Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions .		If line 2c is a loss, go to Part III. Otherwise, go to line 15.				, ,
Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.  11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions .  12 Enter the loss from line 4	Part		om Re	ental Real Es	tate A	ctivities
11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions .  12 Enter the loss from line 4						
12 Enter the loss from line 4	11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separate	ely, see	instructions .	11	*
Reduce line 12 by the amount on line 10	12		12			
Part IV Total Losses Allowed  15 Add the income, if any, on lines 1a and 3a and enter the total				17.442		
Part IV Total Losses Allowed  15 Add the income, if any, on lines 1a and 3a and enter the total					-	
Add the income, if any, on lines 1a and 3a and enter the total					-	
Total losses allowed from all passive activities for 2020. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return					15	35,661,980
to find out how to report the losses on your tax return					_	-,,
						86,652,134
	For Pa	perwork Reduction Act Notice, see instructions.	Cat. No. 6	63704F		Form <b>8582</b> (2020)

**Low-Income Housing Credit** 

OMB No. 1545-0984

(Rev. December 2016) Department of the Treasury Internal Revenue Service (99)

► Attach to your tax return. ▶ Information about Form 8586 and its instructions is at www.irs.gov/form8586. Attachment Sequence No. 36a

Identifying number Name(s) shown on return Total Forms Filed = 2,953 Part I Buildings Placed in Service Before 2008 Number of Forms 8609-A attached for buildings placed in service before Has there been a decrease in the qualified basis of any buildings accounted for on line 1 since 2 If "Yes," enter the building identification numbers (BINs) of the buildings that had a decreased basis. If you need more space, attach a schedule. (i) \_\_\_\_\_ (iii) 3 Current year credit from attached Form(s) 8609-A for buildings placed in service before 2008 Low-income housing credit for buildings placed in service before 2008 from partnerships, S 1.157 5 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 5 1,175 6 6 Amount allocated to beneficiaries of the estate or trust (see instructions) . . . . . . . . . . . . Estates and trusts, subtract line 6 from line 5. Report this amount on Form 3800, Part III, line 1d, Part II Buildings Placed in Service After 2007 Number of Forms 8609-A attached for buildings placed in service after Has there been a decrease in the qualified basis of any buildings accounted for on line 8 since 9 identification numbers (BINs) of the buildings that had a decreased basis. If you need more space, attach a schedule. 10 Current year credit from attached Form(s) 8609-A for buildings placed in service after 2007 0 10 11 Low-income housing credit for buildings placed in service after 2007 from partnerships, 772 11 Add lines 10 and 11. Estates and trusts, go to line 13. Partnerships and S corporations, stop 12 here and report this amount on Schedule K. All others, stop here and report this amount on 772 12 13 Amount allocated to beneficiaries of the estate or trust (see instructions) . . . . . . . . . . . . 13 Estates and trusts, subtract line 13 from line 12. Report this amount on Form 3800, Part III,

For Paperwork Reduction Act Notice, see General Instructions.

Form **8586** (Rev. 12-2016)

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<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

(Rev. December 2016) Department of the Treasury Internal Revenue Service (99)

### **Low-Income Housing Credit**

► Attach to your tax return.
► Information about Form 8586 and its instructions is at www.irs.gov/form8586.

OMB No. 1545-0984

Attachment Sequence No. **36a** 

Name(s) shown on return

Total Forms Filed = 2.953

Part I Buildings Placed in Service Before 2008  1 Number of Forms 8609-A attached for buildings placed in service before			
Number of Forms 8609-A attached for buildings placed in service before			
2008			
Has there been a decrease in the qualified basis of any buildings accounted for on line 1 sir the close of the preceding tax year?   Yes  No If "Yes," enter the build identification numbers (BINs) of the buildings that had a decreased basis. If you need me space, attach a schedule.	ng		
(i) (ii) (iii) (iv)			
(i) (ii) (iii) (iv)  3 Current year credit from attached Form(s) 8609-A for buildings placed in service before 20 (see instructions)	. 3	*	
4 Low-income housing credit for buildings placed in service before 2008 from partnerships corporations, estates, and trusts	. 4	5,641	
Add lines 3 and 4. Estates and trusts, go to line 6. Partnerships and S corporations, stop he and report this amount on Schedule K. All others, stop here and report this amount	on	0.045	
Form 3800, Part III, line 1d, column (c)	. 5	8,245	
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 column (c)			
Part II Buildings Placed in Service After 2007			
Number of Forms 8609-A attached for buildings placed in service after			
<ul> <li>2007</li></ul>	ice		
identification numbers (BINs) of the buildings that had a decreased basis. If you need mospace, attach a schedule.			
(i) (ii) (iii) (iv)			
10 Current year credit from attached Form(s) 8609-A for buildings placed in service after 2007 (see instructions)	. 10	0	
Low-income housing credit for buildings placed in service after 2007 from partnershi S corporations, estates, and trusts	. 11	21,756	
Add lines 10 and 11. Estates and trusts, go to line 13. Partnerships and S corporations, st here and report this amount on Schedule K. All others, stop here and report this amount Form 3800, Part III, line 4d, column (c)	on	21,756	
13 Amount allocated to beneficiaries of the estate or trust (see instructions)	. 13		
Estates and trusts, subtract line 13 from line 12. Report this amount on Form 3800, Part line 4d, column (c)	III, . 14		
For Paperwork Reduction Act Notice, see General Instructions.  Cat. No. 63987	_	Form <b>8586</b> (Rev. 12-	2016

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

Department of the Treasury Internal Revenue Service (99) Nondeductible IRAs

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

▶ For coronavirus-related distributions, see the instructions.

► Attach to 2020 Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074 Sequence No. 48

Name. If married, file a separate form for each spouse required to file 2020 Form 8606. See instructions. Your social security number Total Forms Filed = 2.807.314 Home address (number and street, or P.O. box if mail is not delivered to your home) Apt. no. Fill in Your Address City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instructions).

Only if You Are Filing This Form by **Itself and Not With Your Tax Return** 

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

#### 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 2020.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2020 and you made nondeductible contributions to a traditional IRA in 2020 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2020 Forms 8915-D, and 8915-E)), 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 2020 and you made nondeductible contributions to a traditional IBA in 2020 or an earlier year

	nondeductible contributions to a traditional IRA in 2020 or an earlier year.									
1	Enter your nondeductible contributions to traditional IRAs for 2020, including to	those	made for 2020							
	from January 1, 2021, through April 15, 2021. See instructions $\ \ . \ \ . \ \ . \ \ . \ \ .$			1	993,467					
2	Enter your total basis in traditional IRAs. See instructions			2	965,501					
3	Add lines 1 and 2			3	1,615,322					
	In 2020, did you take a distribution No Enter the amount									
	from traditional, SEP, or SIMPLE IRAs,  Do not complete t	he res	st of Part I.							
	or make a Roth IRA conversion? Yes — Go to line 4.									
4	Enter those contributions included on line 1 that were made from January 1, 2021, t	hroug	h April 15, 2021	4	25,723					
5	Subtract line 4 from line 3			5	1,608,813					
6	Enter the value of <b>all</b> your traditional, SEP, and SIMPLE IRAs as of December									
	31, 2020, plus any outstanding rollovers. Subtract any repayments of qualified	_	334,280							
	disaster distributions (see 2020 Forms 8915-C, 8915-D, and 8915-E)	6	334,200	-						
7	Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2020. <b>Do not</b>									
	include rollovers (other than repayments of qualified disaster distributions (see									
	2020 Forms 8915-C, 8915-D, and 8915-E)), qualified charitable distributions, a									
	one-time distribution to fund an HSA, conversions to a Roth IRA, certain									
	returned contributions, or recharacterizations of traditional IRA contributions (see instructions)	7	407,933							
0	Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to		- ,							
8	Roth IRAs in 2020. Also enter this amount on line 16									
9	Add lines 6, 7, and 8	8	137,530							
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3									
	places. If the result is 1.000 or more, enter "1.000"	10	400,520							
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you									
	converted to Roth IRAs. Also enter this amount on line 17	11	124,312							
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions									
	that you did not convert to a Roth IRA	12	348,146							
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions $\ \ .$			13	622,160					
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2020 $$	and e	earlier years .	14	1,402,180					
15a	Subtract line 12 from line 7			15a	386,635					
b	Enter the amount on line 15a attributable to qualified disaster distributions from									
	8915-D, and 8915-E (see instructions). Also, enter this amount on 2020 Form 8									
	Form 8915-D, line 22; <b>or</b> 2020 Form 8915-E, line 13, as applicable		15b	35,214						
С	Taxable amount. Subtract line 15b from line 15a. If more than zero, also include		4-	256 277						
	Form 1040, 1040-SR, <b>or</b> 1040-NR, line 4b			15c	356,377					
	<b>Note:</b> You may be subject to an additional 10% tax on the amount on line 15c i 59½ at the time of the distribution. See instructions.	t you	were under age							
	3972 at the time of the distribution. See instructions.									

Nondeductible IRAs

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

▶ For coronavirus-related distributions, see the instructions.

OMB No. 1545-0074

Internal Revenue Service (99) ► Attach to 2020 Form 1040, 1040-SR, or 1040-NR. Sequence No. 48 Name. If married, file a separate form for each spouse required to file 2020 Form 8606. See instructions. Your social security number Total Forms Filed = 2,807,314 Home address (number and street, or P.O. box if mail is not delivered to your home) 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 2020. • You took distributions from a traditional, SEP, or SIMPLE IRA in 2020 and you made nondeductible contributions to a traditional IRA in 2020 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2020 Forms 8915-C, 8915-D, and 8915-E)), 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 2020 and you made nondeductible contributions to a traditional IRA in 2020 or an earlier year. Enter your nondeductible contributions to traditional IRAs for 2020, including those made for 2020 6,798,361 30,360,565 2 2 37,158,926 3 Add lines 1 and 2 No → Enter the amount from line 3 on line 14. In 2020, did you take a distribution 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. 197.220 Enter those contributions included on line 1 that were made from January 1, 2021, through April 15, 2021 4 36,961,705 5 Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December 6 31, 2020, plus any outstanding rollovers. Subtract any repayments of qualified 237,789,031 disaster distributions (see 2020 Forms 8915-C, 8915-D, and 8915-E) . . . Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2020. Do not include rollovers (other than repayments of qualified disaster distributions (see 2020 Forms 8915-C, 8915-D, and 8915-E)), qualified charitable distributions, a one-time distribution to fund an HSA, conversions to a Roth IRA, certain returned contributions, or recharacterizations of traditional IRA contributions 12,701,512 8 Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2020. Also enter this amount on line 16 . . . . . . . . . . . . . . 4,643,194 9 10 Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 1,590,958 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 . . . . . . . . 1,238,190 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 4,205,932 Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2020 and earlier years . 14 14 32,952,994 12,127,042 15a b Enter the amount on line 15a attributable to qualified disaster distributions from 2020 Forms 8915-C, 8915-D, and 8915-E (see instructions). Also, enter this amount on 2020 Form 8915-C, line 23; 2020

59½ at the time of the distribution. See instructions.

Form 8915-D, line 22; or 2020 Form 8915-E, line 13, as applicable . . . . . . . . . . . . . . . . .

Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on 2020

Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age 872,832

11,254,211

15b

Form 86	606 (2020)						Page <b>2</b>		
Part			onal, SEP, or SIMPLE IRAs to Ro						
-		<u> </u>	art or all of your traditional, SEP, and S			\ in :	2020.		
16	•	completed Part I, enter the amount additional, SEP, and SIMPLE IRAs to	from line 8. Otherwise, enter the net a Roth IRAs in 2020	•		6	523,663		
17			from line 11. Otherwise, enter your ba			7	290,256		
18	Form 1	040, 1040-SR, or 1040-NR, line 4b	ne 16. If more than zero, also include			8	345,572		
<b>Part</b>	III D	istributions From Roth IRAs							
	a qı	rollover (other than a repayment of	distribution from a Roth IRA in 2020. F if a qualified disaster distribution (see ime distribution to fund an HSA, recha	2020 Forms 8	915-C, 89	15-	D, and 8915-E)),		
19			from Roth IRAs in 2020, including a						
			ed disaster distributions (see instruct				200 020		
	Forms 8915-C, 8915-D, and 8915-E					9	369,039		
20	Qualified first-time homebuyer expenses (see instructions). <b>Do not</b> enter more than \$10,000 reduced by the total of all your prior qualified first-time homebuyer distributions						15,545		
21	Subtract line 20 from line 19. If zero or less, enter -0					1	360,120		
22	Enter y	our basis in Roth IRA contributions	(see instructions). If line 21 is zero, <b>sto</b>	p here	2	2	233,017		
23			s, enter -0- and skip lines 24 and 25. I structions)			3	188,161		
24			tional, SEP, and SIMPLE IRAs and rotions			4	20,331		
25a	Subtrac	ct line 24 from line 23. If zero or less	, enter -0- and skip lines 25b and 25c		25	ā	171,866		
b	8915-D	, and 8915-E (see instructions). Als	to qualified disaster distributions from so, enter this amount on 2020 Form 8 E, line 14, as applicable	8915-C, line 24;	2020	sh	44.626		
_			ne 25a. If more than zero, also include			טע	41,626		
С						īc	131,222		
Are Fi	Here On	Under penalties of perjury, I decident is Form Not With	clare that I have examined this form, including accorplete. Declaration of preparer (other than taxpayer) is	mpanying attachment	ts, and to the ion of which p				
		Print/Type preparer's name	Preparer's signature	Date		.,	PTIN		
Paid Prep	arer	Fillio Type preparer S flame	rieparer s signature	Date	Check self-employ	"	F I IIIN		
Use		Firm's name ▶			Firm's EIN	<b></b>			
<b>J</b> 36	Cilly	Firm's address >					nno no		

Form **8606** (2020)

# 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 86	606 (2020)						Page <b>2</b>	
Part				onal, SEP, or SIMPLE IRA art or all of your traditional, S		a Roth IRA i	n 2020.	
16	•		Part I, enter the amount EP, and SIMPLE IRAs to	from line 8. Otherwise, enter Roth IRAs in 2020	the net amount you conv		19,592,477	
17				from line 11. Otherwise, enter			3,136,545	
18	Form 1	040, 1040-	SR, or 1040-NR, line 4b	ne 16. If more than zero, also			16,455,931	
Part		istributio	ns From Roth IRAs					
	a qı	rollover (o	ther than a repayment ouritable distribution, one-	distribution from a Roth IRA i of a qualified disaster distrib time distribution to fund an H	ution (see 2020 Forms 8	915-C, 891	5-D, and 8915-E)),	
19	Enter y homeb Forms	2020	3,834,060					
20	Qualified first-time homebuyer expenses (see instructions). <b>Do not</b> enter more than \$10,000 reduced by the total of all your prior qualified first-time homebuyer distributions						116,251	
21	Subtract line 20 from line 19. If zero or less, enter -0					21	3,718,013	
22				(see instructions). If line 21 is	· •		4,838,237	
23	may be	subject to	an additional tax (see in	<i>'</i>		23	1,573,726	
24	retirem	ent plans t	o a Roth IRA. See instruc	itional, SEP, and SIMPLE IR. stions		24	1,812,053	
25a				s, enter -0- and skip lines 25b			1,238,179	
b				to qualified disaster distribut				
				so, enter this amount on 202 E, line 14, as applicable			E44 224	
С				ne 25a. If more than zero, als			544,221	
							693,957	
Are Fi	lere On ling Thi elf and I	ly if You s Form Not With	Under penalties of perjury, I debelief, it is true, correct, and con	clare that I have examined this form, in plete. Declaration of preparer (other that	icluding accompanying attachment in taxpayer) is based on all informat	s, and to the b		
Your	Tax Ret	-	Your signature	15	Date			
Paid Prep	arer	Print/Type p	reparer's name	Preparer's signature	Date	Check if self-employed	PTIN	
Use (		Firm's name	<b>•</b>			Firm's EIN ▶	EIN ▶	
	,	Firm's addre	ess ▶			Phone no.	- 0000	
							Form <b>8606</b> (2020)	

Form **8615** 

Department of the Treasury Internal Revenue Service (99)

# Tax for Certain Children Who Have Unearned Income

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

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

OMB No. 1545-0074

2020
Attachment
Sequence No. 33

Child's name shown on return

Total Forms Filed =

466,224

Child's social security number

Befor	re you begin: If the child, the parent, or any of the parent's other children for whom Form 8615 must be file D Tax Worksheet or has income from farming or fishing, see Pub. 929, Tax Rules for Child averaging how to figure the children to Schodule D Tax Worksheet or Schodule I (Form	dren a	nd Dependents. It
A Par	explains how to figure the child's tax using the Schedule D Tax Worksheet or Schedule J (For rent's name (first, initial, and last). Caution: See instructions before completing.  B Parel		J). al security number
	rent's filing status (check one):  Single Married filing jointly Married filing separately Head of household  Child's Net Unearned Income	☐ Qu	alifying widow(er)
· GI			
1	Enter the child's unearned income. See Instructions	1	466,224
2	If the child <b>did not</b> itemize deductions on <b>Schedule A</b> (Form 1040 or Form 1040-NR), enter \$2,200. Otherwise, see instructions	2	466,224
3	Subtract line 2 from line 1. If zero or less, <b>stop</b> ; do not complete the rest of this form but <b>do</b> attach it to the child's return	3	466,224
4	Enter the child's <b>taxable income</b> from Form 1040 or 1040-NR, line 15. If the child files Form 2555, see the instructions	4	434,484
5	Enter the <b>smaller</b> of line 3 or line 4. If zero, <b>stop</b> ; do not complete the rest of this form but <b>do</b> attach it to the child's return.	5	434,484
Part		1 1	
6	Enter the parent's <b>taxable income</b> from Form 1040 or 1040-NR, line 15. If zero or less, enter -0 If the parent files Form 2555, see the instructions	6	361,006
7	Enter the total, if any, from Forms 8615, line 5, of <b>all other</b> children of the parent named above. <b>Do not</b> include the amount from line 5 above	7	93,420
8	Add lines 5, 6, and 7. See instructions	8	437,474
9	Enter the tax on the amount on line 8 based on the <b>parent's</b> filing status above. See instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040) is used to figure the tax, check here	9	425,900
10	Enter the parent's tax from Form 1040 or 1040-NR, line 16, minus any alternative minimum tax. <b>Do not</b> include any tax from <b>Form 4972, 8814,</b> or <b>8885</b> or any tax from recapture of an education credit. If the parent files Form 2555, see the instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040) was used to figure the tax, check here	10	355,990
11	Subtract line 10 from line 9 and enter the result. If line 7 is blank, also enter this amount on line		
12a	13 and go to <b>Part III</b>	11	412,784
b	,	12b	× .
13	Multiply line 11 by line 12b	13	417,903
Part	Child's Tax—If lines 4 and 5 above are the same, enter -0- on line 15 and go to line 16.		
14	Subtract line 5 from line 4		
15	Enter the tax on the amount on line 14 based on the <b>child's</b> filing status. See instructions. If		
-	the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or	_	077 000
16	Schedule J (Form 1040) is used to figure the tax, check here	15	277,283
16	Add lines 13 and 15	16	415,788
17	Enter the tax on the amount on line 4 based on the <b>child's</b> filing status. See instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or	17	224 507
10	Schedule J (Form 1040) is used to figure the tax, check here	17	324,507
18	child files Form 2555, see the instructions	18	420,907

18

Department of the Treasury Internal Revenue Service (99)

## Tax for Certain Children Who Have Unearned Income

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

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

OMB No. 1545-0074

2020

Attachment
Seguence No. 33

17

Cat. No. 64113U

665,933

1,153,525

Form **8615** (2020)

Sequence No. 33 Child's social security number Child's name shown on return **Total Forms Filed =** 466,224 Before you begin: If the child, the parent, or any of the parent's other children for whom Form 8615 must be filed must use the Schedule D Tax Worksheet or has income from farming or fishing, see Pub. 929, Tax Rules for Children and Dependents. It explains how to figure the child's tax using the **Schedule D Tax Worksheet** or **Schedule J** (Form 1040). A Parent's name (first, initial, and last). Caution: See instructions before completing. B Parent's social security number C Parent's filing status (check one): ☐ Married filing jointly Married filing separately ☐ Head of household Qualifying widow(er) Single **Child's Net Unearned Income** Part I 6,633,629 1 If the child did not itemize deductions on Schedule A (Form 1040 or Form 1040-NR), enter \$2,200. 1,027,747 2 3 Subtract line 2 from line 1. If zero or less, stop; do not complete the rest of this form but do 5,605,882 3 Enter the child's taxable income from Form 1040 or 1040-NR, line 15. If the child files Form 2555, 6,034,424 4 5 Enter the smaller of line 3 or line 4. If zero, stop; do not complete the rest of this form but do attach it 5,238,378 Part II **Tentative Tax Based on the Tax Rate of the Parent** Enter the parent's taxable income from Form 1040 or 1040-NR, line 15. If zero or less, enter -0-. If 461.250.735 Enter the total, if any, from Forms 8615, line 5, of all other children of the parent named above. Do 7 2.665.026 8 469.055.306 9 Enter the tax on the amount on line 8 based on the parent's filing status above. See instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J 145.914.327 Enter the parent's tax from Form 1040 or 1040-NR, line 16, minus any alternative 10 minimum tax. Do not include any tax from Form 4972, 8814, or 8885 or any tax from recapture of an education credit. If the parent files Form 2555, see the instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040) was used to 144,170,039 Subtract line 10 from line 9 and enter the result. If line 7 is blank, also enter this amount on line 11 11 1.744.288 12a Divide line 5 by line 12a. Enter the result as a decimal (rounded to at least three places) . 12b 13 1,080,598 Part III Child's Tax-If lines 4 and 5 above are the same, enter -0- on line 15 and go to line 16. 14 Subtract line 5 from line 4 . . . . . . . . . . . . . . . . 796.046 Enter the tax on the amount on line 14 based on the child's filing status. See instructions. If 15 the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040) is used to figure the tax, check here . . . . . . . . . . . . . . . . ▶ □ 15 61,715 16 16 1,123,949 Enter the tax on the amount on line 4 based on the child's filing status. See instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or

Enter the larger of line 16 or line 17 here and on the child's Form 1040 or 1040-NR, line 16. If the

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

Form **8801** 

Department of the Treasury Internal Revenue Service (99)

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

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

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

OMB No. 1545-1073

2020
Attachment Sequence No. 801

Name(s) shown on return Identifying number Total Forms Filed = 292,846 **Net Minimum Tax on Exclusion Items** Part I Combine lines 1 and 2e of your 2019 Form 6251. Estates and trusts, see instructions . . . . . . . 245,263 1 1 2 Enter adjustments and preferences treated as exclusion items (see instructions) . . . . . . 2 241,844 3 3 9,335 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 \$733,700 and you were married filing separately for 2019, see instructions . . . . . . . . . . . . . 219,269 5 Enter: \$111,700 if married filing jointly or qualifying widow(er) for 2019; \$71,700 if single or head of household for 2019; or \$55,850 if married filing separately for 2019. Estates and trusts, enter \$25,000 5 292,846 6 Enter: \$1,020,600 if married filing jointly or qualifying widow(er) for 2019; \$510,300 if single, head of household, or married filing separately for 2019. Estates and trusts, enter \$83,500 . . . . . 6 292,846 7 Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9. . . . 7 39,541 8 Multiply line 7 by 25% (0.25). . . . . . . 8 39,541 9 Subtract line 8 from line 5. If zero or less, enter -0-. 9 267,968 10 Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15 and go to Part II. Form 10 1040-NR filers, see instructions. . . . . . . . . . . . . . . 162,972 • If for 2019 you filed Form 2555, see instructions for the amount to enter. 11 • If for 2019 you reported capital gain distributions directly on Form 1040 or 1040-SR, line 6; you reported qualified dividends on Form 1040 or 1040-SR, line 3a (Form 1041, line 2b(2)); or you had a gain on both lines 15 and 16 of Schedule D (Form 1040 or 1040-SR) (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. Form 1040-NR filers, see instructions. 11 158.958 • All others: If line 10 is \$194,800 or less (\$97,400 or less if married filing separately for 2019), multiply line 10 by 26% (0.26). Otherwise, multiply line 10 by 28% (0.28) and subtract \$3,896 (\$1,948 if married filing separately for 2019) from the result. Form 1040-NR filers, see instructions. 12 Minimum tax foreign tax credit on exclusion items (see instructions) 12 64,126 13 Tentative minimum tax on exclusion items. Subtract line 12 from line 11 13 157,378 14 Enter the amount from your 2019 Form 6251, line 10, or 2019 Form 1041, Schedule I, line 53 . . . . 162,789

Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0- . . .

15

39,611 Form 8801 (2020)

Department of the Treasury Internal Revenue Service (99)

### **Credit for Prior Year Minimum Tax—** Individuals, Estates, and Trusts ► Go to www.irs.gov/Form8801 for instructions and the latest information.

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

OMB No. 1545-1073

Name(s) shown on return

Total Forms Filed = 292,846

Attachment Sequence No. **801** Identifying number

Dow	Not Minimum Toy on Evaluaian Itama		
Par	Net Minimum Tax on Exclusion Items	<del></del>	<u> </u>
1	Combine lines 1 and 2e of your 2019 Form 6251. Estates and trusts, see instructions	1	167,610,804
2	Enter adjustments and preferences treated as exclusion items (see instructions)	2	4,983,505
3	Minimum tax credit net operating loss deduction (see instructions)	3	( 2,397,867 )
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 \$733,700 and you were married filing separately for 2019, see instructions	4	178,360,046
5	Enter: \$111,700 if married filing jointly or qualifying widow(er) for 2019; \$71,700 if single or head of household for 2019; or \$55,850 if married filing separately for 2019. Estates and trusts, enter \$25,000	5	28,788,071
6	Enter: \$1,020,600 if married filing jointly or qualifying widow(er) for 2019; \$510,300 if single, head of household, or married filing separately for 2019. Estates and trusts, enter \$83,500	6	248,851,401
7	Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9	7	104,097,487
8	Multiply line 7 by 25% (0.25)	8	26,024,377
9	Subtract line 8 from line 5. If zero or less, enter -0	9	25,742,928
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	162,285,630
11	<ul> <li>If for 2019 you filed Form 2555, see instructions for the amount to enter.</li> <li>If for 2019 you reported capital gain distributions directly on Form 1040 or 1040-SR, line 6; you reported qualified dividends on Form 1040 or 1040-SR, line 3a (Form 1041, line 2b(2)); or you had a gain on both lines 15 and 16 of Schedule D (Form 1040 or 1040-SR) (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. Form 1040-NR filers, see instructions.</li> <li>All others: If line 10 is \$194,800 or less (\$97,400 or less if married filing separately for 2019), multiply line 10 by 26% (0.26). Otherwise, multiply line 10 by 28% (0.28) and subtract \$3,896 (\$1,948 if married filing separately for 2019) from the result. Form 1040-NR filers, see instructions.</li> </ul>	11	35,114,009
12	Minimum tax foreign tax credit on exclusion items (see instructions)	12	1,463,592
13	Tentative minimum tax on exclusion items. Subtract line 12 from line 11	13	33,676,232
14	Enter the amount from your 2019 Form 6251, line 10, or 2019 Form 1041, Schedule I, line 53	14	34,745,936
15 For Pr	Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0	15	908,499 Form <b>8801</b> (2020)
FUI P	aperwork Reduction Act Notice, see instructions. Cat. No. 10002S		. 01111 000 1 (2020)

Form 8801 (2020) Page **2** 

Par	Minimum Tax Credit and Carryforward to 2021		
16	Enter the amount from your 2019 Form 6251, line 11, or 2019 Form 1041, Schedule I, line 54	16	74,069
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	72,252
19	2019 credit carryforward. Enter the amount from your 2019 Form 8801, line 26	19	203,052
20	Enter your 2019 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	247,910
22	Enter your 2020 regular income tax liability minus allowable credits (see instructions)	22	186,337
23	Enter the amount from your 2020 Form 6251, line 9, or 2020 Form 1041, Schedule I, line 52	23	161,590
24	Subtract line 23 from line 22. If zero or less, enter -0	24	148,065
25	Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2020 Schedule 3 (Form 1040), line 6 (check box b); or Form 1041, Schedule G, line 2c	25	148,065
26	Credit carryforward to 2021. Subtract line 25 from line 21. Keep a record of this amount because you may use it in future years	26	175,304

Form **8801** (2020)

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

## 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8801 (2020) Page 2 Part II Minimum Tax Credit and Carryforward to 2021 16 Enter the amount from your 2019 Form 6251, line 11, or 2019 Form 1041, Schedule I, line 54 . . . 16 1,855,139 17 17 946,640 18 Subtract line 17 from line 16. If less than zero, enter as a negative amount . . . . . 18 19 2019 credit carryforward. Enter the amount from your 2019 Form 8801, line 26 . . . 19 6,783,261 20 Enter your 2019 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 7,999,169 22 Enter your 2020 regular income tax liability minus allowable credits (see instructions) . . . . . . 22 34,608,794 23 Enter the amount from your 2020 Form 6251, line 9, or 2020 Form 1041, Schedule I, line 52. . . . 23 32,905,656 Subtract line 23 from line 22. If zero or less, enter -0-24 2,852,556 24 25 Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2020 Schedule 3 (Form 1040), line 6 (check box b); or Form 1041, Schedule G, line 2c . . . . . . . . 25 1,356,119 Credit carryforward to 2021. Subtract line 25 from line 21. Keep a record of this amount because 26 6,642,995 26

Form **8801** (2020)

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

Form 8	801 (2020)		Page <b>3</b>
Part	Tax Computation Using Maximum Capital Gains Rates		
	Complete Part III only if you are required to do so by line 11 or by the Foreign Earned Income Tax Work	sheet	in the instructions.
	<b>Caution:</b> If you didn't complete the 2019 Qualified Dividends and Capital Gain Tax Worksheet, the 2019 Schedule D Tax Worksheet, or Part V of the 2019 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 2019, enter the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions	27	
	Caution: If for 2019 you filed Form 1040-NR, 1041, or 2555, see the instructions before completing lines 28, 29, and 30.		
28	Enter the amount from line 6 of your 2019 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2019 Schedule D Tax Worksheet, or the amount from line 26 of the 2019 Schedule D (Form 1041), whichever applies (as refigured for the AMT, if necessary)*	28	
	If you figured your 2019 tax using the 2019 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 2019 Schedule D (Form 1040 or 1040-SR), or line 18b, column (2), of the 2019 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 2019		
	Schedule D Tax Worksheet	30	
31	Enter the <b>smaller</b> of line 27 or line 30	31	
32	Subtract line 31 from line 27	32	
33	If line 32 is \$194,800 or less (\$97,400 or less if married filing separately for 2019), multiply line 32 by 26% (0.26). Otherwise, multiply line 32 by 28% (0.28) and subtract \$3,896 (\$1,948 if married filing	20	
	separately for 2019) from the result. Form 1040-NR filers, see instructions	33	
34	<ul> <li>\$78,750 if married filing jointly or qualifying widow(er) for 2019,</li> <li>\$39,375 if single or married filing separately for 2019,</li> </ul>	24	
	<ul> <li>\$52,750 if head of household for 2019, or</li> <li>\$2,650 for an estate or trust.</li> <li>Form 1040-NR filers, see instructions.</li> </ul>	34	
35	Enter the amount from line 7 of your 2019 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2019 Schedule D Tax Worksheet, or the amount from line 27 of the 2019 Schedule D (Form 1041), whichever applies. If you didn't complete either worksheet or Part V of the 2019 Schedule D (Form 1041), enter the amount from your 2019 Form 1040 or 1040-SR, line 11b, or 2019 Form	0.5	
00	1041, line 23, whichever applies; if zero or less, enter -0 Form 1040-NR filers, see instructions	35	
36 37	Subtract line 35 from line 34. If zero or less, enter -0	36 37	
38	Enter the <b>smaller</b> of line 36 or line 37	38	
39	Subtract line 38 from line 37	39	
40	Enter:		
40	\$434,550 if single for 2019,     \$244,425 if married filing separately for 2019,		
	• \$488,850 if married filing jointly or qualifying widow(er) for 2019,	40	
	• \$461,700 if head of household for 2019, or		
	• \$12,950 for an estate or trust. Form 1040-NR filers, see instructions.		
41	Enter the amount from line 36	41	
42	Form 1040 or 1040-SR filers, enter the amount from line 7 of your 2019 Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of your 2019 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 2019 Schedule D (Form 1041) or line 18 of your 2019 Schedule D Tax Worksheet, whichever applies. If you didn't complete either the worksheet or Part V of the 2019		

Schedule D (Form 1041), enter the amount from your 2019 Form 1041, line 23; if zero or less, enter

42

<sup>\*</sup> The 2019 Qualified Dividends and Capital Gain Tax Worksheet is in the 2019 Instructions for Forms 1040 and 1040-SR. The 2019 Schedule D Tax Worksheet is in the 2019 Instructions for Schedule D (Form 1040 or 1040-SR) (or the 2019 Instructions for Schedule D (Form 1041)).

Form 8801 (2020) Page **3** 

Part	Tax Computation Using Maximum Capital Gains Rates  Complete Part III only if you are required to do so by line 11 or by the Foreign Earned Income Tax Work	sheet	in the instructions.
	<b>Caution:</b> If you didn't complete the 2019 Qualified Dividends and Capital Gain Tax Worksheet, the 2019 Schedule D Tax Worksheet, or Part V of the 2019 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 2019, enter the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions	27	
	<b>Caution:</b> If <b>for 2019</b> you filed Form 1040-NR, 1041, or 2555, see the instructions before completing lines 28, 29, and 30.		
28	Enter the amount from line 6 of your 2019 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2019 Schedule D Tax Worksheet, or the amount from line 26 of the 2019 Schedule D (Form 1041), whichever applies (as refigured for the AMT, if necessary)*	28	
	If you figured your 2019 tax using the 2019 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 2019 Schedule D (Form 1040 or 1040-SR), or line 18b, column (2), of the 2019 Schedule D (Form 1041)	29	
30	Add lines 28 and 29, and enter the <b>smaller</b> of that result or the amount from line 10 of your 2019 Schedule D Tax Worksheet	30	
31	Enter the <b>smaller</b> of line 27 or line 30	31	
32	Subtract line 31 from line 27	32	
33	If line 32 is \$194,800 or less (\$97,400 or less if married filing separately for 2019), multiply line 32 by 26% (0.26). Otherwise, multiply line 32 by 28% (0.28) and subtract \$3,896 (\$1,948 if married filing separately for 2019) from the result. Form 1040-NR filers, see instructions	33	
34	Enter:		
04	<ul> <li>\$78,750 if married filing jointly or qualifying widow(er) for 2019,</li> <li>\$39,375 if single or married filing separately for 2019,</li> <li>\$52,750 if head of household for 2019, or</li> <li>\$2,650 for an estate or trust.</li> <li>Form 1040-NR filers, see instructions.</li> </ul>	34	
35	Enter the amount from line 7 of your 2019 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2019 Schedule D Tax Worksheet, or the amount from line 27 of the 2019 Schedule D (Form 1041), whichever applies. If you didn't complete either worksheet or Part V of the 2019 Schedule D (Form 1041), enter the amount from your 2019 Form 1040 or 1040-SR, line 11b, or 2019 Form 1041, line 23, whichever applies; if zero or less, enter -0 Form 1040-NR filers, see instructions	35	
36	Subtract line 35 from line 34. If zero or less, enter -0	36	
37	Enter the <b>smaller</b> of line 27 or line 28	37	
38	Enter the <b>smaller</b> of line 36 or line 37	38	
39	Subtract line 38 from line 37	39	
40	<ul> <li>\$434,550 if single for 2019,</li> <li>\$244,425 if married filing separately for 2019,</li> </ul>		
	<ul> <li>\$488,850 if married filing jointly or qualifying widow(er) for 2019,</li> <li>\$461,700 if head of household for 2019, or</li> </ul>	40	
	• \$12,950 for an estate or trust. Form 1040-NR filers, see instructions.		
41	Enter the amount from line 36	41	
42	Form 1040 or 1040-SR filers, enter the amount from line 7 of your 2019 Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of your 2019 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 2019 Schedule D (Form 1041) or line 18 of your 2019 Schedule D Tax Worksheet, whichever applies. If you didn't complete either the worksheet or Part V of the 2019 Schedule D (Form 1041), enter the amount from your 2019 Form 1041, line 23; if zero or less, enter	40	
	-0 Form 1040-NR filers, see instructions	42	İ.

<sup>\*</sup> The 2019 Qualified Dividends and Capital Gain Tax Worksheet is in the 2019 Instructions for Forms 1040 and 1040-SR. The 2019 Schedule D Tax Worksheet is in the 2019 Instructions for Schedule D (Form 1040).

Form 8801 (2020) Page **4** 

Part	Tax Computation Using Maximum Capital Gains Rates (continued)		- age •
	. ,		
43	Add lines 41 and 42	43	
44	Subtract line 43 from line 40. If zero or less, enter -0	44	
45	Enter the <b>smaller</b> 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 \$194,800 or less (\$97,400 or less if married filing separately for 2019), multiply line 27 by 26% (0.26). Otherwise, multiply line 27 by 28% (0.28) and subtract \$3,896 (\$1,948 if married filing		
	separately for 2019) from the result. Form 1040-NR filers, see instructions	54	
55	Enter the <b>smaller</b> of line 53 or line 54 here and on line 11. If you filed Form 2555 for 2019, 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** (2020)

# 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8	801 (2020)		Page <b>4</b>
Part	Tax Computation Using Maximum Capital Gains Rates (continued)		
			_
43	Add lines 41 and 42	43	
44	Subtract line 43 from line 40. If zero or less, enter -0	44	
45	Enter the <b>smaller</b> 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 \$194,800 or less (\$97,400 or less if married filing separately for 2019), multiply line 27 by 26% (0.26). Otherwise, multiply line 27 by 28% (0.28) and subtract \$3,896 (\$1,948 if married filing		
	separately for 2019) from the result. Form 1040-NR filers, see instructions	54	
55	Enter the <b>smaller</b> of line 53 or line 54 here and on line 11. If you filed Form 2555 for 2019, 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 <b>8801</b> (2020)

Form **8814** 

Department of the Treasury Internal Revenue Service (99)

# Parents' Election To Report Child's Interest and Dividends

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

OMB No. 1545-0074

2020
Attachment
Sequence No. 40

Name(s) shown on your return

Total Forms Filed = 49,176

Your social security number

	ion: The federal income tax on your child's income, including qualified dividends a separate tax return for the child instead of making this election. This is because				
	could take on his or her own return. For details, see Tax benefits you cannot take in	n the ins			
Α (	Child's name (first, initial, and last)		B Chil	d's socia	al security number
С	If more than one Form 8814 is attached, check here				•
Par	t I Child's Interest and Dividends To Report on Your Return				
1a	Enter your child's <b>taxable</b> interest. If this amount is different from the amounts Forms 1099-INT and 1099-OID, see the instructions			1a	10,802
b	Enter your child's <b>tax-exempt</b> interest. <b>Do not</b> include this amount on line 1a	1b	383		
2a	Enter your child's ordinary dividends, including any Alaska Permanent Fund di received any ordinary dividends as a nominee, see the instructions Enter your child's qualified dividends included on line 2a. See the instructions	videnas    <b>2b</b>	. If your child 	2a	26,968
ь 3	Enter your child's capital gain distributions. If your child received any capital gnominee, see the instructions	ain dist	·	3	19,189
4	Add lines 1a, 2a, and 3. If the total is \$2,200 or less, skip lines 5 through 12 and total is \$11,000 or more, <b>do not</b> file this form. Your child <b>must</b> file his or her ow income	n return	to report the	4	31,850
5	Base amount. Enter 2,200			5	
6	Subtract line 5 from line 4			6	15,062
	If both lines 2b and 3 are zero or blank, skip lines 7 through 10, enter -0- or line 10. Otherwise, as to line 7	on line 1	1, and go to		
7	line 12. Otherwise, go to line 7.  Divide line 2b by line 4. Enter the result as a decimal (rounded to at least three	1 1			
'	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	13,195		
10	Multiply line 6 by line 8. Enter the result here. See the instructions for where to report this amount on your return	10	10,401		
11	Add lines 9 and 10			11	13,656
12	Subtract line 11 from line 6. Include this amount in the total on Schedule 1 (For space next to that line, enter "Form 8814" and show the amount. If you check above, see the instructions. Go to line 13 below	ked the l	box on line C	12	11,913
Par					
				10	
13 14	Amount not taxed. Enter 1,100			13	31,623
15	Tax. Is the amount on line 14 less than \$1,100?  No. Enter \$110 here and see the <b>Note</b> below.	)		15	31,623
	Yes. Multiply line 14 by 10% (0.10). Enter the result here and see the <b>Note</b> be	elow.			<u> </u>
	: 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-SF	he amo		5 in the	tax you enter on

Department of the Treasury Internal Revenue Service (99)

# Parents' Election To Report Child's Interest and Dividends

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

OMB No. 1545-0074

2020
Attachment
Sequence No. 40

Name(s) shown on your return

Total Forms Filed = 49,176

Your social security number

Cauti	n: The federal income tax on your child's income, including qualified dividends and capital gain d	 listributi	ons, n	nay be less if you
	separate tax return for the child instead of making this election. This is because you cannot take could take on his or her own return. For details, see <i>Tax benefits you cannot take</i> in the instructions		tax b	penefits that your
			s socia	al security number
C	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 <b>taxable</b> interest. If this amount is different from the amounts shown on the composition of the forms 1099-INT and 1099-OID, see the instructions	[	1a	12,733
b	Enter your child's <b>tax-exempt</b> interest. <b>Do not</b> include this amount on line 1a 185			
2a	Enter your child's ordinary dividends, including any Alaska Permanent Fund dividends. If your received any ordinary dividends as a nominee, see the instructions		2a	63,986
b	Enter your child's qualified dividends included on line 2a. See the instructions 2b 46,30°	1		
3	Enter your child's capital gain distributions. If your child received any capital gain distributions nominee, see the instructions	as a	3	67,024
4	Add lines 1a, 2a, and 3. If the total is \$2,200 or less, skip lines 5 through 12 and go to line 13. total is \$11,000 or more, <b>do not</b> file this form. Your child <b>must</b> file his or her own return to repoincome		4	143,743
5	Base amount. Enter 2,200	[	5	
6	Subtract line 5 from line 4	[	6	49,802
	If both lines 2b and 3 are zero or blank, skip lines 7 through 10, enter -0- on line 11, and line 12. Otherwise, go to line 7.	go to		
7	Divide line 2b by line 4. Enter the result as a decimal (rounded to at least three places)	_		
8	Divide line 3 by line 4. Enter the result as a decimal (rounded to at least three places)			
9	Multiply line 6 by line 7. Enter the result here. See the instructions for where to report this amount on your return	31		
10	Multiply line 6 by line 8. Enter the result here. See the instructions for where to report this amount on your return	38		
11	Add lines 9 and 10		11	42,549
12	Subtract line 11 from line 6. Include this amount in the total on Schedule 1 (Form 1040), line 8. space next to that line, enter "Form 8814" and show the amount. If you checked the box on I	line C		
	above, see the instructions. Go to line 13 below		12	7,260
Part	II Tax on the First \$2,200 of Child's Interest and Dividends			
13	Amount not taxed. Enter 1,100		13	
14	Subtract line 13 from line 4. If the result is zero or less, enter -0	[	14	40,306
15	Tax. Is the amount on line 14 less than \$1,100?☐ No. Enter \$110 here and see the Note below.		15	4,032
	Yes. Multiply line 14 by 10% (0.10). Enter the result here and see the <b>Note</b> below.			
	If you checked the box on line C above, see the instructions. Otherwise, include the amount from 1040,1040-SR, or 1040-NR, line 16. Be sure to check box 1 on Form 1040, 1040-SR, or 1040-NR, line 16.		in the	tax you enter on
For Pa	perwork Reduction Act Notice, see your tax return instructions. Cat. No. 10750J			Form <b>8814</b> (2020)

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

2020
Attachment Sequence No. 109

Name(s) shown on tax return

Total Forms Filed = 53,238

Information on the Like-Kind Exchange

Identifying number

orior t eal pr arty	constrainty, only real property should be described on lines 1 and 2. However, you may describe person January 1, 2018, as part of an exchange subject to the like-kind exchange transition rule described in roperty on lines 1 and 2, if you are filing this form to report the disposition of property exchanged in a pre like-kind exchange. If the property described on line 1 or line 2 is real or personal property located out te the country.	the ir	nstruction ly reporte	ns, and/or ed related
1	Description of like-kind property given up:			
2	Description of like-kind property received:			
3	Date like-kind property given up was originally acquired (month, day, year)	3	MM/DI	D/YYYY
4	Date you actually transferred your property to the other party (month, day, year)	4	MM/DI	D/YYYY
5	Date like-kind property you received was identified by written notice to another party (month, day, year). See instructions for 45-day written identification requirement	5	MM/DI	D/YYYY
6	Date you actually received the like-kind property from other party (month, day, year). See instructions	6	MM/DI	D/YYYY
7	Was the exchange of the property given up or received made with a related party, either directly or indire (such as through an intermediary)? See instructions. If "Yes," complete Part II. If "No," go to Part III.		□Yes	□ No
		mplet		
	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 the exchange), did the related party sell or dispose of any part of the like-kind property received from (or an intermediary) in the exchange?	you	☐ Yes	□ No
10	During this tax year (and before the date that is 2 years after the last transfer of property that was part the exchange), did you sell or dispose of any part of the like-kind property you received?		☐ Yes	□ No
	If both lines 9 and 10 are "No" and this is the year of the exchange, go to Part III. If both lines 9 and 10 the year of the exchange, stop here. If either line 9 or line 10 is "Yes," complete Part III and report on t deferred gain or (loss) from line 24 <b>unless</b> one of the exceptions on line 11 applies.			
11	If one of the exceptions below applies to the disposition, check the applicable box.			
а	☐ The disposition was after the death of either of the related parties.			
b	☐ The disposition was an involuntary conversion, and the threat of conversion occurred after the exchange	ange.		
С	You can establish to the satisfaction of the IRS that neither the exchange nor the disposition had to its principal purposes. If this box is checked, attach an explanation. See instructions	ax av	oidance	as one of

OMB No. 1545-1190

2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form **8824** 

**Like-Kind Exchanges** 

(and section 1043 conflict-of-interest sales)

► Attach to your tax return. Attachment Sequence No. 109 ▶ Go to www.irs.gov/Form8824 for instructions and the latest information.

Internal Revenue Service Name(s) shown on tax return

Department of the Treasury

Total Forms Filed = 53,238 Identifying number

Part	Information on the Like-Kind Exchange			
orior t eal po carty	Generally, only real property should be described on lines 1 and 2. However, you may describe person to January 1, 2018, as part of an exchange subject to the like-kind exchange transition rule described in roperty on lines 1 and 2, if you are filing this form to report the disposition of property exchanged in a previike-kind exchange. If the property described on line 1 or line 2 is real or personal property located out te the country.	the ir vious	nstructions ly reported	s, and/or d related
1	Description of like-kind property given up:			
2	Description of like-kind property received:			
3	Date like-kind property given up was originally acquired (month, day, year)	3	MM/DD	/YYYY
4	Date you actually transferred your property to the other party (month, day, year)	4	MM/DD	/YYYY
5	Date like-kind property you received was identified by written notice to another party (month, day, year). See instructions for 45-day written identification requirement	5	MM/DD	/YYYY
6	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 indire (such as through an intermediary)? See instructions. If "Yes," complete Part II. If "No," go to Part III		☐ Yes	□ No
orope	Do not file this form if a related party sold property into the exchange, directly or indirectly (such as through the became your replacement property; and none of the exceptions in line 11 applies to the exchange. Instead property as if the exchange had been a sale. If one of the exceptions on line 11 applies to the exchange, correctly as if the exchange had been a sale. If one of the exceptions on line 11 applies to the exchange, correctly as if the exchange information.	d, rep	ort the dis	
8		party's	s identifying i	number
	Address (no., street, and apt., room, or suite no.; city or town; state; and ZIP code)			
9	During this tax year (and before the date that is 2 years after the last transfer of property that was par the exchange), did the related party sell or dispose of any part of the like-kind property received from (or an intermediary) in the exchange?	you	☐ Yes	□ No
10	During this tax year (and before the date that is 2 years after the last transfer of property that was part the exchange), did you sell or dispose of any part of the like-kind property you received?		☐ Yes	☐ No
	If both lines 9 and 10 are "No" and this is the year of the exchange, go to Part III. If both lines 9 and 10 at the year of the exchange, stop here. If either line 9 or line 10 is "Yes," complete Part III and report on the deferred gain or (loss) from line 24 <b>unless</b> one of the exceptions on line 11 applies.			
11	If one of the exceptions below applies to the disposition, check the applicable box.			
а	☐ The disposition was after the death of either of the related parties.			
b	☐ The disposition was an involuntary conversion, and the threat of conversion occurred after the excha	nge.		
С	You can establish to the satisfaction of the IRS that neither the exchange nor the disposition had to	ax av	oidance a	s one of

38

#### 2020 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Form 8824 (2020) 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 . . . . . . . . . . . . . . . 1.792 13 13 411 14 Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain or 1,766 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 12.668 (but not below zero) by any exchange expenses you incurred. See instructions . . . . . . . . . . . 15 51,537 16 16 52,210 17 17 Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange 18 18 52,423 19 19 51,700 Enter the smaller of line 15 or line 19, but not less than zero . . . . . . . . . . . . . . . . 20 20 12.046 21 Ordinary income under recapture rules. Enter here and on Form 4797, line 16. See instructions 21 1,143 22 Subtract line 21 from line 20. If zero or less, enter -0-. If more than zero, enter here and on Schedule D 12,021 22 23 12,612 23 Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions . . . 24 24 51,376 Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23 . . . . . 25 25 52,357 **Deferral of Gain From Section 1043 Conflict-of-Interest Sales** Note: This part is to be used only by officers or employees of the executive branch of the federal government or judicial officers of the federal government (including certain spouses, minor or dependent children, and trustees as described in section 1043) for reporting nonrecognition of gain under section 1043 on the sale of property to comply with the conflict-of-interest requirements. This part can be used **only** if the cost of the replacement property is more than the basis of the divested property. Enter the number from the upper right corner of your certificate of divestiture. (Do not attach a copy of your certificate. Keep the certificate with your records.) . . . . . . . . . . . . . . . . Description of divested property ► 27 28 Description of replacement property ► \_\_\_\_\_\_ 29 29 Date divested property was sold (month, day, year) . . . 30 Sales price of divested property. See instructions . . . . 30 Basis of divested property . . . . . . . . . . . . . . . . 31 Realized gain. Subtract line 31 from line 30 . . . . . . . 32 32 33 Cost of replacement property purchased within 60 days after date of sale 33 34 34 35 Ordinary income under recapture rules. Enter here and on Form 4797, line 10. See instructions . . . 35 36 Subtract line 35 from line 34. If zero or less, enter -0-. If more than zero, enter here and on Schedule D 36 37 **Deferred gain.** Subtract the sum of lines 35 and 36 from line 32 . . . . . . . . . . . 37

Basis of replacement property. Subtract line 37 from line 33 . . . . . . . . .

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# 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 88	324 (2020)		Page <b>2</b>
Name(s	shown on tax return. Do not enter name and social security number if shown on other side.	Your soci	al security number
Part	Realized Gain or (Loss), Recognized Gain, and Basis of Like-Kind Property Receiv	/ed	
	on: If you transferred and received (a) more than one group of like-kind properties or (b) cash or other eporting of multi-asset exchanges in the instructions.	er (not l	ke-kind) property,
Note:	Complete lines 12 through 14 only if you gave up property that was not like-kind. Otherwise, go to line	15.	
12	Fair market value (FMV) of other property given up		
13	Adjusted basis of other property given up		
14	Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain o (loss) in the same manner as if the exchange had been a sale		642.755
	Caution: If the property given up was used previously or partly as a home, see <i>Property used as home</i> in the instructions.		0.12,7.00
15	Cash received, FMV of other property received, plus net liabilities assumed by other party, reduced (but not below zero) by any exchange expenses you incurred. See instructions		3.079.651
16	FMV of like-kind property you received	16	44,669,436
17	Add lines 15 and 16	17	47.749.087
18	Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange expenses <b>not</b> used on line 15. See instructions		25,647,394
19	Realized gain or (loss). Subtract line 18 from line 17		22,101,693
20	Enter the smaller of line 15 or line 19, but not less than zero		2,338,981
21	Ordinary income under recapture rules. Enter here and on Form 4797, line 16. See instructions		111,506
22	Subtract line 21 from line 20. If zero or less, enter -0 If more than zero, enter here and on Schedule I		
	or Form 4797, unless the installment method applies. See instructions		2.247.568
23	Recognized gain. Add lines 21 and 22		2.359.074
24	Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions		19,742,619
25 Part	Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23	25	24.926.817
26 27	Enter the number from the upper right corner of your certificate of divestiture. ( <b>Do not</b> attach a copy of your certificate. Keep the certificate with your records.)		
28	Description of replacement property ►		
29	Date divested property was sold (month, day, year)	29	MM/DD/YYYY
30	Sales price of divested property. See instructions	4	
31 32	Basis of divested property	32	
33 34	Cost of replacement property purchased within 60 days after date of sale . Subtract line 33 from line 30. If zero or less, enter -0	34	
35	Ordinary income under recapture rules. Enter here and on Form 4797, line 10. See instructions	35	
36	Subtract line 35 from line 34. If zero or less, enter -0 If more than zero, enter here and on Schedule I or Form 4797. See instructions	36	
37	<b>Deferred gain.</b> Subtract the sum of lines 35 and 36 from line 32	37	
38	Basis of replacement property. Subtract line 37 from line 33	38	
	· · · ·		Form <b>8824</b> (2020)

Form **8829** 

Department of the Treasury Internal Revenue Service (99)

### **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

2020
Attachment
Sequence No. 176

Name(s) of proprietor(s) Your social security number Total Forms Filed = 3.178.402 Part of Your Home Used for Business Part I Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory or product samples (see instructions) 1 2,952,822 2 2 2,954,927 3 3 % 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 . . . hr. If you started or stopped using your home for daycare during the year, 5 5 hr. Divide line 4 by line 5. Enter the result as a decimal amount . . . . 6 6 Business percentage. For daycare facilities not used exclusively for business, multiply line 6 by 7 line 3 (enter the result as a percentage). All others, enter the amount from line 3 7 % **Figure Your Allowable Deduction** Part II Enter the amount from Schedule C, line 29, plus any gain derived from the business use of your home, 8 3,013,765 minus any loss from the trade or business not derived from the business use of your home. See instructions. See instructions for columns (a) and (b) before completing lines 9-22. (a) Direct expenses (b) Indirect expenses Casualty losses (see instructions) . . . . . . 9 2.688 8,900 10 Deductible mortgage interest (see instructions) . 10 985,855 50,577 11 Real estate taxes (see instructions) . . . . . 11 56,097 248,044 12 Add lines 9, 10, and 11 . . . . . . . . . . 92,974 1,012,571 13 Multiply line 12, column (b), by line 7 . . . . . 1,007,479 14 Add line 12, column (a), and line 13 . . . . 14 1,051,560 15 Subtract line 14 from line 8. If zero or less, enter -0-15 2,103,707 16 Excess mortgage interest (see instructions) 16 17,887 565,529 Excess real estate taxes (see instructions) . . . 17 17 138,334 937.645 18 18 76,881 1,827,132 Rent . . . . . . . . . . . 19 19 57,973 649,004 20 Repairs and maintenance . . . . . 20 142,222 915,175 21 21 186.401 2,291,151 22 Other expenses (see instructions) . . . . . . 22 82,642 748,422 Add lines 16 through 22 . . . . . . . . . . . . . . . . 23 23 454,242 2,540,801 24 Multiply line 23, column (b), by line 7 . . . . . . . . . . . . . . . 24 2,530,055 25 Carryover of prior year operating expenses (see instructions) . . . . 646.657 26 Add line 23, column (a), line 24, and line 25 . . . . . . . . . . . . 26 2,781,213 27 Allowable operating expenses. Enter the **smaller** of line 15 or line 26 . 27 1,957,609 Limit on excess casualty losses and depreciation. Subtract line 27 from line 15. 1,914,176 28 28 29 3,089 30 Depreciation of your home from line 42 below . . . . . . . . . . . . 1,146,865 31 Carryover of prior year excess casualty losses and depreciation (see instructions) 31 357.775 32 32 1,178,457 33 Allowable excess casualty losses and depreciation. Enter the **smaller** of line 28 or line 32 . . . 33 724,906 34 34 2,370,905 35 Casualty loss portion, if any, from lines 14 and 33. Carry amount to Form 4684. See instructions . 35 11,667 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 2,367,273 Part III **Depreciation of Your Home** 37 Enter the smaller of your home's adjusted basis or its fair market value. See instructions 37 1.112.039 38 38 627,230 39 39 Basis of building. Subtract line 38 from line 37 . . . . . . . . . . . . . . . . 1,102,739 40 40 1,097,718 41 41 % 42 Depreciation allowable (see instructions). Multiply line 40 by line 41. Enter here and on line 30 above 42 1,146,865 Part IV Carryover of Unallowed Expenses to 2021 Operating expenses. Subtract line 27 from line 26. If less than zero, enter -0-43 43 1,043,474 Excess casualty losses and depreciation. Subtract line 33 from line 32. If less than zero, enter -0-500.224

Department of the Treasury Internal Revenue Service (99)

### **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 Attachment Sequence No. 176

Name(s) of proprietor(s) Your social security number Total Forms Filed = 3,178,402 Part I Part of Your Home Used for Business Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory 1 1,063,459 2 2 6,339,175 3 3 % For daycare facilities not used exclusively for business, go to line 4. All others, go to line 7. Multiply days used for daycare during year by hours used per day . . . 4 5 If you started or stopped using your home for daycare during the year, see instructions; otherwise, enter 8,784 . . . . . . . . . . . . . . . . 6 Divide line 4 by line 5. Enter the result as a decimal amount . . . . 6 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 % 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, 8 85,561,800 minus any loss from the trade or business not derived from the business use of your home. See instructions. See instructions for columns (a) and (b) before completing lines 9-22. (a) Direct expenses (b) Indirect expenses 9 Casualty losses (see instructions) . . . . . . 77,976 11,008 10 Deductible mortgage interest (see instructions) . 292,065 10,273,971 11 Real estate taxes (see instructions) . . . . . 11 105,856 1,305,875 12 Add lines 9, 10, and 11 . . . . . . . . . . . . 408,929 11,657,822 13 Multiply line 12, column (b), by line 7 . . . . . . 13 1.676.503 14 Add line 12, column (a), and line 13 . . . . 14 2,085,432 15 Subtract line 14 from line 8. If zero or less, enter -0-95.631.756 16 Excess mortgage interest (see instructions) . . 16 60,670 3,850,720 17 Excess real estate taxes (see instructions) . . . 17 204,408 4,105,750 18 18 135.729 3,256,150 19 19 476,698 11,370,845 20 Repairs and maintenance . . . . . 20 275,561 4,473,131 21 352,822 9,340,794 22 22 Other expenses (see instructions) . . . . . . 237,723 2,126,070 23 38,523,460 24 7.422.600 25 Carryover of prior year operating expenses (see instructions) . . . . 3,932,367 Add line 23, column (a), line 24, and line 25. . . . . . . . . . . . . . . . . 26 26 13,098,576 27 6,030,173 Allowable operating expenses. Enter the **smaller** of line 15 or line 26 . . . 27 89,601,583 28 Limit on excess casualty losses and depreciation. Subtract line 27 from line 15 . . . . . 29 21,695 30 Depreciation of your home from line 42 below . . . . . . . . . . . . 1,192,422 31 Carryover of prior year excess casualty losses and depreciation (see instructions) 31 1.615.874 32 32 2.829.991 33 33 844,693 Allowable excess casualty losses and depreciation. Enter the smaller of line 28 or line 32 . . . . 34 8,960,298 35 Casualty loss portion, if any, from lines 14 and 33. Carry amount to Form 4684. See instructions . 24,815 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. ▶ 8,935,483 Part III **Depreciation of Your Home** 37 Enter the **smaller** of your home's adjusted basis or its fair market value. See instructions . 379.171.117 38 Value of land included on line 37 . . . . . 38 62,708,825 39 Basis of building. Subtract line 38 from line 37 . . . . . . . . . . . . . . . . 39 316,462,292 40 44,788,832 40 % 41 41 42 Depreciation allowable (see instructions). Multiply line 40 by line 41. Enter here and on line 30 above 1,192,422 Part IV **Carryover of Unallowed Expenses to 2021** 43 Operating expenses. Subtract line 27 from line 26. If less than zero, enter -0- . . . . . . . 7,068,403

Excess casualty losses and depreciation. Subtract line 33 from line 32. If less than zero, enter -0-.

1,985,298

Form **8839** 

### **Qualified Adoption Expenses**

OMB No. 1545-0074

2020

Department of the Treasury Internal Revenue Service (99) ► 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	Go to www.irs.			structions and	ine latest in		ocial sec	urity nur	mber
	Total Forms Filed = 102,188								-	
Part		About Your Eligibuding what to do if yo				nust com	plete this par	t. See	instru	uctions for
		(a)	(1-)		Check if child wa		(6)			(g)
1	Chi First	ld's name Last	(b) Child's year of birth	born bet 2003 a disable	nd with special	(e) a foreign child	(f) Child identifying			Check if adoption became final in 2020 or earlier
Child 1										
Child 2										
Child 3										
		s a foreign child, see S						e you d	comple	te Part II or
Part III		mployer-provided ado	ption benefit	ts, com	iplete Part III o	n the back	next.			
Part	Adoption C	realt			Child 1	Child 2	2 Child 3			
2	Maximum adopti (see instructions)	ion credit per child. E		1		0				
3	Did you file Form	n 8839 for a prior year								
	child? No. E									
	enter.	See instructions for the	amount to	3	47,985	25,132	2 10,407			
4	Subtract line 3 fro	om line 2		4						
5	Qualified adoption	on expenses (see instru	ıctions)	5	38,965	12,36	5 6,185			
		ualified adoption expen		:						
6		doption expenses you p r of line 4 or line 5	aid in 2020. 	6	38,963	12,363	6,185			
7		ljusted gross income (se					7			
8	Is line 7 more tha			,						
	·	es 8 and 9, and enter -0- t \$214,520 from line 7					8			
9	Divide line 8 by	\$40,000. Enter the reset than 1.000	sult as a dec	imal (r	ounded to at			9	×	
10	Multiply each ame	ount on line 6 by line 9		10						<u> </u>
11		rom line 6		11	36,973	11,359	6,184			
12		on line 11						12	3	6,981
13	Credit carryforwa 2019 Form 8839 i	ord, if any, from prior ye instructions					Worksheet in the	13	7	2,561
14	Add lines 12 and	13						14	9	8,462
15	Enter the amount	from line 5 of the Credi	t Limit Works	sheet in	the instruction	ns		15	6	4,773
16		. Enter the smaller of line that line and enter <b>"8839</b>								

64,773

16

**Qualified Adoption Expenses** 

OMB No. 1545-0074

Department of the Treasury ► Attach to Form 1040, 1040-SR, or 1040-NR. Attachment Sequence No. 38 Internal Revenue Service (99) ▶ Go to www.irs.gov/Form8839 for instructions and the latest information. Name(s) shown on return Your social security number Total Forms Filed = 102.188 Information About Your Eligible Child or Children-You must complete this part. See instructions for Part I details, including what to do if you need more space. Check if child was-(g) (a) (b) (f) Check if (e) Child's name 1 Child's year Child's adoption a child born before of birth identifying number became final in 2003 and with special foreign 2020 or earlier Last disabled needs child Child 1 Child 2 Child 3 Caution: If the child was a foreign child, see Special rules in the instructions for line 1, column (e), before you complete Part II or Part III. If you received employer-provided adoption benefits, complete Part III on the back next. Part II Adoption Credit Child 1 Child 2 Child 3 2 Maximum adoption credit per child. Enter \$14,300 (see instructions) . . . . . . . . . . . . . . . 2 Did you file Form 8839 for a prior year for the same child? No. Enter -0-. Yes. See instructions for the amount to 116.466 306.206 3 635,734 Subtract line 3 from line 2 4 61,241 391,839 107,790 5 Qualified adoption expenses (see instructions) . . Caution: Your qualified adoption expenses may not be equal to the adoption expenses you paid in 2020. 6 Enter the **smaller** of line 4 or line 5 . . . . . . 61,223 298,072 7 Enter modified adjusted gross income (see instructions) . 8 Is line 7 more than \$214,520? No. Skip lines 8 and 9, and enter -0- on line 10. 9 Divide line 8 by \$40,000. Enter the result as a decimal (rounded to at least three places). Do not enter more than 1.000 . . . . . . . . . Multiply each amount on line 6 by line 9 . . . . . 10 10 288,679 11 Subtract line 10 from line 6 . . . . . . . . . . . . 11 93,139 61.173 12 Add the amounts on line 11. 12 472,832 13 Credit carryforward, if any, from prior years. See your Adoption Credit Carryforward Worksheet in the 2019 Form 8839 instructions 13 1,827,154 14 14 2,299,986 321,747 15 Enter the amount from line 5 of the Credit Limit Worksheet in the instructions . . . . 15 16 Adoption Credit. Enter the smaller of line 14 or line 15 here and on Schedule 3 (Form 1040), line 6.

Check box c on that line and enter "8839" in the space next to box c. If line 15 is smaller than line 14,

16

Form 8839 (2020) Page **2** 

Fai	Employer-Provided Adoption Benefits				
			Child 1	Child 2	Child 3
17	Maximum exclusion per child. Enter \$14,300 (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			
	Tes. See instructions for the amount to enter.	10			
19	Subtract line 18 from line 17	19			
20	Employer-provided adoption benefits you received in				
	2020. This amount should be shown in box 12 of				
	your 2020 Form(s) W-2 with code <b>T</b>	20			
•	A 1111				
21	Add the amounts on line 20				
22	Enter the <b>smaller</b> of line 19 or line 20. But if the child				
~~	was a child with special needs and the adoption				
	became final in 2020, enter the amount from line 19.	22			
23	Enter modified adjusted gross income (from the works	sheet	in		
	the instructions)		. 23		
24	Is line 23 more than \$214,520?				
	No. Skip lines 24 and 25, and enter -0- on line 26.				
	Yes. Subtract \$214,520 from line 23				
25	Divide line 24 by \$40,000. Enter the result as a decima places). Do not enter more than 1.000			st three 25	× .
	places). Be not enter more than 1.000				
26	Multiply each amount on line 22 by line 25	26			
27	<b>Excluded benefits.</b> Subtract line 26 from line 22	27			
28	Add the amounts on line 27				
20	Add the amounts on line 27				
29	Taxable benefits. Is line 28 more than line 21?				
	☐ <b>No.</b> Subtract line 28 from line 21. Also, include this	s amo	unt. if more th	an zero. on	1
	line 1 of Form 1040 or 1040-SR or line 1a of			·	
	line next to line 1 of Form 1040 or 1040-SR	or lir	ne 1a of Form	n 1040-NR,	
	enter "AB."				
	Yes. Subtract line 21 from line 28. Enter the result		•		
	the total you would enter on line 1 of Form				
	Form 1040-NR by the amount on Form 8839, 1 of Form 1040 or 1040-SR or line 1a of Form				
	dotted line next to the entry line.	1 1040	TINIT. LITTET S	DIVE OIT LIFE	

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 2019, those expenses were not fully reimbursed by your employer or otherwise, and the adoption was not final by the end of 2019.
- The total adoption expenses you paid in 2020 were not fully reimbursed by your employer or otherwise, and the adoption became final in 2020 or earlier.
- You adopted a child with special needs and the adoption became final in 2020.

Form **8839** (2020)

# 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

	839 (2020)						Page <b>2</b>
Part III Employer-Provided Adoption Benefits			Obild 4	Ohild O	01:11-10		
17	Maximum exclusion per child. Enter \$14,300 (see instructions)	17	Child 1	Child 2	Child 3		
18	Did you receive employer-provided adoption benefits for a prior year for the same child?  No. Enter -0						
	Yes. See instructions for the amount to enter.	18				_	
19	Subtract line 18 from line 17	19					
20	Employer-provided adoption benefits you received in 2020. This amount should be shown in box 12 of your 2020 Form(s) W-2 with code <b>T</b>	20					
21	Add the amounts on line 20					21	*
22	Enter the <b>smaller</b> of line 19 or line 20. But if the child was a child with special needs and the adoption became final in 2020, enter the amount from line 19.	22					
23	Enter modified adjusted gross income (from the works the instructions)						
24	Is line 23 more than \$214,520?  No. Skip lines 24 and 25, and enter -0- on line 26.  Yes. Subtract \$214,520 from line 23						
25	Divide line 24 by \$40,000. Enter the result as a decima places). Do not enter more than 1.000	•			× .		
26	Multiply each amount on line 22 by line 25	26					
27	Excluded benefits. Subtract line 26 from line 22	27					
28	Add the amounts on line 27					28	*
29	Taxable benefits. Is line 28 more than line 21?						
	■ No. Subtract line 28 from line 21. Also, include this amount, if more than zero, on line 1 of Form 1040 or 1040-SR or line 1a of Form 1040-NR. On the dotted line next to line 1 of Form 1040 or 1040-SR or line 1a of Form 1040-NR, enter "AB."						
	☐ Yes. Subtract line 21 from line 28. Enter the result a the total you would enter on line 1 of Form Form 1040-NR by the amount on Form 8839, 1 of Form 1040 or 1040-SR or line 1a of Form dotted line next to the entry line.	1040 line 2	or 1040-SR 9. Enter the r	or line 1a of esult on line		29	*
	You may be able to claim the adoption credit in P						
7	<ul> <li>You paid adoption expenses in 2019, those ex the adoption was not final by the end of 2019.</li> </ul>	pense	es were not f	ully reimbursed	by your emp	loyer or o	therwise, and
\	• The total adoption expenses you paid in 2020	0 wer	e not fully re	eimbursed by vo	our emplover	or other	wise, and the



- adoption became final in 2020 or earlier.
- You adopted a child with special needs and the adoption became final in 2020.

Form **8839** (2020)

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

Form **8846** 

Department of the Treasury Internal Revenue Service

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

► Attach to your tax return.

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

ONB No. 1545-0123	
2020	
Attachment	

Form **8846** (2020)

Name(s) shown on return

For Paperwork Reduction Act Notice, see instructions.

Total Forms Filed =

22,958

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

Identifying number

where tipping 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 12,112 2 Tips not subject to the credit provisions (see instructions) . . . . . . . 2 2,393 3 Creditable tips. Subtract line 2 from line 1 3 12,112 4 Multiply line 3 by 7.65% (0.0765). If you had any tipped employees whose wages (including 4 12,112 5 Credit for employer social security and Medicare taxes paid on certain employee tips from 5 12,292 Add lines 4 and 5. Partnerships and S corporations, report this amount on Schedule K. All others, report this amount on Form 3800, Part III, line 4f 6 22,958

Cat. No. 16148Z

Form **8846** 

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

► Attach to your tax return.

OMB No. 1545-0123

2020

Attachment
Sequence No. 846

Department of the Treasury Internal Revenue Service

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

Sequence No. Of

6

129,879 Form **8846** (2020)

ivame	e(s) snown on return	Total Forms Filed =	22,958		identilying	g number
		nly for employer social sec ry for providing food or be	•		r beveraç	ge establishment
1	•	employees for services on care taxes during the tax ye	• •			667,699
2	Tips not subject to	the credit provisions (see i	instructions)		. 2	52,860
3	Creditable tips. Su	btract line 2 from line 1 .			. 3	614,839
4		7.65% (0.0765). If you had a 37,700, see instructions and		• •	_	47,035
5		er social security and Medios corporations	•			82,843
6		Partnerships and S corpo				

Cat. No. 16148Z

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

For Paperwork Reduction Act Notice, see instructions.

Department of the Treasury Internal Revenue Service (99)

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

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

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

Name(s) shown on return

Total Forms Filed =

150,529

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

Secti	on A. Archer MSAs. It you have only a Medicare Advantage MSA, skip Section A and comple	te Se	ction B.
Part	Archer MSA Contributions and Deductions. See instructions before completing this jointly and both you and your spouse have high deductible health plans with self-only consequents are part I for each spouse.		
1 2	Total employer contributions to your Archer MSA(s) for 2020	2	11,018
3	Limitation from the Line 3 Limitation Chart and Worksheet in the instructions	3	6,680
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	9,268
5	Archer MSA deduction. Enter the smallest of line 2, 3, or 4 here. Also include this amount on Schedule 1 (Form 1040), line 22. On the dotted line next to Schedule 1 (Form 1040), line 22, enter "MSA" and the amount	5	4,365
Part	Caution: If line 2 is more than line 5, you may have to pay an additional tax. See instructions.  Archer MSA Distributions		
6a	Total distributions you and your spouse received in 2020 from all Archer MSAs (see instructions)	6a	17,690
b	Distributions included on line 6a that you rolled over to another Archer MSA or a health savings account. Also include any excess contributions (and the earnings on those excess contributions) included on line 6a that were withdrawn by the due date of your return. See instructions	6b	17,000
С	Subtract line 6b from line 6a	6с	17,690
7	Unreimbursed qualified medical expenses (see instructions)	7	12,991
8	<b>Taxable Archer MSA distributions.</b> Subtract line 7 from line 6c. If zero or less, enter -0 Also include this amount in the total on Schedule 1 (Form 1040), line 8. On the dotted line next to Schedule 1 (Form 1040), line 8, enter "MSA" and the amount	8	*
9a	If any of the distributions included on line 8 meet any of the <b>Exceptions to the Additional 20% Tax</b> (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 8. Check box c on Schedule 2 (Form 1040), line 8. Enter "MSA" and the amount on the line next to the box	OI:	*
Cooti	on B. Medicare Advantage MSA Distributions. If you are filing jointly and both you and y	9b	nauga kagaiyad
Secu	distributions in 2020 from a Medicare Advantage MSA, complete a separate Section See instructions.		
10	Total distributions you received in 2020 from all Medicare Advantage MSAs (see instructions)	10	3,915
11	Unreimbursed qualified medical expenses (see instructions)	11	3,616
12	<b>Taxable Medicare Advantage MSA distributions.</b> 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 8. On the dotted line next to Schedule 1 (Form 1040), line 8, enter "Med MSA" and the amount	12	*
13a	If any of the distributions included on line 12 meet any of the <b>Exceptions to the Additional 50% Tax</b> (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 2019. Also include this amount in the total on Schedule 2 (Form 1040), line 8. Check box c		
	on Schedule 2 (Form 1040), line 8. Enter "Med MSA" and the amount on the line next to the box	13b	*

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

Cat. No. 24091H

Form **8853** (2020)

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

Department of the Treasury Internal Revenue Service (99)

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

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

Attachment Sequence No. **39** 

OMB No. 1545-0074

Name(s) shown on return

Total Forms Filed =

150 529

Social security number of MSA account holder. If both spouses

	have MSAs, see instructions ▶		
Section	on A. Archer MSAs. If you have only a Medicare Advantage MSA, skip Section A and comple	te Se	ction B.
Part	<b>Archer MSA Contributions and Deductions.</b> See instructions before completing this jointly and both you and your spouse have high deductible health plans with self-only c separate Part I for each spouse.		
1	Total employer contributions to your Archer MSA(s) for 2020		
2	Archer MSA contributions you made for 2020, including those made from January 1, 2021, through		
_	April 15, 2021, that were for 2020. Don't include rollovers. See instructions	2	23,536
3	Limitation from the Line 3 Limitation Chart and Worksheet in the instructions	3	21,763
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	429,206
5	Archer MSA deduction. Enter the smallest of line 2, 3, or 4 here. Also include this amount on Schedule 1 (Form 1040), line 22. On the dotted line next to Schedule 1 (Form 1040), line 22, enter "MSA" and the amount	5	7,013
	Caution: If line 2 is more than line 5, you may have to pay an additional tax. See instructions.		7,010
Part			
6a	Total distributions you and your spouse received in 2020 from all Archer MSAs (see instructions)	6a	60,215
b	Distributions included on line 6a that you rolled over to another Archer MSA or a health savings account. Also include any excess contributions (and the earnings on those excess contributions) included on line 6a that were withdrawn by the due date of your return. See instructions	6b	·
С	Subtract line 6b from line 6a	6с	60,215
7	Unreimbursed qualified medical expenses (see instructions)	7	54,523
8	<b>Taxable Archer MSA distributions.</b> Subtract line 7 from line 6c. If zero or less, enter -0 Also include this amount in the total on Schedule 1 (Form 1040), line 8. On the dotted line next to Schedule 1 (Form 1040), line 8, enter "MSA" and the amount	8	*
9a	If any of the distributions included on line 8 meet any of the <b>Exceptions to the Additional 20% Tax</b> (see instructions), check here		
b	<b>Additional 20% tax</b> (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 8. Check box c on Schedule 2 (Form 1040), line 8. Enter "MSA" and the amount on the line next to the box	Oh	*
Cooti		9b	Paulae Receives
Secu	on B. Medicare Advantage MSA Distributions. If you are filing jointly and both you and y distributions in 2020 from a Medicare Advantage MSA, complete a separate Section See instructions.		
10	Total distributions you received in 2020 from all Medicare Advantage MSAs (see instructions)	10	10,904
11	Unreimbursed qualified medical expenses (see instructions)	11	9,818
12	<b>Taxable Medicare Advantage MSA distributions.</b> 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 8. On the dotted line next to Schedule 1 (Form 1040), line 8, enter "Med MSA" and the amount	12	*
13a	If any of the distributions included on line 12 meet any of the <b>Exceptions to the Additional 50% Tax</b> (see instructions), check here	12	
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 2019. Also include this amount in the total on Schedule 2 (Form 1040), line 8. Check box c on Schedule 2 (Form 1040), line 8. Enter "Med MSA" and the amount on the line next to the box	13b	*
For Pa		100	Form <b>8853</b> (2020
	not shown because of the small number of sample returns on which they are based.		1 01111 0000 (2020

Form 8	353 (2020)	Attachment Sequ	ience N	o. <b>39</b>	Page <b>2</b>
Name c	f policyholder (as shown on return)	Social security number of policyholder ▶			
Secti	on C. Long-Term Care (LTC) Insurance Contracts. See Filing Re before completing this section.	quirements for Section	<b>C</b> in	the ins	tructions
	If more than one Section C is attached, check here				. ▶ 🗌
14a	Name of insured ▶ b Social s	ecurity number of insured I	<b>&gt;</b>		
15	In 2020, did anyone other than you receive payments on a per diem of qualified LTC insurance contract covering the insured or receive accelerationsurance policy covering the insured?	ted death benefits under a	a life	☐ Yes	□ No
16	Was the insured a terminally ill individual?			☐ Yes	☐ No
	<b>Note:</b> If "Yes" and the <b>only</b> payments you received in 2020 were accelerate paid to you because the insured was terminally ill, skip lines 17 through 25 a				
17	Gross LTC payments received on a per diem or other periodic basis. Ente from box 1 of all Forms 1099-LTC you received with respect to the insured box in box 3 is checked	d on which the "Per diem"	17	2.62	1,253
	Caution: Don't use lines 18 through 26 to figure the taxable amount of beinsurance contract that isn't a qualified LTC insurance contract. Instees excludable from your income (for example, if the benefits aren't paid for pethrough accident or health insurance), report the amount not excludable a (Form 1040), line 8 or, for taxpayers filing Form 1040-NR, on Form 1040-NR.	ad, if the benefits aren't ersonal injuries or sickness as income on Schedule 1			.,
18	Enter the part of the amount on line 17 that is from qualified LTC insurance	contracts	18	1.82	2.431
19	Accelerated death benefits received on a per diem or other periodic basis. If you received because the insured was terminally ill. See instructions	Don't include any amounts	19	.,,=	*
20	Add lines 18 and 19	the	20	1,88	6,570
21	Multiply \$380 by the number of days in the LTC period	. <b>21</b> 7,626,305			
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	. <b>23</b> 8,926,673			
24	Reimbursements for qualified LTC services provided for the insured during LTC period				
	<b>Caution:</b> If you received any reimbursements from LTC contracts issubefore August 1, 1996, see instructions.	ued			
25	Per diem limitation. Subtract line 24 from line 23		25	7,03	6,88 <del>0</del> /-
26	<b>Taxable payments.</b> Subtract line 25 from line 20. If zero or less, enter -0 A the total on Schedule 1 (Form 1040), line 8 or, for taxpayers filing Form 1040 Schedule NEC, line 12. On the dotted line next to Schedule 1 (Form 1040 filing Form 1040-NB, on Form 1040-NB, Schedule NEC, line 12, enter "LTC"	40-NR, on Form 1040-NR, D), line 8 or, for taxpayers	06	000	272

Form **8853** (2020)

## 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 88	353 (2020)	Attachment Sequence No. 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 R before completing this section.	
	If more than one Section C is attached, check here	
14a	Name of insured ▶ b Social	security number of insured ▶
15	In 2020, did anyone other than you receive payments on a per diem qualified LTC insurance contract covering the insured or receive acceler insurance policy covering the insured?	rated death benefits under a life
16	Was the insured a terminally ill individual?	
	<b>Note:</b> If "Yes" and the <b>only</b> payments you received in 2020 were accelerated paid to you because the insured was terminally ill, skip lines 17 through 25	
17	Gross LTC payments received on a per diem or other periodic basis. Ent from box 1 of all Forms 1099-LTC you received with respect to the insure box in box 3 is checked	
	Caution: Don't use lines 18 through 26 to figure the taxable amount of binsurance contract that isn't a qualified LTC insurance contract. Instead excludable from your income (for example, if the benefits aren't paid for puthrough accident or health insurance), report the amount not excludable (Form 1040), line 8 or, for taxpayers filing Form 1040-NR, on Form 1040-NB	ead, if the benefits aren't personal injuries or sickness as income on Schedule 1
18	Enter the part of the amount on line 17 that is from qualified LTC insurance	e contracts <b>18</b> 1,822,431
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	the 1 1,886,570
21	Multiply \$380 by the number of days in the LTC period	. <b>21</b> 7,626,305
22 23	Costs incurred for qualified LTC services provided for the insured during LTC period (see instructions)	. 22 4,044,483
24	Reimbursements for qualified LTC services provided for the insured during LTC period	. <b>24</b> 2,292,085
	before August 1, 1996, see instructions.	
25		<b>25</b> 7,036,88 <del>0</del> /-
26	<b>Taxable payments.</b> Subtract line 25 from line 20. If zero or less, enter -0 the total on Schedule 1 (Form 1040), line 8 or, for taxpayers filing Form 10 Schedule NEC, line 12. On the dotted line next to Schedule 1 (Form 104 filing Form 1040-NR, on Form 1040-NR, Schedule NEC, line 12, enter "LTC"	040-NR, on Form 1040-NR, 40), line 8 or, for taxpayers
		Form <b>8853</b> (2020)

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

Total Forms Filed =

### **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.

8,726,402

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

Your social security number

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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.

Part	Refundable American Opportunity Credit				
1	After completing Part III for each student, enter the total of all amounts from all P	arts I	II, line 30	1	6,571,378
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household,				
	or qualifying widow(er)	2	6,571,378		
3	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form				
	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for				
	the amount to enter	3	6,492,269		
4	Subtract line 3 from line 2. If zero or less, <b>stop</b> ; you can't take any education				
	credit	4	6,570,735	_	
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or	_	0.570.705		
_	qualifying widow(er)	5	6,570,735		
6	If line 4 is:		,		
	• Equal to or more than line 5, enter 1.000 on line 6				0.570.705
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (roll in the control of the control		l l	6	6,570,735
	at least three places)				
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of th				
	conditions described in the instructions, you <b>can't</b> take the refundable America			7	6 670 726
_	skip line 8, enter the amount from line 7 on line 9, and check this box			7	6,570,735
8	Refundable American opportunity credit. Multiply line 7 by 40% (0.40). Enter on Form 1040 or 1040 SR, line 30. Then go to line 0 below.			8	6 494 440
Part	on Form 1040 or 1040-SR, line 29. Then go to line 9 below	•		0	6,481,440
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	(600	inetructions)	9	6,570,735
10	After completing Part III for each student, enter the total of all amounts from a	•	,	-	0,370,733
10	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19			10	2,249,154
11	Enter the smaller of line 10 or \$10,000			11	2,249,154
12	Multiply line 11 by 20% (0.20)			12	2,249,154
13	Enter: \$138,000 if married filing jointly; \$69,000 if single, head of household, or	•			2,210,101
.0	qualifying widow(er)	13	2,249,154		
14	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form		2,210,101		
17	2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for				
	the amount to enter	14	2,249,154		
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	2,249,154		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or				
	qualifying widow(er)	16	2,244,531		
17	If line 15 is:				
	• Equal to or more than line 16, enter 1.000 on line 17 and go to line 18				
	• Less than line 16, divide line 15 by line 16. Enter the result as a decimal (rou	nded	to at least three		
	places)			17	2,244,531
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet			18	2,244,531
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit	Limit	Worksheet (see		
	instructions) here and on Schedule 3 (Form 1040), line 3 $$		<u> </u>	19	7,418,821
For Pa	perwork Reduction Act Notice, see your tax return instructions.	t. No. 2	25379M		Form <b>8863</b> (2020)

OMB No. 1545-0074

## 8863

Department of the Treasury Internal Revenue Service (99)

### **Education Credits** (American Opportunity and Lifetime Learning Credits)

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

► Attach to Form 1040 or 1040-SR. Attachment Sequence No. **50** 

Name(s) shown on return

Total Forms Filed = 8,726,402 Your social security number

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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.

Part	Refundable American Opportunity Credit					
1	After completing Part III for each student, enter the total of all amounts from all Pa	arts I	II, line 3	0	1	14,642,098
2	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	2	812,92	24,140		
3	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter	3	337,00	06,721		
4	Subtract line 3 from line 2. If zero or less, <b>stop</b> ; you can't take any education credit	4	476,2	19,865		
5	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	5	90,31	3,433		
6	If line 4 is:		,			
	• Equal to or more than line 5, enter 1.000 on line 6		- 1			0.444.504
	• Less than line 5, divide line 4 by line 5. Enter the result as a decimal (rou at least three places)				6	6,444,501
7	Multiply line 1 by line 6. Caution: If you were under age 24 at the end of the					
	conditions described in the instructions, you can't take the refundable America					44044077
•	skip line 8, enter the amount from line 7 on line 9, and check this box				7	14,311,677
8	<b>Refundable American opportunity credit.</b> Multiply line 7 by 40% (0.40). Enter on Form 1040 or 1040-SR, line 29. Then go to line 9 below.				8	5,654,475
Part		-			<u> </u>	3,004,473
9	Subtract line 8 from line 7. Enter here and on line 2 of the Credit Limit Worksheet	(see	instruc	tions) .	9	8,657,202
10	After completing Part III for each student, enter the total of all amounts from a	•		,		-,,
	zero, skip lines 11 through 17, enter -0- on line 18, and go to line 19				10	18,335,649
11	Enter the smaller of line 10 or \$10,000				11	11,718,184
12	Multiply line 11 by 20% (0.20)				12	2,343,652
13	Enter: \$138,000 if married filing jointly; \$69,000 if single, head of household, or qualifying widow(er)	13	216,32	28,953		
14	Enter the amount from Form 1040 or 1040-SR, line 11. If you're filing Form 2555 or 4563, or you're excluding income from Puerto Rico, see Pub. 970 for the amount to enter	44	400.5	20.004		
45	the amount to enter	14	120,5	32,931		
15	line 18, and go to line 19	15	05.70	6,021		
16	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or	10	95,78	00,021		
	qualifying widow(er)	16	31 30	0,152		
17	If line 15 is:		01,00	70,102		
	• 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 (rour	nded	to at le	ast three		
	places)				17	21,844,651
18	Multiply line 12 by line 17. Enter here and on line 1 of the Credit Limit Worksheet				18	2,267,067
19	Nonrefundable education credits. Enter the amount from line 7 of the Credit			`		7.000.000
	instructions) here and on Schedule 3 (Form 1040), line 3				19	7,880,608

Form 88	63 (2020)						Page 2
Name(s)	shown on return			You	r social :	security numl	oer
CAUTIO	Complete Part III for each student for whom opportunity credit or lifetime learning credit each student.					needed f	or
Part	II Student and Educational Institution Information	. See ins	structions.				
20 8	Student name (as shown on page 1 of your tax return)		ıdent social secul ur tax return)	rity number (as	shown	on page 1	of
22	Educational institution information (see instructions)				_		
	Name of first educational institution	<b>b.</b> Na	me of second ed	ucational institu	ution (if	any)	
(1)	Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.	р	ddress. Number ost office, state, astructions.				
(2)	Did the student receive Form 1098-T  Yes No from this institution for 2020?		oid the student re-		)8-T	] Yes [	□ No
(3)	Did the student receive Form 1098-T from this institution for 2019 with box Yes No 7 checked?	` fr	Did the student recommend this institution checked?		_	Yes [	☐ No
(4)	Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	(E	inter the institut EIN) if you're clair you checked "Y rom Form 1098-T	ning the Ameri 'es" in <b>(2)</b> or <b>(</b>	can op <b>3).</b> You	portunity o	redit or
	Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2020?	☐ Yes Go to	— <b>Stop!</b> o line 31 for this s	student. No	) — Go	to line 24.	
	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2020 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.	Yes	— Go to line 25.		o — <b>St</b> o	<b>pp!</b> Go to li udent.	 ne 31
	Did the student complete the first 4 years of postsecondary education before 2020? See instructions.		— <b>Stop!</b> o line 31 for this ent.	☐ No	) — Go	to line 26.	
	Was the student convicted, before the end of 2020, of a felony for possession or distribution of a controlled substance?		— <b>Stop!</b> o line 31 for this ent.			mplete line 0 for this s	
CAUTIO				e <b>same studer</b>		_	r. If
	American Opportunity Credit					5,571,378	12,081
	Adjusted qualified education expenses (see instructions). <b>Don</b>				27	355,216	0_
	Subtract \$2,000 from line 27. If zero or less, enter -0				28		
	Multiply line 28 by 25% (0.25)		0.4-4		29	C E 74 0 70	40.004
	If line 28 is zero, enter the amount from line 27. Otherwise, a enter the result. Skip line 31. Include the total of all amounts fi				30	355,216	12,081 0
	Lifetime Learning Credit			–	Τ.	040 454	
	Adjusted qualified education expenses (see instructions). Including III. line 31. on Part II. line 10	ude the to	otal of all amounts	s trom all Parts	31	2,249,154 36,570	0 0

## 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 886	63 (2020)		Page <b>2</b>
Name(s) s	shown on return		Your social security number
CAUTIO	Complete Part III for each student for whom opportunity credit or lifetime learning credit each student.		
Part I	Student and Educational Institution Information	n. See instructions.	
<b>20</b> S	tudent name (as shown on page 1 of your tax return)	21 Student social security number your tax return)	(as shown on page 1 of
<b>22</b> E	Educational institution information (see instructions)		_
	Name of first educational institution	b. Name of second educational ins	stitution (if any)
(1)	Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.	(1) Address. Number and street (compost office, state, and ZIP cocinstructions.	
(2)	Did the student receive Form 1098-T ☐ Yes ☐ No from this institution for 2020?	(2) Did the student receive Form from this institution for 2020?	1098-T  Yes  No
(3)	Did the student receive Form 1098-T from this institution for 2019 with box ☐ Yes ☐ No 7 checked?	(3) Did the student receive Form from this institution for 2019 w 7 checked?	
(4)	Enter the institution's employer identification number (EIN) if you're claiming the American opportunity credit or if you checked "Yes" in (2) or (3). You can get the EIN from Form 1098-T or from the institution.	(4) Enter the institution's emple (EIN) if you're claiming the Amif you checked "Yes" in (2) of from Form 1098-T or from the	nerican opportunity credit or or (3). You can get the EIN
c	Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2020?		No — Go to line 24.
2 	Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2020 at an eligible educational institution in a program eading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.		No — <b>Stop!</b> Go to line 31 for this student.
	Did the student complete the first 4 years of postsecondary education before 2020? See instructions.	Yes — <b>Stop!</b> Go to line 31 for this student.	No — Go to line 26.
f	Was the student convicted, before the end of 2020, of a felony for possession or distribution of a controlled substance?	Yes — <b>Stop!</b> Go to line 31 for this student.	No — Complete lines 27 through 30 for this student.
CAUTIO	You <b>can't</b> take the American opportunity credit and the li you complete lines 27 through 30 for this student, don't on		dent in the same year. If
F	American Opportunity Credit		20,382,988 35,942
<b>28</b> S	Adjusted qualified education expenses (see instructions). <b>Don</b> Subtract \$2,000 from line 27. If zero or less, enter -0		. <b>27</b> 1,158,889 0
<b>30</b> If	Multiply line 28 by 25% (0.25)		1 1
	Lifetime Learning Credit		1 1 1 1
31 A	Adjusted qualified education expenses (see instructions). Incl	ude the total of all amounts from all Pa	rts 18,199,024 0 . <b>31</b> 136,625 0
			Form <b>8863</b> (2020)

**Credit for Qualified Retirement Savings Contributions** 

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

OMB No. 1545-0074

Sequence No.

(a) You

Department of the Treasury Internal Revenue Service

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

Name(s) shown on return Total Forms Filed =

Your social security number 9,496,452



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

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$32,500 (\$48,750 if head of household; \$65,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2003; (b) is claimed as a dependent on someone else's 2020 tax return; or (c) was a student (see instructions).

Traditional ar					1	(a) rou			
and a second and a second second		ontributions, and AB							
•	-	020. <b>Do not</b> include ro			1	753,571		213,571	
		c) or other qualified e					_	1,085,847	
		(D) plan contributions	plan contributions for 2020 (see instructions) <b>2</b> 8,187,65						
Add lines 1 ar					3	8,632,12	2	1,244,836	
		ed after 2017 and		, ,					
		return (see instructio					_	400.004	
•		<b>oth</b> columns. See inst	•	•	4	353,380		126,824	
		zero or less, enter -0-			5	8,616,61		1,236,384	
	•	naller of line 5 or \$2,0			6	8,644,96		1,244,543	
		f zero, <b>stop;</b> you can't		1	1		7	9,484,982	
Enter the amo	ount from Form	1040, 1040-SR, or 10	)40-NR, line 11* .	8	9,4	184,982			
It line	8 is—		And your filing status is—						
		Married							
Over-	But not	filing jointly	household	separate		·9			
l Ovci	OVOr	0,		Joopaiat					
Over	over-		i line 9—	Qualifying v		er)			
	over— \$19,500		0.5		vidow(e	er)			
		0.5 0.5		Qualifying v	vidow(e	er)			
	\$19,500	Enter or 0.5	0.5	Qualifying v	vidow(e	er)	9	x 0 .	
 \$19,500	\$19,500 \$21,250	0.5 0.5	0.5 0.5	Qualifying v 0.5 0.2	vidow(e	er) 	9	x 0 . 9,460,271	
 \$19,500 \$21,250	\$19,500 \$21,250 \$29,250	0.5 0.5 0.5 0.5	0.5 0.5 0.5	Qualifying v 0.5 0.2 0.1	vidow(e	er)	9		
\$19,500 \$21,250 \$29,250 \$31,875 \$32,500	\$19,500 \$21,250 \$29,250 \$31,875	0.5 0.5 0.5 0.5 0.5 0.5 0.5	0.5 0.5 0.5 0.2	Qualifying v 0.5 0.2 0.1 0.1	vidow(e	er)	9		
\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000	\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500	0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5	0.5 0.5 0.5 0.2 0.1 0.1	Qualifying v 0.5 0.2 0.1 0.1 0.1 0.0 0.0	vidow(e	rr)	9		
\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500	\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500 \$48,750	0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.2	0.5 0.5 0.5 0.2 0.1 0.1 0.1	Qualifying v 0.5 0.2 0.1 0.1 0.1 0.0 0.0 0.0	i i i i i i	rr)	9		
\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500 \$48,750	\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500	0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.2 0.1	0.5 0.5 0.5 0.2 0.1 0.1 0.1 0.1	Qualifying v 0.5 0.2 0.1 0.1 0.1 0.0 0.0 0.0 0.0	vidow(e	rr)	9		
\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500	\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500 \$48,750 \$65,000	0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.2 0.1 0.1	0.5 0.5 0.5 0.2 0.1 0.1 0.1 0.0 0.0	Qualifying v 0.5 0.2 0.1 0.1 0.1 0.0 0.0 0.0 0.0 0.0	vidow(e	er)	9		
\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500 \$48,750	\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500 \$48,750 \$65,000	0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.2 0.1	0.5 0.5 0.5 0.2 0.1 0.1 0.1 0.0 0.0	Qualifying v 0.5 0.2 0.1 0.1 0.1 0.0 0.0 0.0 0.0 0.0	vidow(e	er)	9		
\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500 \$48,750 \$65,000	\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500 \$48,750 \$65,000  <b>Note:</b> I	0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.1 0.1 0.0  If line 9 is zero, <b>stop</b> ;	0.5 0.5 0.2 0.1 0.1 0.1 0.1 0.0 0.0 you can't take this cr	Qualifying v 0.5 0.2 0.1 0.1 0.0 0.0 0.0 0.0 redit.	vidow(e		9		
\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500 \$48,750 \$65,000 Multiply line 7 Limitation bas	\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500 \$48,750 \$65,000  <b>Note:</b> I	0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.1 0.1 0.0 f line 9 is zero, stop; ity. Enter the amount	0.5 0.5 0.5 0.2 0.1 0.1 0.1 0.1 0.0 0.0 you can't take this cr	Qualifying v 0.5 0.2 0.1 0.1 0.0 0.0 0.0 0.0 redit	vidow(€	tructions		9,460,271	
\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500 \$48,750 \$65,000 Multiply line 7 Limitation bas	\$19,500 \$21,250 \$29,250 \$31,875 \$32,500 \$39,000 \$42,500 \$48,750 \$65,000  Note: I by line 9 .	0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.1 0.1 0.0  If line 9 is zero, <b>stop</b> ;	0.5 0.5 0.5 0.2 0.1 0.1 0.1 0.1 0.0 0.0 you can't take this cr	Qualifying v 0.5 0.2 0.1 0.1 0.0 0.0 0.0 0.0 redit	vidow(e	tructions	10	9,460,271	

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

Form **8880** 

### **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

2020
Attachment
Sequence No. 54

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

Total Forms Filed = 9,496,452

Your social security number



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

- The amount on Form 1040, 1040-SR, or 1040-NR, line 11, is more than \$32,500 (\$48,750 if head of household; \$65,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2003; (b) is claimed as a dependent on someone else's 2020 tax return; or (c) was a **student** (see instructions).

						(a) Yo	u	(b) Your spous
		ontributions, and AB		•				957,710
•	•	ary for 2020. <b>Do not</b> include rollover contributions						
Elective deferrals to a 401(k) or other qualified employer plan, voluntary employee								
		01(c)(18)(D) plan contributions for 2020 (see instructions) <b>2</b> 13,891,894						
Add lines 1 ar					3	16,704,	192	3,287,388
		ed after 2017 and		`				
extensions) of								
•		<b>oth</b> columns. See inst	·		4	527,25		236,223
		zero or less, enter -0-			5	16,277,		3,168,643
		naller of line 5 or \$2,0			6	10,002,0		1,624,051
		f zero, <b>stop;</b> you can't		1			7	11,626,102
Enter the amo	unt from Form	1040, 1040-SR, or 10	)40-NR, line 11*	8	332,	480,981		
Enter the appl	icable decimal	amount from the table	e below.					
If line	8 is-	į	and your filing status	is-				
	But not	Married	Head of	Single, Marr	ied filin	g		
Over-								
	0.0.	Enter on line 9— Qualifying wid		vidow(e	r)			
	\$19,500	0.5	0.5	0.5				
\$19,500	\$21,250	0.5	0.5	0.2				
\$21,250	\$29,250	0.5	0.5	0.1			9	x 0 .
\$29,250	\$31,875	0.5	0.2	0.1				190,536
\$31,875	\$32,500	0.5	0.1	0.1				
\$32,500	\$39,000	0.5	0.1	0.0				
	<b>#40 500</b>	0.2	0.1	0.0				
\$39,000	\$42,500			0.0				
\$39,000 \$42,500	\$42,500 \$48,750	0.1	0.1	0.0		l l		
	1	0.1 0.1	0.1 0.0	0.0				
\$42,500	\$48,750							
\$42,500 \$48,750	\$48,750 \$65,000	0.1 0.0	0.0 0.0	0.0 0.0				
\$42,500 \$48,750 \$65,000	\$48,750 \$65,000  <b>Note:</b> I	0.1	0.0 0.0 you can't take this cre	0.0 0.0 edit.			10	2,091,073
\$42,500 \$48,750 \$65,000 Multiply line 7	\$48,750 \$65,000  <b>Note:</b> I by line 9	0.1 0.0 If line 9 is zero, <b>stop;</b> y	0.0 0.0 you can't take this cre	0.0 0.0 edit.		ructions	10	2,091,073 16,226,093
\$42,500 \$48,750 \$65,000 Multiply line 7 Limitation bas	\$48,750 \$65,000  <b>Note:</b> I by line 9 .	0.1 0.0 If line 9 is zero, <b>stop;</b> y	0.0 0.0 you can't take this cre	0.0 0.0 edit. 	 he inst		_	2,091,073 16,226,093

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

Form **8889** 

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

2020
Attachment Sequence No. 52

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

Total Forms Filed =

15,192,287

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

Befor	<b>re you begin:</b> Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, it	requi	ired.
Part	<b>HSA Contributions and Deduction.</b> 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 2020. See instructions	□Sel	f-only 🗌 Family
2	HSA contributions you made for 2020 (or those made on your behalf), including those made from January 1, 2021, through April 15, 2021, that were for 2020. <b>Do not</b> include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	2,081,884
3	If you were under age 55 at the end of 2020 and, on the first day of <b>every</b> month during 2020, you were, or were considered, an eligible individual with the <b>same</b> coverage, enter \$3,550 (\$7,100 for family coverage). <b>All others,</b> see the instructions for the amount to enter	3	13,263,697
4	Enter the amount you and your employer contributed to your Archer MSAs for 2020 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2020, also include any amount contributed to your spouse's Archer MSAs	4	30,241
5	Subtract line 4 from line 3. If zero or less, enter -0	5	13,261,350
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 2020, see the instructions for the amount to enter	6	12,996,663
7	If you were age 55 or older at the end of 2020, married, and you or your spouse had family coverage under an HDHP at any time during 2020, enter your additional contribution amount. See instructions	7	1,589,083
8	Add lines 6 and 7	8	13,004,380
9	Employer contributions made to your HSAs for 2020	-	
10	Qualified HSA funding distributions	44	11,880,545
11	Add lines 9 and 10	11	11,697,367
12	Subtract line 11 from line 8. If zero or less, enter -0	12 13	
13	<b>HSA deduction.</b> Enter the <b>smaller</b> of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 12 <b>Caution:</b> If line 2 is more than line 13, you may have to pay an additional tax. See instructions.	13	2,008,708
Part		rate F	ISAs complete
· a. c	a separate Part II for each spouse.	ii ato i	io, io, complete
14a	Total distributions you received in 2020 from all HSAs (see instructions)	14a	8,892,156
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	74,945
С	Subtract line 14b from line 14a	14c	8,863,349
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	8,587,922
16	<b>Taxable HSA distributions.</b> Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8, and enter "HSA" and the amount on the	16	392,109
47-	dotted line	16	032,103
1/a	If any of the distributions included on line 16 meet any of the <b>Exceptions to the Additional</b> 20% Tax (see instructions), check here		
b	<b>Additional 20% tax</b> (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 8; check box c and enter "HSA" and the amount on the line next to the box	17b	253,199
Part			
18	Last-month rule	18	10,817
19	Qualified HSA funding distribution	19	*
20	<b>Total income.</b> Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8, and enter "HSA" and the amount on the dotted line	20	15,828
21	<b>Additional tax.</b> Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 8; check box c and enter "HDHP" and the amount on the line next to the box	21	15,828

## Form **8889**

Department of the Treasury Internal Revenue Service

### **Health Savings Accounts (HSAs)**

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form8889 for instructions and the latest information.

2020 Attachment Sequence No. 52

OMB No. 1545-0074

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

Total Forms Filed = 15,192,287

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

Befor	re you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, it	f requ	ired.
Part	<b>HSA Contributions and Deduction.</b> 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 2020. See instructions	□Sel	f-only
2	HSA contributions you made for 2020 (or those made on your behalf), including those made from January 1, 2021, through April 15, 2021, that were for 2020. <b>Do not</b> include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2	6,544,761
3	If you were under age 55 at the end of 2020 and, on the first day of <b>every</b> month during 2020, you were, or were considered, an eligible individual with the <b>same</b> coverage, enter \$3,550 (\$7,100 for family coverage). <b>All others,</b> see the instructions for the amount to enter	3	76,203,376
4	Enter the amount you and your employer contributed to your Archer MSAs for 2020 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2020, also include any amount contributed to your spouse's Archer MSAs	4	41,804
5	Subtract line 4 from line 3. If zero or less, enter -0	5	76,168,647
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 2020, see the instructions for the amount to enter	6	71,958,594
7	If you were age 55 or older at the end of 2020, married, and you or your spouse had family coverage under an HDHP at any time during 2020, enter your additional contribution amount. See instructions	7	1,652,977
8	Add lines 6 and 7	8	73,611,571
9	Employer contributions made to your HSAs for 2020	-	
10	Qualified HSA funding distributions	44	31,495,062
11 12	Subtract line 11 from line 8. If zero or less, enter -0	11 12	43,528,841
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 12	13	5,948,959
10	<b>Caution:</b> If line 2 is more than line 13, you may have to pay an additional tax. See instructions.	10	3,340,333
Part	II HSA Distributions. If you are filing jointly and both you and your spouse each have sepa	rate l	HSAs, complete
140	a separate Part II for each spouse.  Total distributions you received in 2020 from all HSAs (see instructions)	14a	20,964,989
14a	·	14a	20,904,969
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	129,789
С	Subtract line 14b from line 14a	14c	20,835,199
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	20,381,213
16	<b>Taxable HSA distributions.</b> Subtract line 15 from line 14c. If zero or less, enter -0 Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8, and enter "HSA" and the amount on the		
	dotted line	16	453,986
	If any of the distributions included on line 16 meet any of the <b>Exceptions to the Additional</b> 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	4-1	62.600
Dort	1040), Part II, line 8; check box c and enter "HSA" and the amount on the line next to the box	17b	63,608
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 sep complete a separate Part III for each spouse.		
18	Last-month rule	18	15,646
19	Qualified HSA funding distribution	19	*
20	<b>Total income.</b> Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8, and enter "HSA" and the amount on the dotted line	20	25,210
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form		
	1040), Part II, line 8; check box c and enter "HDHP" and the amount on the line next to the box	21	2,523
For Pa	perwork Reduction Act Notice, see your tax return instructions. Cat. No. 37621P		Form <b>8889</b> (2020)

Form **8903**(Rev. December 2018)
Department of the Treasury
Internal Revenue Service

Name(s) as shown on return

### **Domestic Production Activities Deduction**

► Attach to your tax return.

▶ Go to www.irs.gov/Form8903 for instructions and the latest information.

OMB No. 1545-1984

Attachment Sequence No. **143** 

Identifying number

Total Forms Filed = 11,708 Note: Do not complete column (a), unless you have oil-related (b) (a) production activities. Enter amounts for all activities in column (b), All activities Oil-related production activities including oil-related production activities. Domestic production gross receipts (DPGR) . . . . . . . . 1.018 2 Allocable cost of goods sold. If you are using the small business simplified overall method, skip lines 2 and 3 . . . . . . . . . 2 1,018 3 3 Enter deductions and losses allocable to DPGR (see instructions) . 12 If you are using the small business simplified overall method, enter the amount of cost of goods sold and other deductions or losses you ratably apportion to DPGR. All others, skip line 4 . . . . . . . . 4 1,018 5 1,018 6 7 Qualified production activities income from estates, trusts, and certain partnerships and S corporations (see instructions) . . . 7 8 Add lines 6 and 7. Estates and trusts, go to line 9. All others, skip line 8 9 Amount allocated to beneficiaries of the estate or trust (see 9 10a Oil-related qualified production activities income. Estates and trusts, subtract line 9, column (a), from line 8, column (a). All others, enter amount from line 8, column (a). If zero or less, enter -0- here . 10a b Qualified production activities income. Estates and trusts, subtract line 9, column (b), from line 8, column (b). All others, enter amount from line 8, column (b). If zero or less, enter -0- here; skip lines 11 through 21, and enter -0- on line 22 . . . . . . . . . . . . . . . 10b 1,588 Income limitation (see instructions): • Individuals, estates, and trusts. Enter your adjusted gross income figured without the All others. Enter your taxable income figured without the domestic production activities 11 1,588 12 Enter the smaller of line 10b or line 11. If zero or less, enter -0- here; skip lines 13 through 21, 12 1,018 **13** Enter 9% of line 12 . . . . . . . . . . . . . . . . 13 1,018 **14a** Enter the smaller of line 10a or line 12 . . . . . . . . . . 14a **b** Reduction for oil-related qualified production activities income. Multiply line 14a by 3% . . . 14b

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 37712F

Form **8903** (Rev. 12-2018)

1,018

1,011

1,017

1,017

1,017

10.117

11,133

15

16

17 18

19

20

21

23

24

20 Estates and trusts, subtract line 19 from line 18. All others, enter amount from line 18 . . .

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

## **8903**

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

### **Domestic Production Activities Deduction**

► Attach to your tax return.

► Go to www.irs.gov/Form8903 for instructions and the latest information.

OMB No. 1545-1984

Attachment Sequence No. **143** 

Identifying number Name(s) as shown on return Total Forms Filed = 11,708 Note: Do not complete column (a), unless you have oil-related (a) (b) production activities. Enter amounts for all activities in column (b), All activities Oil-related production activities including oil-related production activities. Domestic production gross receipts (DPGR) . . . . . . . . . 18,166,674 2 Allocable cost of goods sold. If you are using the small business simplified overall method, skip lines 2 and 3 . . . . . . . . 2 17,961,332 3 Enter deductions and losses allocable to DPGR (see instructions) . 3 28,426 If you are using the small business simplified overall method, enter the amount of cost of goods sold and other deductions or losses you ratably apportion to DPGR. All others, skip line 4 . . . . . . . . 4 17,989,758 5 176,916 6 Qualified production activities income from estates, trusts, and certain partnerships and S corporations (see instructions) . . . 7 Add lines 6 and 7. Estates and trusts, go to line 9. All others, skip line 8 Amount allocated to beneficiaries of the estate or trust (see 9 10a Oil-related qualified production activities income. Estates and trusts, subtract line 9, column (a), from line 8, column (a). All others, enter amount from line 8, column (a). If zero or less, enter -0- here . 10a **b Qualified production activities income.** Estates and trusts, subtract line 9, column (b), from line 8, column (b). All others, enter amount from line 8, column (b). If zero or less, enter -0- here; skip lines 11 through 21, and enter -0- on line 22 . . . . . . . . . . . . . . . 10b 229,604 11 Income limitation (see instructions): • Individuals, estates, and trusts. Enter your adjusted gross income figured without the • All others. Enter your taxable income figured without the domestic production activities 11 110.731 12 Enter the smaller of line 10b or line 11. If zero or less, enter -0- here; skip lines 13 through 21, 12 54,458 4.901 14a Enter the smaller of line 10a or line 12 . . . . . . . . . . . **b** Reduction for oil-related qualified production activities income. Multiply line 14a by 3% . . . 14b 15 4,897 16 902,443 17 Form W-2 wages from estates, trusts, and certain partnerships and S corporations (see 17 18 Add lines 16 and 17. Estates and trusts, go to line 19. All others, skip line 19 and go to line 20 18 **19** Amount allocated to beneficiaries of the estate or trust (see instructions) . . . . . . . . . 19 20 Estates and trusts, subtract line 19 from line 18. All others, enter amount from line 18 . . . 922,555 **21** Form W-2 wage limitation. Enter 50% of line 20 . . . . . . . . . . . . . . . . . . 461,277 21 4,236 22 23 Domestic production activities deduction from cooperatives. Enter deduction from Form 23 63,377 24 25 Domestic production activities deduction. Combine lines 22 through 24 and enter the result here and on the applicable line of your return (see instructions) . . . . . . . . . . . . . . . . 67,614

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 37712F

Form **8903** (Rev. 12-2018)

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

Form **8910** 

(Rev. January 2021)

Department of the Treasury Internal Revenue Service

### **Alternative Motor Vehicle Credit**

OMB No. 1545-1998

► Attach to your tax return.

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

Attachment Sequence No. **68** 

Name(s) shown on return

Total Forms Filed = 18,503

#### Note:

14

15

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

**Tentative Credit** 

	a separate column for each vehicle. If you need more columns, use conal Forms 8910 and include the totals on lines 7 and 11.	!	(a) Vehicle 1		(b) Vehicle 2	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	18,197		*	
	If you did NOT use your vehicle for business or investment poration, skip Part II and go to Part III. All others, go to Part		oses and did not hav	e a cı	redit from a partne	rship (
Par	Credit for Business/Investment Use Part of Vehicle	е				
5	Business/investment use percentage (see instructions)	5		%		0,
6	Multiply line 4 by line 5	6				
7	Add columns (a) and (b) on line 6			7	3,030	
8	Alternative motor vehicle credit from partnerships and S corpora	tions	(see instructions) .	8	*	
9	<b>Business/investment use part of credit.</b> Add lines 7 and 8. Partr stop here and report this amount on Schedule K. All others, report Part III, line 1r	this	amount on Form 3800,	9	3,333	
Part	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	10				
11	Add columns (a) and (b) on line 10			11	18,186	
12	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18	3.		12		
13	Personal credits from Form 1040, 1040-SR, or 1040-NR (see ins	struct	ions)	13	2,690	

Subtract line 13 from line 12. If zero or less, enter -0- and stop here. You cannot claim the

**Personal use part of credit.** Enter the **smaller** of line 11 or line 14 here and on Schedule 3 (Form 1040), line 6. Check box **c** on that line and enter "8910" in the space next to that

14

15

Cat. No. 37720F

18,499

18,183

box. If line 14 is smaller than line 11, see instructions

personal use part of the credit . . . . . . . . . . . .

Form **8910** 

(Rev. January 2021)

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

**Tentative Credit** 

Total Forms Filed = 18,503

Identifying number

#### Note:

Part I

13

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

Use a separate column for each vehicle. If you need more columns, use additional Forms 8910 and include the totals on lines 7 and 11.			(a) Vehicle 1	(b) Vehicle 2
1	Year, make, and model of vehicle	1		

3 Enter date vehicle was placed in service (MM/DD/YYYY) . .

Vehicle identification number (see instructions)

Tentative credit (see instructions for amount to enter) . . . 4

99,746 \*

**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.

5 001	polation, skip rait if and go to rait iii. All others, go to rait i					
Pari	II Credit for Business/Investment Use Part of Vehicle	е				
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	4,864			
8	Alternative motor vehicle credit from partnerships and S corpora	8	*			
9	<b>Business/investment use part of credit.</b> Add lines 7 and 8. Partnestop here and report this amount on Schedule K. All others, report Part III, line 1r	this	amount on Form 3800,	9	5,449	
Part					5,1.0	
10	If you skipped Part II, enter the amount from line 4. If you completed Part II, subtract line 6 from line 4	10				
11	Add columns (a) and (b) on line 10			11	94,925	
12	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 18	3.		12		

Subtract line 13 from line 12. If zero or less, enter -0- and stop here. You cannot claim the

Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)

13

14

7,827

460,334

48.221

personal use part of the credit . . . . . .

Form **8911**(Rev. February 2021)
Department of the Treasury

Internal Revenue Service

### **Alternative Fuel Vehicle Refueling Property Credit**

► Attach to your tax return.

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

OMB No. 1545-0123

Attachment Sequence No. **151** 

Name(s) shown on return Identifying number Total Forms Filed = 30.420 **Total Cost of Refueling Property** Part I Total cost of qualified alternative fuel vehicle refueling property placed in service during the tax 30.412 Credit for Business/Investment Use Part of Refueling Property 2 Business/investment use part (see instructions) . . . . . . . . . . . 2,353 3 3 Section 179 expense deduction (see instructions) 4 4 5 5 6 6 Maximum business/investment use part of credit (see instructions) . . . 3,623 Enter the **smaller** of line 5 or line 6 . . . . . . . . . . . . . . . . 7 7 2,353 8 Alternative fuel vehicle refueling property credit from partnerships and S corporations (see Business/investment use part of credit. Add lines 7 and 8. Partnerships and S corporations, 9 stop here and report this amount on Schedule K. All others, report this amount on Form 3800, Part 2,361 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 Multiply line 10 by 30% (0.30) . . . . . . . . . . . . . . . . 11 12 12 Maximum personal use part of credit (see instructions) . . . 13 Enter the **smaller** of line 11 or line 12 . . . 13 28.524 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: 15a Certain allowable credits (see instructions) . . . . . . . 15b 15c 18,260 Net regular tax. Subtract line 15c from line 14. If zero or less, enter -0- and stop here; do not file 16 16 28.523 17 Tentative minimum tax (see instructions): • Individuals. Enter the amount from Form 6251, line 9. 17 • Other filers. Enter the tentative minimum tax from your alternative minimum tax form or schedule. Subtract line 17 from line 16. If zero or less, stop here; do not file this form unless you are 18 28,519 19 Personal use part of credit. Enter the smaller of line 13 or line 18 here and on Schedule 3 (Form 1040), line 6; or the appropriate line of your return. If line 18 is smaller than line 13, see instructions 28.519

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 37721Q

Form **8911** (Rev. 2-2021)

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

Form **8911** 

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

### **Alternative Fuel Vehicle Refueling Property Credit**

► Attach to your tax return.

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

OMB No. 1545-0123

Attachment Sequence No. **151** 

Name(s) shown on return Identifying number Total Forms Filed = 30.420 **Total Cost of Refueling Property** Part I Total cost of qualified alternative fuel vehicle refueling property placed in service during the tax 63.852 **Credit for Business/Investment Use Part of Refueling Property** 2 Business/investment use part (see instructions) . . . . . . . . . . . 23,537 3 Section 179 expense deduction (see instructions) 3 4 4 5 6 Maximum business/investment use part of credit (see instructions) . . . 95,840 7 6,511 8 Alternative fuel vehicle refueling property credit from partnerships and S corporations (see 8 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 6,756 Part III **Credit for Personal Use Part of Refueling Property** 10 Subtract line 2 from line 1. If zero, stop here; do not file this form unless you are claiming a credit 10 11 11 12 12 Maximum personal use part of credit (see instructions) . . . . 13 Enter the **smaller** of line 11 or line 12 . . . . 13 10,181 14 Regular tax before credits: • Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. 14 • Other filers. Enter the regular tax before credits from your return. 15 Credits that reduce regular tax before the alternative fuel vehicle refueling property credit: 15a 15b 15c 74,417 Net regular tax. Subtract line 15c from line 14. If zero or less, enter -0- and stop here; do not file 16 16 2.099.458 17 Tentative minimum tax (see instructions): • Individuals. Enter the amount from Form 6251, line 9. 17 1,694,373 • 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 18 405,132 19 Personal use part of credit. Enter the smaller of line 13 or line 18 here and on Schedule 3 (Form 1040), line 6; or the appropriate line of your return. If line 18 is smaller than line 13, see instructions 9.801

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 37721Q

Form **8911** (Rev. 2-2021)

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

Form **8917**(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

#### **Tuition and Fees Deduction**

► Attach to Form 1040 or 1040-SR.

► Go to www.irs.gov/Form8917 for the latest information.

OMB No. 1545-0074

Attachment Sequence No. **60** 

Name(s) shown on return

Total Forms Filed =

1,303,172

Your social security number



Use this form for qualified tuition and fees paid in 2018, 2019, or 2020, and later years if legislation extends the deduction (see instructions). File a separate Form 8917 for each year after 2017 for which you qualify to take the deduction.

You can't take both an education credit from Form 8863 and the tuition and fees deduction from this form for the same student for the same tax year.

#### Before you begin:

- ✓ To see if you qualify for this deduction, see Who Can Take the Deduction in the instructions below.
- ✓ If you file Form 1040 or 1040-SR, figure any write-in adjustments.
  - For 2018: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040), line 36.
  - For 2019: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22.
  - For 2020 and later years: Figure any write-in adjustments for Schedule 1 (Form 1040 or 1040-SR); see the Instructions for Forms 1040 and 1040-SR.

1	(a) Student's nan	(a) Student's name (as shown on page 1 of your tax return)			(b) Student's			(c) Adjusted qualified expenses (see		
	First name	Last name			1 of your tax return)					
		Student 1		1	,297,865			1,297,865	$\perp$	-
		Student 2		+	23,979			23,979 *	I	0
		Student 3	Student 4		<del>  *</del>	0			+	-
2	Add the amounts on line 1	, column (c), and enter the to		•			2	1,297,865		_
3	Enter the amount from you	our <b>"total income"</b> line of l	Form 1040 or	3						
4	(Form 1040), lines 23 throu	of the amounts on your 201 ugh 33, plus any write-in adju next to Schedule 1 (Form 10	ustments you							
	Schedule 1 (Form 1040 or	er the total of the amounts or 1040-SR), lines 10 through 2 entered on the dotted line ne 1040-SR), line 22.	20, plus any							
	• For later years: See www references above for 2019	v.irs.gov/Form8917 to find on the have changed		4						
5		3.* If the result is more than eduction for tuition and fees		O if	married filin	g jointly),	5	1,284,146 +/	· <u>-</u>	_
	*If you're filing Form 2555, 2555-EZ, or 4563, or you're excluding income from Puerto Rico, see Effect of the Amount of Your Income on the Amount of Your Deduction in Pub. 970 to figure the amount to enter on line 5.									
6	Tuition and fees deduct filing jointly)?	ion. Is the amount on line s	5 more than \$65,0	000	(\$130,000 i	f married				
	Yes. Enter the smaller	of line 2, or \$2,000.								
	No. Enter the smaller	of line 2, or \$4,000.		•			6	1,294,534		-

**Also enter** this amount on line 21 of the 2019 and 2020 Schedule 1 (Form 1040 or 1040-SR), or line 34 of the 2018 Schedule 1 (Form 1040). See *www.irs.gov/Form8917* to find out if the line references above for 2019 have changed.

Form **8917**(Rev. January 2020)
Department of the Treasury Internal Revenue Service

### **Tuition and Fees Deduction**

► Attach to Form 1040 or 1040-SR. ► Go to www.irs.gov/Form8917 for the latest information.

1,303,172

OMB No. 1545-0074

Attachment Sequence No. **60** 

Name(s) shown on return

Total Forms Filed =

Your social security number



Use this form for qualified tuition and fees paid in 2018, 2019, or 2020, and later years if legislation extends the deduction (see instructions). File a separate Form 8917 for each year after 2017 for which you qualify to take the deduction.

You can't take both an education credit from Form 8863 and the tuition and fees deduction from this form for the same student for the same tax year.

#### Before you begin:

- ✓ To see if you qualify for this deduction, see Who Can Take the Deduction in the instructions below.
- ✓ If you file Form 1040 or 1040-SR, figure any write-in adjustments.
  - For 2018: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040), line 36.
  - For 2019: Figure any write-in adjustments to be entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22.
  - For 2020 and later years: Figure any write-in adjustments for Schedule 1 (Form 1040 or 1040-SR); see the Instructions for Forms 1040 and 1040-SR

1	(a) Student's nam	e (as shown on page 1 of your	tax return)	(b) Student's social se number (as shown on		(c) Adjusted qualified expenses (see
	First name	Last name		1 of your tax retur		instructions)
		Student 1				10,817,699
		Student 2	1			— 229,926 <del> </del> — *
		Student 3	Student 4			
2	Add the amounts on line 1	, column (c), and enter the t			2	11,048,293
3	Enter the amount from you	our "total income" line of	Form 1040 or			
•	(Form 1040), lines 23 throu	of the amounts on your 201 igh 33, plus any write-in adj next to Schedule 1 (Form 1	ustments you			
	Schedule 1 (Form 1040 or	r the total of the amounts o 1040-SR), lines 10 through ntered on the dotted line no 1040-SR), line 22.	20, plus any			
	• For later years: See www references above for 2019	.irs.gov/Form8917 to find of have changed	out if the line			
,		.* If the result is more than eduction for tuition and fees		if married filing jointly	, 5	71,717,832 +/-
		, 2555-EZ, or 4563, or you' our Income on the Amount o				
i	Tuition and fees deductifiling jointly)?	on. Is the amount on line	5 more than \$65,00	00 (\$130,000 if married	d	
	Yes. Enter the smaller	of line 2, or \$2,000.			6	2 476 420
	No. Enter the smaller	of line 2, or \$4,000.				3,176,138
	Also enter this amount or	line 21 of the 2019 and 20	120 Schedule 1 (For	m 1040 or 1040-SR) o	r	

line 34 of the 2018 Schedule 1 (Form 1040). See www.irs.gov/Form8917 to find out if the line

references above for 2019 have changed.

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

Name(s) shown on return

### **Qualified Plug-in Electric Drive Motor Vehicle Credit**

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

► Attach to your tax return.

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

Sequence | Identifying number |

OMB No. 1545-2137

Attachment Sequence No. **69** 

	Total Forms Filed = 63,847				
	this form to claim the credit for certain plug-in electric veh m the credit for certain alternative motor vehicles on Form				
Part	Tentative Credit				
Use a	separate column for each vehicle. If you need more colum dditional Forms 8936 and include the totals on lines 12 and	nns, d 19.	(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			
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		%	9
С	Tentative credit. Multiply line 4a by line 4b	4c			
Part	Credit for Business/Investment Use Part of	Vehic	cle		
5	Business/investment use percentage (see instructions)	5		%	9
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	2,50
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	851
13	Qualified plug-in electric drive motor vehicle credit from p (see instructions)		· ·	13	1,233
14	Business/investment use part of credit. Add lines S corporations, stop here and report this amount on Sch				

2,083

2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form **8936** 

### **Qualified Plug-in Electric Drive Motor Vehicle Credit**

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

OMB No. 1545-2137

*	anuary 2021)	Micidaling &dailined 1 Wo-W		•	CiCS	' F	
	nent of the Treasury Revenue Service	► Go to www.irs.gov/Form8936 fo			ation.		Attachment Sequence No. <b>69</b>
Name(s	s) shown on return	Total Forms Filed = 63,847				Identifying n	ımber
	this form to cla	im the credit for certain plug-in electric veh certain alternative motor vehicles on Form					
Part	Tentativ	ve Credit					
		n for each vehicle. If you need more colum 8936 and include the totals on lines 12 and		(a) Vehicle 1		(b	Vehicle 2
1	Year, make, ar	nd model of vehicle	1				
2	Vehicle identifi	cation number (see instructions)	2				
3	Enter date veh	icle was placed in service (MM/DD/YYYY)	3				
4a		s a two-wheeled vehicle, enter the cost of the vehicle has at least four wheels, see	4a				
b	Phase-out per	centage (see instructions)	4b		%		%
С	Tentative cred	it. Multiply line 4a by line 4b	4c				
	Part II and go to I	use your vehicle for business or investment Part III. All others, go to Part II.  or Business/Investment Use Part of			lit froi	m a partners	hip or S corporation,
5	Business/inves	stment use percentage (see instructions)	5		%		%
6		c by line 5. If the vehicle has at least four lines 7 through 10 blank and go to line 11	6				
7	Section 179 ex	xpense deduction (see instructions) .	7				
8	Subtract line 7	from line 6	8				
9	Multiply line 8	by 10% (0.10)	9				
10	Maximum cred	dit per vehicle	10	2	2,500		2,500
11	amount from li	ith four or more wheels, enter the ne 6. If the vehicle is a two-wheeled the smaller of line 9 or line 10	11				
12	Add columns (	(a) and (b) on line 11			12	3,430	
13	Qualified plug- (see instruction	in electric drive motor vehicle credit from p		·	13	3,529	

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

Business/investment use part of credit. Add lines 12 and 13. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, report this 

14

6,958

Form 8936 (Rev. 1-2021) Page **2** 

Part	Credit for Personal Use Part of Vehicle				
			(a) Vehicle 1		(b) Vehicle 2
15	If you skipped Part II, enter the amount from line 4c. If you completed Part II, subtract line 6 from line 4c. If the vehicle has at least four wheels, leave lines 16 and 17 blank and go to line 18	15			
16	Multiply line 15 by 10% (0.10)	16			
17	Maximum credit per vehicle. If you skipped Part II, enter \$2,500. If you completed Part II, subtract line 11 from line 10	17			
18	For vehicles with four or more wheels, enter the amount from line 15. If the vehicle is a two-wheeled vehicle, enter the smaller of line 16 or line 17	18			
19	Add columns (a) and (b) on line 18			19	62,142
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	24,503
22	Subtract line 21 from line 20			22	62,477
23	Personal use part of credit. Enter the smaller of lin Schedule 3 (Form 1040), line 6. Check box <b>c</b> on that line next to that box. If line 22 is smaller than line 19, see instr	and e	enter "8936" in the space	23	61,793

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

## 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8936 (Rev. 1-2021) Page 2 Part III **Credit for Personal Use Part of Vehicle** (a) Vehicle 1 (b) Vehicle 2 If you skipped Part II, enter the amount from line 4c. If 15 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 17 18 For vehicles with four or more wheels, enter the amount from line 15. If the vehicle is a two-wheeled vehicle, enter the smaller of line 16 or line 17 . . . 18 19 Add columns (a) and (b) on line 18 19 367,134 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 61,135 22 Subtract line 21 from line 20 22 4,743,868 23 Personal use part of credit. Enter the smaller of line 19 or line 22 here and on Schedule 3 (Form 1040), line 6. Check box c on that line and enter "8936" in the space

23

313,118

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

next to that box. If line 22 is smaller than line 19, see instructions . . . . . . . .

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 2020 or tax year beginning , 2020, and ending , 20

lf	you have attached conti	nuation statements, ch	eck here 🗌 Number	of continuation stateme	ents
1	Name(s) shown on return	Total Forms Filed	= 521,878	2 Taxpayer identifica	ation number (TIN)
3	Type of filer  a   Specified individue	ual <b>b</b> ☐ Partno	ership <b>c</b> Cor	rporation <b>d</b>	Frust
4	If you checked box 3a, ski the partnership or corpora	p this line 4. If you checke tion. If you checked box 3	d box 3b or 3c, enter the nar d, enter the name and TIN of if you have more than one s	me and TIN of the specified for the specified in the specified person who is	individual who closely holds s a current beneficiary of the
Par		and Custodial Accor	ınts Summary	2 1111	
1					<b>•</b>
3	Number of custodial acc	rounts (reported in Part \	)		•
4	Maximum value of all cu		· · · · · · · · · · ·		
_ <del>-</del> 5			closed during the tax year?		
Par			closed during the tax year:		.   res no
1					
2					
3			the tax year?		
Pari	Summary of Tay	Itame Attributable to	Specified Foreign Fin	ancial Accete (coo inct	ructions)
rail	Sullillary of Tax				
	(a) Asset category	(b) Tax item	(c) Amount reported on form or schedule	(d) Form and line	reported
	Familia dan aktawa	- 1-1		(a) Form and line	(e) Schedule and line
	Foreign deposit and	a Interest	\$ 211.812		
1	custodial accounts	<b>b</b> Dividends	\$ 77,473		<del> </del>
		c Royalties	\$ 78		
		<b>d</b> Other income	\$ 9,461		
		e Gains (losses)	\$ 29,468		
		f Deductions	\$ 2,225		
		g Credits	\$ 5,855		
2	Other foreign assets	a Interest	\$ 21,356		
		<b>b</b> Dividends	\$ 23,490		
		<b>c</b> Royalties	\$ 2,012		
		<b>d</b> Other income	\$ 36,703		
		e Gains (losses)	\$ 20.397		
		f Deductions	\$ 7,624		
		<b>g</b> Credits	\$ 5,384		
Part	IV Excepted Specif	fied Foreign Financia	I Assets (see instruction	ns)	
not n	reported specified foreigr eed to include these asset umber of Forms 3520	s on Form 8938 for the t	or more of the following fo ax year. oer of Forms 3520-A		such forms filed. You do
4. N	umber of Forms 8621	5. Numb	per of Forms 8865		
Par	<b>Detailed Informat</b> (see instructions)	tion for Each Foreign	Deposit and Custodia	Account Included in	the Part I Summary
If you	ı have more than one acco	unt to report in Part V, a	ttach a continuation statem	nent for each additional ac	count. See instructions.
1	Type of account	☐ Deposit ☐ □	Custodial	2 Account number or oth	er designation
3	,	a ☐ Account opened of c ☐ Account jointly own	-	ccount closed during tax yo tax item reported in Part I	/ear II with respect to this asset
4	Maximum value of accor	unt during tax year			. \$
5			convert the value of the ac		. 🗌 Yes 🗌 No
6	If you answered "Yes" to				
	(a) Foreign currency in vaccount is maintained	which (b) Foreig	n currency exchange rate to U.S. dollars		ange rate used if not from U.S. t's Bureau of the Fiscal Service

Form **8938** 

Department of the Treasury Internal Revenue Service

### **Statement of Specified Foreign Financial Assets**

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

, 2020, and ending , 20

OMB No. 1545-2195
2020
Attachment Sequence No. <b>938</b>

Interna	al Revenue Service For	calendar year 2020 or tax year	beginning , 2020	, and ending	, 20	Sequence No. 938		
lf	you have attached co	ontinuation statements, c	heck here 🗌 Numbe	er of continuation	statements			
1	Name(s) shown on re	eturn  Total Forms Filed	d = 521,878	2 Taxpayer	dentification	number (TIN)		
3	Type of filer		_					
-	a Specified ind			orporation	<b>d</b> Trust			
4	the partnership or cor trust. (See instructions	a, skip this line 4. If you check poration. If you checked box s for definitions and what to d	3d, enter the name and TIN	of the specified per specified individua	son who is a cu	urrent beneficiary of the		
Do	a Name	asit and Ovetadial Asse	ta C	<b>b</b> TIN				
Par		osit and Custodial Acco				1		
1	•	accounts (reported in Part V	,			# 206 266 E40		
2		Il deposit accounts				\$ 306,366,549		
<u>3</u>		accounts (reported in Part II custodial accounts				\$ 94,511,910		
5		posit or custodial accounts	closed during the tay year			\$ 94,511,910   ☐ Yes		
Par		n Assets Summary	closed during the tax year	<u> </u>				
1		ssets (reported in Part VI) .						
2		Il assets (reported in Part VI				\$ 221,041,192		
3	Were any foreign as	sets acquired or sold during	the tax vear?			Yes No		
Par		Tax Items Attributable						
			(c) Amount reported or		Where repor			
	(a) Asset category	(b) Tax item	form or schedule	(d) Form an		Schedule and line		
1	Foreign deposit and	a Interest	\$ 1,265,415	(4)	- (3	o, concadio and into		
	custodial accounts	<b>b</b> Dividends	\$ 1,730,785					
		<b>c</b> Royalties	\$ 13,898					
		<b>d</b> Other income	\$ 365,221					
		e Gains (losses)	\$ 1,573,582					
		f Deductions	\$ 33.600					
		g Credits	\$ 70,807					
2	Other foreign assets	a Interest	\$ 628,481					
	J	<b>b</b> Dividends	\$ 2,444,792					
		c Royalties	\$ 39,204					
		<b>d</b> Other income	\$ 2,833,957					
		e Gains (losses)	\$ 11,817,969					
		f Deductions	\$ 354,650					
		g Credits	\$ 182,199					
Part	IV Excepted Sp	ecified Foreign Financi	al Assets (see instruction	ons)				
-		reign financial assets on one ssets on Form 8938 for the	•	orms, enter the nu	ımber of such	forms filed. You do		
	lumber of Forms 3520	2. Num	nber of Forms 3520-A	3.	Number of Fo	rms 5471		
4. N	lumber of Forms 8621	5. Num	nber of Forms 8865					
Par	t V Detailed Infor	mation for Each Foreig	n Deposit and Custodi	al Account Incl	uded in the l	Part I Summary		
If voi		account to report in Part V,	attach a continuation state	ment for each add		nt. See instructions		
1	Type of account	☐ Deposit ☐	Custodial	2 Account numb				
3	3 Check all that apply a ☐ Account opened during tax year c ☐ Account jointly owned with spouse d ☐ No tax item reported in Part III with respect to this asset							
4	Maximum value of a	ccount during tax year	<u> </u>	· • • • • •		\$		
5		n currency exchange rate to				☐ Yes ☐ No		
6		s" to line 5, complete all tha						
	(a) Foreign currency account is maintaine	/ in which (b) Forei	gn currency exchange rate rt to U.S. dollars			rate used if not from U.S reau of the Fiscal Service		
For P	aperwork Reduction Ac	t Notice, see the separate ins	structions.	Cat. No. 37753A		Form <b>8938</b> (2020)		

Form **8959** 

Department of the Treasury Internal Revenue Service

#### **Additional Medicare Tax**

 $\blacktriangleright$  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

2020
Attachment Sequence No. 71

Name(s) shown on return

Total Forms Filed = 6 077 015

Your social security number

	10tai 1 0tilis 1 lieu – 0,077,013				
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	5,825,917		
2	Unreported tips from Form 4137, line 6	2	*		
3	Wages from Form 8919, line 6	3	2,335		
4	Add lines 1 through 3	4	5,825,974		
5	Enter the following amount for your filing status:				
	Married filing jointly				
	Married filing separately	_	C 0CE 202		
_	Single, Head of household, or Qualifying widow(er) \$200,000	5	6,065,302		4 0 40 000
6	Subtract line 5 from line 4. If zero or less, enter -0			6	4,649,268
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009).			_	4 6 4 7 0 0 0
Dow	Part II			7	4,647,289
Part					
8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you		1,414,723		
_	had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)	8	, , -		
9	Enter the following amount for your filing status:  Married filing jointly				
	Married filing separately				
	Single, Head of household, or Qualifying widow(er) \$200,000	9	5,920,688		
10	Enter the amount from line 4	10			
11	Subtract line 10 from line 9. If zero or less, enter -0	11	1,409,447		
12	Subtract line 11 from line 8. If zero or less, enter -0			12	1,194,312
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0				
10	go to Part III			13	1,193,979
Part					
14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14		•		
	(see instructions)	14	2,139		
15	Enter the following amount for your filing status:				
	Married filing jointly				
	Married filing separately				
	Single, Head of household, or Qualifying widow(er) \$200,000	15	5,862,685		
16	Subtract line 15 from line 14. If zero or less, enter -0			16	455
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply lin				
	Enter here and go to Part IV			17	455
Part					
18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040),				5,169,751
ъ.	(Form 1040-PR or 1040-SS filers, see instructions), and go to Part V			18	3,109,731
Part					
19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form		- 040 44-		
00	W-2, enter the total of the amounts from box 6	19	5,819,447		
20	Enter the amount from line 1	20			
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax	04	E 024 2E2		
00	withholding on Medicare wages	21	5,824,253		
22	Subtract line 21 from line 19. If zero or less, enter -0 This is your Add withholding on Medicare wages			22	4,339,513
00				22	4,339,313
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation 14 (see instructions)			23	1,770
04	· · · · · · · · · · · · · · · · · · ·			20	-,
24					
	<b>Total Additional Medicare Tax withholding.</b> Add lines 22 and 23. Also included federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25				

Form **8959** (2020)

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.

OMB No. 1545-0074 Sequence No. 71

▶ Go to www.irs.gov/Form8959 for instructions and the latest information. Name(s) shown on return Your social security number Total Forms Filed = 6,077,015 Part I Additional Medicare Tax on Medicare Wages Medicare wages and tips from Form W-2, box 5. If you have more than one 2,312,044,627 Form W-2, enter the total of the amounts from box 5 . . . . . . . . . 1 2 2 \* 3 3 100,715 4 2.312.157.369 Enter the following amount for your filing status: 1,429,016,682 Single, Head of household, or Qualifying widow(er) . . . . . \$200,000 1,042,440,920 6 6 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to 7 9.381.992 **Additional Medicare Tax on Self-Employment Income** Part II Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you 307,278,747 had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.) . . . 8 9 Enter the following amount for your filing status: Married filing separately . . . . . . . . . . . . . . . . . . \$125,000 1,395,600,210 Single, Head of household, or Qualifying widow(er) . . . . \$200,000 9 10 10 160.999.734 Subtract line 10 from line 9. If zero or less, enter -0- . . . . . . . . . . . . . 11 219,904,446 12 Subtract line 11 from line 8. If zero or less, enter -0- . . . . . . . . . . . . 12 13 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and 1.979.138 13 Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation 14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 548,100 14 15 Enter the following amount for your filing status: 15 Single, Head of household, or Qualifying widow(er) . . . . \$200,000 193,949 16 16 17 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). 1,746 17 **Total Additional Medicare Tax** Part IV Add lines 7. 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 8 (check box a) 11,362,876 (Form 1040-PR or 1040-SS filers, see instructions), and go to Part V . . . . . . . . . . . . . . . . 18 Part V Withholding Reconciliation Medicare tax withheld from Form W-2, box 6. If you have more than one Form 42.144.008 W-2, enter the total of the amounts from box 6 . . . . . . . . . . . . . . . . . 19 20 20 Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax 21 21 33,524,650 22 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax 22 8,672,909 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box

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 

23

24

7.991

23

24

Form **8960** 

Department of the Treasury Internal Revenue Service (99)

# Net Investment Income Tax—Individuals, Estates, and Trusts Attach to your tax return.

► Attach to your tax return.

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

OMB No. 1545-2227

2020

Attachment
Sequence No. 72

Name(s) shown on your tax return

Total Forms Filed = 6,827,426

Your social security number or EIN

Section 6013(g) election (see instructions)

Section 6013(h) election (see instructions)

Boxes checked = 42,006

Part	Section 6013(h) election (see instructions) Box	es che	cked = *	- alsa d =	- 42 006
	Regulations section 1.1411-10(g) election (see in			1 1	
	Taxable interest (see instructions)			1	5,581,058
	Ordinary dividends (see instructions)			2	4,838,674
	Annuities (see instructions)	. · ·		3	120,283
	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a	2,879,830		
	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b	1,936,199		
	Combine lines 4a and 4b			4c	1,719,837
5a	Net gain or loss from disposition of property (see instructions)	5a	4,920,941		
	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b	464,922		
	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c	17,920		
d	Combine lines 5a through 5c	·		5d	4,818,159
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)			6	15,352
7	Other modifications to investment income (see instructions)			7	540,006
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			8	6,311,909
Part I	Investment Expenses Allocable to Investment Income and Modif	icatio	ns		
9a	Investment interest expenses (see instructions)	9a	490,049		
b	State, local, and foreign income tax (see instructions)	9b	2,247,204		
С	Miscellaneous investment expenses (see instructions)	9с	173,024		
d	Add lines 9a, 9b, and 9c	·		9d	2,422,477
10	Additional modifications (see instructions)			10	68,754
11	Total deductions and modifications. Add lines 9d and 10			11	2,454,531
Part I	Tax Computation				
	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, Estates and trusts, complete lines 18a–21. If zero or less, enter -0			12	5,791,749
	Modified adjusted gross income (see instructions)	13	6,825,878		
	Threshold based on filing status (see instructions)	14	6,827,426		
	Subtract line 14 from line 13. If zero or less, enter -0	15	6,788,106		
16	Enter the smaller of line 12 or line 15	·		16	5,759,674
	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). En on your tax return (see instructions)			17	5,691,866
	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 18a (see instructions). If zero or less, enter -0-	18c			
	Adjusted gross income (see instructions)	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			
	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)	038). I	Enter here and	21	
			<u> </u>		- 0000

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

Cat. No. 59474M

Form **8960** (2020)

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

8960

Department of the Treasury Internal Revenue Service (99)

### **Net Investment Income Tax— Individuals, Estates, and Trusts**

► Attach to your tax return.

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

▶ Go to www.irs.gov/Form8960 for instructions and the latest information. Name(s) shown on your tax return Your social security number or EIN 6,827,426 Total Forms Filed = Part I Investment Income Section 6013(q) election (see instructions) ☐ Section 6013(h) election (see instructions) Regulations section 1.1411-10(g) election (see instructions) 1 72,683,412 2 2 212,307,474 3 3 4,590,651 Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see 4a 4a 763,353,105 Adjustment for net income or loss derived in the ordinary course of a nonsection 1411 trade or business (see instructions) . . . . . . . . . . . . . . . 4b -697,597,544 С 65,755,561 989,661,695 Net gain or loss from disposition of property (see instructions) . . . . . 5a 5a Net gain or loss from disposition of property that is not subject to net -218,436,421 5b Adjustment from disposition of partnership interest or S corporation stock (see -47,488,530 d 5d 723,736,745 Adjustments to investment income for certain CFCs and PFICs (see instructions) . . . 6 6 1,593,285 7 4,470,620 7 1,085,137,749 8 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7. . . . . Part II Investment Expenses Allocable to Investment Income and Modifications 15,177,169 9a 5,801,996 1,257,786 С Miscellaneous investment expenses (see instructions) . . . . . . . . . 9c 9d 22,236,950 10 10 459,200 Total deductions and modifications. Add lines 9d and 10 . . . . . . . . . . . . . . . . 22,696,150 11 11 Part III Tax Computation 12 Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. 1,074,441,275 12 Individuals: 13 Modified adjusted gross income (see instructions) . . . . . . 4,488,666,280 Threshold based on filing status (see instructions) . . . . . . . . . . . . 14 1,599,373,502 15 Subtract line 14 from line 13. If zero or less, enter -0- . . . . . . . . . **15** | 2,896,966,500 930.486.669 16 16 Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include 17 17 35,358,499 **Estates and Trusts:** 18a Deductions for distributions of net investment income and deductions under 18b Undistributed net investment income. Subtract line 18b from 18a (see instructions). 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 20 20 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and 21 

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

Cat. No. 59474M

Form **8960** (2020)

<sup>\*</sup> Data not shown because of the small number of sample returns on which they are based.

8962

**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 Total Forms Filed = 4,630,532

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** 4,630,532 Tax family size. Enter your tax family size. See instructions . Modified AGI. Enter your modified AGI. See instructions 4,597,484 2a 2a b Enter the total of your dependents' modified AGI. See instructions 2b 25,185 4.480.539 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 appropriate box for the federal poverty table used. a Alaska b Hawaii c Other 48 states and DC 4,630,532 4 5 Household income as a percentage of federal poverty line (see instructions) % Did you enter 401% on line 5? (See instructions if you entered less than 100%.) **No.** Continue to line 7. Yes. You are not eligible to take the PTC. If advance payment of the PTC was made, see the instructions for how to report your excess advance PTC repayment amount. Applicable figure. Using your line 5 percentage, locate your "applicable figure" on the table in the instructions 4,442,557 7 7 Annual contribution amount. Multiply line 3 by **b** Monthly contribution amount. Divide line 8a 8a 4,289,996 line 7. Round to nearest whole dollar amount by 12. Round to nearest whole dollar amount 4.283.943 Part II Premium Tax Credit Claim and Reconciliation of Advance Payment of Premium Tax Credit 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. 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 premium assistance SLCSP premium credit allowed payment of PTC (Form(s) premiums (Form(s) contribution amount (Form(s) 1095-A, Calculation (subtract (c) from (b); if 1095-A, line 33A) 1095-A, line 33C) (line 8a) (smaller of (a) or (d)) line 33B) zero or less, enter -0-) 2,227,155 2.195.682 2.219.781 2,142,915 2.233.013 11 Annual Totals 2,143,916 (c) Monthly (a) Monthly enrollment (f) Monthly advance (b) Monthly applicable (d) Monthly maximum contribution amount (e) Monthly premium tax SLCSP premium payment of PTC (Form(s) Monthly premiums (Form(s) premium assistance (amount from line 8b credit allowed Calculation 1095-A, lines 21-32, (Form(s) 1095-A, lines (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) 1,403,268 1,486,575 12 January 1,427,128 1,514,224 13 February 14 March 1.420.782 1,506,547 1,430,358 1,506,449 15 April 1,440,346 1,521,101 16 May 1,437,382 1,511,049 17 June 1.447.970 1.518.720 18 July 1.443.870 1,511,218 19 August 20 1,431,497 1,504,750 September 1,402,713 1,467,394 21 October 1,381,173 1,445,155 22 November 1,316,888 1,386,540 23 Total premium tax credit. Enter the amount from line 11(e) or add lines 12(e) through 23(e) and enter the total here 4,152,618 24 24 4,364,853 25 Advance payment of PTC. Enter the amount from line 11(f) or add lines 12(f) through 23(f) and enter the total here 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 8. If line 24 equals line 25, enter -0-. Stop here. If line 25 is greater than line 24, 2,223,362 26 Part III Repayment of Excess Advance Payment of the Premium Tax Credit 27 Excess advance payment of PTC. If line 25 is greater than line 24, subtract line 24 from line 25. Enter the difference here 1,748,223 28 Repayment limitation (see instructions) 28 1,594,839 29 Excess advance premium tax credit repayment. Enter the smaller of line 27 or line 28 here and on Schedule 2 1,748,217 29 (Form 1040), line 2

Form **8962** 

**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** 

rvarric	snown on your i		al Forms Filed =	4,630,532	1001 3001	ar security number				
You	cannot take the F	PTC if your filing status	is married filing separately	y unless you qualify for a	n exception. See instructi	ons. If you qualify, ch	eck the	e box ▶□		
Par	t Annı	ual and Monthly	Contribution Am	nount						
1			mily size. See instructi				1	9,087		
2a	•	•	ed AGI. See instruction		2a	138,329,106				
b		•	ts' modified AGI. See		2b	183,780				
3			ounts on lines 2a and 2				3	148,215,693		
4			ederal poverty line amo		1-2, or 1-3. See instruc Hawaii <b>c</b> ☐ Other 4		4			
5	Household in		5	%						
6			See instructions if you		0%.)					
	No. Cor	ntinue to line 7.								
			take the PTC. If adva		PTC was made, see the	e instructions for				
7	Applicable fi	igure. Using your line	5 percentage, locate ye	our "applicable figure'	on the table in the inst	ructions	7	2,336,760		
8a	Annual contrib	oution amount. Multiply li			nthly contribution amou	nt. Divide line 8a				
		to nearest whole dollar a			2. Round to nearest who		8b	732,175		
Par	Pren	nium Tax Credit	Claim and Reco	nciliation of Adv	ance Payment of	Premium Tax	Cre	dit		
9					se the alternative calcu	_	-			
			•		n for Year of Marriage.		line 1	10.		
10			e if you can use line 11	•	_	7 <b></b>		10.00.0		
		ontinue to line 11. Co ntinue to line 24.	ompute your annual P	IC. Then skip lines 1	2–23			es 12–23. Computed continue to line 24.		
	410 001		(b) Annual applicable		(d) Annual maximum					
	Annual	(a) Annual enrollment premiums (Form(s)	SLCSP premium	(c) Annual contribution amount	premium assistance	(e) Annual premium credit allowed		(f) Annual advance payment of PTC (Form(s)		
С	alculation	1095-A, line 33A)	(Form(s) 1095-A, line 33B)	(line 8a)	(subtract (c) from (b); if zero or less, enter -0-)	(smaller of (a) or (c		1095-A, line 33C)		
11	Annual Totals	23,151,864	24,557,735	4,229,606	20,518,630	19,481,654		19,728,556		
	Allitual Totals		<i>, ,</i>	(c) Monthly		13,401,034	•	· · · · · · · · · · · · · · · · · · ·		
	Monthly	(a) Monthly enrollment premiums (Form(s)	(b) Monthly applicable SLCSP premium	contribution amount (amount from line 8b	(d) Monthly maximum premium assistance	(e) Monthly premium	n tax	(f) Monthly advance payment of PTC (Form(s)		
	alculation	1095-A, lines 21–32,			(subtract (c) from (b); if	credit allowed (smaller of (a) or (d))		1095-A, lines 21–32,		
		column A)	21–32, column B)	or alternative marriage monthly calculation)	zero or less, enter -0-)	(Sinaler of (a) of (c	ا(ال	column C)		
12	January					1,069,872		1,100,480		
13	February					1,094,102		1,129,569		
14	March					1,095,344		1,125,214		
15	April					1,087,361		1,110,223		
16	May					1,087,956		1,114,996		
17	June					1,080,721		1,107,327		
18	July					1,087,473		1,118,522		
19	August					1,081,021		1,112,554		
20	September					1,064,339		1,095,093		
21	October					1,047,596		1,071,240		
22	November					1,018,625		1,045,181		
23	December					985,846		1,012,347		
24	Total premiu	um tax credit. Enter t	he amount from line 1	1(e) or add lines 12(e)	through 23(e) and ente	er the total here	24	32,175,312		
25	Advance pa	yment of PTC. Enter	the amount from line	11(f) or add lines 12(f)	through 23(f) and ente	r the total here	25	32,797,208		
26					m line 24. Enter the dif					
-	on Schedul	e 3 (Form 1040), line	8. If line 24 equals lir	ne 25, enter -0 Stop	here. If line 25 is great	ater than line 24,				
					<u> </u>		26	2,149,299		
	Part III Repayment of Excess Advance Payment of the Premium Tax Credit									
27			· ·	•	24 from line 25. Enter th		27	2,771,824		
28	. ,	limitation (see instru	•				28	1,762,275		
29					27 or line 28 here and			4 700 F00		
	(Form 1040)				<u> </u>		29	1,709,599 Form <b>8962</b> (2020		
ror P	aperwork Red	auction Act Notice,	see your tax return in	istructions.	Cat. No. 377	′84Z		rorm <b>090∠</b> (2020		

Form 8962 (2020) 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 (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 applied to monthly Percentage amounts Allocation 3 (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 Allocation 4 (a) Policy Number (Form 1095-A, line 2) (b) SSN of other taxpayer (c) Allocation start month (d) Allocation stop month

	Allocation percentage applied to monthly amounts	(e) Premium Percentage	(f) SLCSP Percentage	(g) Advance Payment of the PTC Percentage		
34	Have you completed all police	cy amount allocations?				

☐ **Yes.** Multiply the amounts on Form 1095-A by the allocation percentages entered by policy. Add all allocated policy amounts and non-allocated 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.

35	Alternative entries for your SSN	(a)	Alternative family size	٠,	Alternative monthly stribution amount	(c)	Alternative start month	(d)	Alternative stop month
36	Alternative entries for your spouse's SSN	(a)	Alternative family size		Alternative monthly stribution amount	(c)	Alternative start month	(d)	Alternative stop month

Form **8962** (2020)

## 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8	3962 (2020)								Page <b>2</b>		
Part		f Policy Amoun	ts								
	lete the following inform	ation for up to four p	oolicy am	ount allocations	s. See instruc	ctions	s for allocation details				
	ation 1	1005 1 11 0)							1.0		
30	(a) Policy Number (Fo	orm 1095-A, line 2)	( <b>b</b> ) SS	SN of other taxpa	ayer		(c) Allocation start n	nonth	(d) Allocation stop month		
	Allocation percentag applied to monthly amounts	<b>e (e)</b> Pre	mium Pe	ercentage			dvance Payment of the PTC Percentage				
Alloc	ation 2										
31	(a) Policy Number (Fo	orm 1095-A, line 2)	<b>(b)</b> SS	SN of other taxpa	ayer		(c) Allocation start m	nonth	(d) Allocation stop month		
	Allocation percentag applied to monthly amounts	<b>e</b> (e) Pre	mium Pe	ercentage	<b>(f)</b> S	LCSI	P Percentage	(g) A	dvance Payment of the PTC Percentage		
ΔΙΙος	ation 3										
32	(a) Policy Number (Fo	orm 1095-A, line 2)	<b>(b)</b> SS	SN of other taxpa	ayer		(c) Allocation start m	nonth	(d) Allocation stop month		
	Allocation percentage applied to monthly amounts		mium Pe	m Percentage (f) S		SLCSP Percentage (g		(g) A	(g) Advance Payment of the PTC Percentage		
Alloc	ation 4										
33	(a) Policy Number (Fo	orm 1095-A, line 2)	<b>(b)</b> SS	SN of other taxpa	ayer		(c) Allocation start m	nonth	(d) Allocation stop month		
Allocation percentage applied to monthly amounts		<b>e (e)</b> Pre	(e) Premium Percentage		(f) SLCSP Percentage		(g) Advance Payment of the PTC Percentage				
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 non-allocated 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.										
		ctions to report add	'		cations.						
			ive calcu	ılation for year c				election	, see the instructions for line 9.		
35	Alternative entries for your SSN	(a) Alternative fan	nily size	<b>(b)</b> Alternative contribution an	, ,	(c)	Alternative start mon	th	(d) Alternative stop month		
36	Alternative entries for your spouse's SSN	(a) Alternative fan	nily size	(b) Alternative contribution an		(c)	Alternative start mon	th	(d) Alternative stop month		
		<u> </u>							Form <b>8962</b> (2020)		

### 2020 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Form **8990**(Rev. May 2020)
Department of the Treasury
Internal Revenue Service

## Limitation on Business Interest Expense Under Section 163(j)

► Attach to your tax return.

▶ Go to www.irs.gov/Form8990 for instructions and the latest information.

OMB No. 1545-0123

Taxpay	er name(s) shown on tax return  Total Forms Filed = 140,958		Identific	cation r	number
If Forr	m 8990 relates to an information return for a foreign entity (for example, Form 5471	I), enter:			
Name	of foreign entity ►				
Emplo	oyer identification number, if any ►				
	ence ID number				
Par					
	is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B new yer is a partner or shareholder of a pass-through entity subject to section 163(j).	ed to be complete	ed befor	e Part	I when the
Secti	on I—Business Interest Expense				
1	Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation	1 58,82	2		
2	Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership)	2 5,799	9		
3	Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h))	3 30,54			
4	Floor plan financing interest expense. See instructions	4 74			
5	Total business interest expense. Add lines 1 through 4			5	88,480
Secti	on II – Adjusted Taxable Income			,	•
	Taxable Income				
6	Taxable income. See instructions			6	77,647
	Additions (adjustments to be made if amounts are taken into				
7	Any item of loss or deduction that is not properly allocable to a trade or business of the taxpayer. See instructions	7 972			
8	Any business interest expense not from a pass-through entity. See instructions	7 972 8 55,30			
9	Amount of any net operating loss deduction under section 172	9 1,351			
10	Amount of any qualified business income deduction allowed under section 199A	10 36,51			
11	Deduction allowable for depreciation, amortization, or depletion attributable to a trade or business. See instructions	11 9,608	8		
12	Amount of any loss or deduction items from a pass-through entity. See instructions	12 19,53	33		
13	Other additions. See instructions	13 1,532	2		
14	Total current year partner's excess taxable income (Schedule A, line 44, column (f))	14 54,06	66		
15	Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c))	15 6,98	1		
<u>16</u>	Total. Add lines 7 through 15		. ▶	16	136,917
	Reductions (adjustments to be made if amounts are taken in	to account on lir	ne 6)		
17	Any item of income or gain that is not properly allocable to a trade or business of the taxpayer. See instructions	17 ( 1,18	<b>30</b> )		
18	Any business interest income not from a pass-through entity. See instructions	18 ( 194	, )		
19	Amount of any income or gain items from a pass-through entity. See instructions	19 ( 18,67	<b>'4</b>		
20	Other reductions. See instructions	20 ( 101			
21	<b>Total.</b> Combine lines 17 through 20			21	( 18,852 )
22	Adjusted taxable income. Combine lines 6, 16, and 21. (If zero or less, enter -0-	)	. ▶	22	131,871

(Rev. May 2020) Department of the Treasury

# Limitation on Business Interest Expense Under Section 163(j)

► Attach to your tax return.

OMB No. 1545-0123

	I Revenue Service	► Go to www.irs.gov/Form8990 for instructions and tr	ne latest	intormation		Ш_	
Taxpay	yer name(s) shown o	Total Forms Filed = 140,958			Identifi	cation ı	number
If For	m 8990 relates t	to an information return for a foreign entity (for example, Form	5471), є	enter:	·		
	e of foreign entit						
		on number, if any					
	ence ID number						
		tation of Allowable Business Interest Expense					
		y all taxpayers subject to section 163(j). Schedule A and Schedule or shareholder of a pass-through entity subject to section 163(j).	B need	to be comple	eted befo	re Part	t I when the
Sect	ion I—Busine	ss Interest Expense					
1		business interest expense (not including floor plan financiase), before the section 163(j) limitation	-	1 2,875	,868		
2		usiness interest expense carryforwards from prior years. (Departnership)		2 405,	837		
3		ess business interest expense treated as paid or accrued Schedule A, line 44, column (h))	3	891,			
4		ancing interest expense. See instructions		1 26,0	098		
5	Total busines	ss interest expense. Add lines 1 through 4			. ▶	5	4,199,251
Sect	ion II—Adjust	ted Taxable Income					
		Taxable Income					
6	Taxable inco	me. See instructions				6	130,125,497
		Additions (adjustments to be made if amounts are take	n into a	ccount on li	ne 6)		
7		loss or deduction that is not properly allocable to a trade te taxpayer. See instructions		7 2,936	796		
8		interest expense not from a pass-through entity. See instruction		_,		1 1	
9	-	y net operating loss deduction under section 172		-,,,,,,	_	1	
10	Amount of an	ny qualified business income deduction allowed under sect					
11		owable for depreciation, amortization, or depletion attributable siness. See instructions		1 3,459	,152		
12	instructions	ny loss or deduction items from a pass-through entity. S		29,72	1,693		
13	Other addition	ns. See instructions	. 1	3 2,628	3,691		
14	Total current	year partner's excess taxable income (Schedule A, line		4 49,97	3,953		
15	(Schedule B, I	year S corporation shareholder's excess taxable inco line 46, column (c))	. 1		3,935		
16	Total. Add line	es 7 through 15			<u> ▶</u>	16	156,244,541
		Reductions (adjustments to be made if amounts are tak	en into	account on	line 6)		
17		come or gain that is not properly allocable to a trade or businer. See instructions		7 ( 11,56	88,091		
18		interest income not from a pass-through entity. See instruction			,213	,	
19	Amount of a	any income or gain items from a pass-through entity.	See		5,416		
20		ons. See instructions		0 ( 3,079		j	
21		ne lines 17 through 20			▶	21	( 78,794,688
22		able income. Combine lines 6, 16, and 21. (If zero or less, enter	er -0)			22	208,483,155
For Pa			o. 37814C			Forr	m <b>8990</b> (Rev. 5-2020

### 2020 Line Item Estimates—All figures are estimates based on samples.

Number of returns filed for selected lines Form 8990 (Rev. 5-2020) Page 2 Section III—Business Interest Income 23 Current year business interest income. See instructions . . . . . . . . . 934 24 Excess business interest income from pass-through entities (total of Schedule A, line 44, column (g), and Schedule B, line 46, column (d)) . . . . . . . . 24 11,688 25 25 12,299 Section IV – 163(j) Limitation Calculations **Limitation on Business Interest Expense** 26 Multiply adjusted taxable income (line 22) by the applicable percentage. See 130,060 26 27 27 28 **Total.** Add lines 26, 27, and 28 . . . . . 29 29 131,539 Allowable Business Interest Expense 30 Total current year business interest expense deduction. See instructions. 80,880 Carryforward Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0-.) . . . 31 17,700 **Partnership Pass-Through Items** Part II 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-.) . . . . . . . . . . . 33 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 . **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 S Corporation Pass-Through Items Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information. **Excess Taxable Income** 

38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)	38	
39	Subtract line 38 from line 26. (If zero or less, enter -0)	39	
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0)	40	•
41	Excess taxable income. Multiply line 40 by line 22	41	

#### **Excess Business Interest Income**

40	Francisco interesting and Orderst the same of the state of order the order of the state of the s		
42	<b>Excess business interest income.</b> Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less,		
	enter -())	42	

Form **8990** (Rev. 5-2020)

## 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8	3990 (Rev. 5-2020)				Page <b>2</b>
Sect	ion III—Business Interest Income				
23	Current year business interest income. See instructions	23	426,780		
24	Excess business interest income from pass-through entities (total of Schedule		,		
	A, line 44, column (g), and Schedule B, line 46, column (d))	24	6,265,554		
25	Total. Add lines 23 and 24		•	25	6,692,333
Sect	ion IV—163(j) Limitation Calculations				
	Limitation on Business Interest Expens	е			
26	Multiply adjusted taxable income (line 22) by the applicable percentage. See				_
	instructions	26	102,701,733		
27	Business interest income (line 25)	27			
28	Floor plan financing interest expense (line 4)	28			400 400 404
_29	<b>Total.</b> Add lines 26, 27, and 28		<u> ▶</u>	29	109,420,164
	Allowable Business Interest Expense				
30	Total current year business interest expense deduction. See instructions			30	3,525,906
	Carryforward				
31	Disallowed business interest expense. Subtract line 29 from line 5. (If zero or I	ess, e	nter -0)	31	693,311
Par					
	II is only completed by a partnership that is subject to section 163(j). The partnersh		ns below are alloc	cated	to the partners
and	are not carried forward by the partnership. See the instructions for more information	n.			
	Excess Business Interest Expense				
32	Excess business interest expense. Enter amount from line 31			32	_
	Excess Taxable Income (If you entered an amount on line 32, s	kip lin	es 33 through 37.	)	
33	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)			33	
34	Subtract line 33 from line 26. (If zero or less, enter -0)			34	
35	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-	) .		35	
36	Excess taxable income. Multiply line 35 by line 22			36	
	Excess Business Interest Income				
37	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from li	ne 25	. (If zero or less		
	enter -0)		•	37	
Part					
	III is only completed by S corporations that are subject to section 163(j). The S corporate the instructions for more information.	ion ite	ms below are alloc	ated to	the shareholders.
	Excess Taxable Income				
38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0)			38	
39	Subtract line 38 from line 26. (If zero or less, enter -0)			39	
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-			40	
41	Excess taxable income. Multiply line 40 by line 22	•		41	
	Excess Business Interest Income				
42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from li	ne 25	. (If zero or less		
	enter -0)			42	
	·				n <b>8990</b> (Rev. 5-2020)

SCHEDULE A

(a) Name of partnership

#### 2020 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Excess Business Interest Expense

Summary of Partner's Section 163(j) Excess Items

(b) EIN

Any taxpayer that owns an interest in a partnership subject to section 163(j) should complete Schedule A before completing Part I.

Form 8990 (Rev. 5-2020) Page 3

(f) Current year

excess

(g) Current year

	(a) Name of partnership	( <b>b)</b> EIN	(c) Current year	(d) Prior year carryforward	(e) Total ((c) plus (d))	excess taxable income	excess business interest income	as paid or accrued (see instructions)	expense carryforward ((e) minus (h))
43									
44	Total ▶								
SCHE	DULE B Summary of S	Corporation S	hareholder's E	xcess Taxable	Income and Ex	cess Business I	nterest Income		
	xpayer that is required to complicompleting Part I.	ete Part I and is a	shareholder in an S	S corporation that I	nas excess taxable i	income or excess b	usiness interest inc	ome should comple	ete Schedule B
	<b>(a)</b> Nan	ne of S corporation			(b) EIN	(c) Current yea taxable inc		(d) Current y business inte	
45									
46				•					

Form **8990** (Rev. 5-2020)

(h) Excess business

interest expense treated excess business interest

Form **8990** (Rev. 5-2020)

## 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 89	90 (Rev. 5-2020)									Page 3
SCH	EDULE A Summary of	Partner's Sect	ion 163(j) Exces	s Items						
Any ta	xpayer that owns an interest in a	a partnership subje	ect to section 163(j)	should com	nplete S	chedule A befo	re completing Part I.			
			Exces	ss Business Int	terest Exp	ense	(f) Current year	(g) Current year	(h) Excess business	(i) Current year
	(a) Name of partnership	(b) EIN	(c) Current year	(d) Pric		(e) Total ((c) plus (d))	excess taxable income	excess business interest income	as paid or accrued (see instructions)	excess business interest expense carryforward ((e) minus (h))
43										
44	Total ▶									
	EDULE B Summary of S		hareholder's Ex	cess Tax	able Ir	ncome and E	xcess Business	Interest Income	e	
	expayer that is required to complete completing Part I.	lete Part I and is a	shareholder in an S	corporation	n that ha	as excess taxab	le income or excess	business interest in	come should comple	ete Schedule B
	<b>(a)</b> Nai	me of S corporation			(	(b) EIN	(c) Current y taxable i		(d) Current y business inte	
45										

2020 Line Item Estimates—All figures are estimates based on samples.

Number of returns filed for selected lines

Form **8992** 

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

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

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

OMB No. 1545-0123

Attachment Sequence No. **992** 

Name c	f person filing this return  Total Forms Filed = 14,920	A Identifying nu	umber
Name o	f U.S. shareholder	<b>B</b> Identifying nu	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 Form 8992, Schedule A, line 1, column (e).		1 9,341
2	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.  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 Form 8992, Schedule A, line 1, column (f).		2 ( 8,581 )
•	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 Part	Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here		3   14,878
1	Calculation of Global Intangible Low-Taxed Income (GILTI)  Net CFC Tested Income. Enter amount from Part I, line 3		1 7.816
2	Deemed Tangible Income Return (DTIR)		1 7,816
-	If the U.S. shareholder is not a member of a U.S. consolidated group, multiply the total from Form 8992, Schedule A, line 1, column (g), by 10% (0.10).	[	2 5,782
	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.		
3a	Sum of Pro Rata Share of Tested Interest Expense		
	3 17	359	
<b>.</b>	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 Form 8992, Schedule A, line 1, column (i).	905	
	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 1,044
	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	Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0		4 5,385
	GILTI. Subtract line 4 from line 1		5 7,809
For Pa	perwork Reduction Act Notice, see separate instructions. Cat. No. 37816Y		Form <b>8992</b> (Rev. 12-2020)

-orm **8992** 

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

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

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

OMB No. 1545-0123

Attachment Sequence No. **992** 

Rame of U.S. shareholder   Net Controlled Foreign Corporation (CFC) Tested Income	Name o	f person filing this return  Total Forms Filed = 14,920	A Identifying	number
If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g), that pertains to the U.S. shareholder.  Sum of Pro Rata Share of Net Tested Loss If the U.S. shareholder is a member of a U.S. consolidated group, enter the amount from Schedule B (Form 8992), Part III, column (f), that pertains to the U.S. shareholder.  Set If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, 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.  Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here.  Deemed Tangible Income Return (DTIR)  If the U.S. shareholder is not a member of a U.S. consolidated group, multiply the total from Form 8992, Schedule A, 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 (g), by 10% (0.10).  Sum of Pro Rata Share of Tested Interest Expense If the U.S. shareholder is an ember of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the amount from	Name o	f U.S. shareholder	<b>B</b> Identifying	number
If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g), that pertains to the U.S. shareholder.  Sum of Pro Rata Share of Net Tested Loss If the U.S. shareholder is a member of a U.S. consolidated group, enter the amount from Schedule B (Form 8992), Part III, column (f), that pertains to the U.S. shareholder.  Set If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, 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.  Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here.  Deemed Tangible Income Return (DTIR)  If the U.S. shareholder is not a member of a U.S. consolidated group, multiply the total from Form 8992, Schedule A, 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 (g), by 10% (0.10).  Sum of Pro Rata Share of Tested Interest Expense If the U.S. shareholder is an ember of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the amount from	Part	Net Controlled Foreign Corporation (CFC) Tested Income		
from Form 8992, Schedule A, 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 III, column (f).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, 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 III, 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 III, 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  3 811,530  Part III Calculation of Global Intangible Low-Taxed Income (GILTI)  1 Net CFC Tested Income. Enter amount from Part I, line 3  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 Form 8992, Schedule A, 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), Exhedule A, line 1, column (g).  If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated g				
from Form 8992, Schedule A, 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 III, column (f).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, 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 III, 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 III, 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  3 811,530  Part III Calculation of Global Intangible Low-Taxed Income (GILTI)  1 Net CFC Tested Income. Enter amount from Part I, line 3  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 Form 8992, Schedule A, 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), Exhedule A, line 1, column (g).  If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g).  If the U.S. shareholder is not a member of a U.S. consolidated g		If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total		
from Schedule B (Form 8992), Part II, column (c), that pertains to the U.S. shareholder.  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 Form 8992, Schedule A, 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.  Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here  1				1 4,342,049
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 Form 8992, Schedule A, 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.  3 Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here  3 Retail Calculation of Global Intangible Low-Taxed Income (GILTI)  1 Net CFC Tested Income. Enter amount from Part I, line 3		If the U.S. shareholder is a member of a U.S. consolidated group, enter the amount		
If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, 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.  Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here  Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here  1 Net CFC Tested Income. Enter amount from Part I, line 3  Deemed Tangible Income Return (DTIR)  If the U.S. shareholder is not a member of a U.S. consolidated group, multiply the total from Form 8992, Schedule A, 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 (g), that pertains to the U.S. shareholder.  Sum of Pro Rata Share of Tested Interest Expense If the U.S. shareholder is not 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 an ember of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g). If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g). If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (g). If the U.S. shareholder is not a member of a U.S. consolidated group, eave line 3b blank.  C Specified Interest Expense If the U.S. shareholder is not a member of a U.S. consolidated group, subtract line 3b from line 3a. If zero or less, enter -0.  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.  Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0.  4 595,731  5 GILTI. Subtract line 4 from line 1. If zero or less, enter -0.				
from Form 8992, Schedule A, 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.  Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here 3 811,530  Part II Calculation of Global Intangible Low-Taxed Income (GILTI)  Net CFC Tested Income. Enter amount from Part I, line 3 1 3,446,098  Deemed Tangible Income Return (DTIR)  If the U.S. shareholder is not a member of a U.S. consolidated group, multiply the total from Form 8992, Schedule A, 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.  3a Sum of Pro Rata Share of Tested Interest Expense  If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (i).  If the U.S. shareholder is a member of a U.S. consolidated group, leave line 3b 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, leave line 3b blank.  c Specified Interest Expense  If the U.S. shareholder is a member of a U.S. consolidated group, leave line 3b blank.  c Specified Interest Expense  If the U.S. shareholder is a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, column (i).  If the U.S. shareholder is 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 (in), that pertains to the U.S. shareholder.  A Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0  4 595,731  5 GILTI. Subtract line 4 from line 1	2			
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from Schedule B (Form 8992), Part II, column (f), that pertains to the U.S. shareholder.  Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here		• • • • • • • • • • • • • • • • • • • •		2 (3,330,313)
Net CFC Tested Income. Combine lines 1 and 2. If zero or less, stop here   3   811,530				
Part II Calculation of Global Intangible Low-Taxed Income (GILTI)  1  Net CFC Tested Income. Enter amount from Part I, line 3	3			3 811,530
Deemed Tangible Income Return (DTIR)  If the U.S. shareholder is not a member of a U.S. consolidated group, multiply the total from Form 8992, Schedule A, 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.  3a Sum of Pro Rata Share of Tested Interest Expense If the U.S. shareholder is not a member of a U.S. consolidated group, enter the total from Form 8992, Schedule A, line 1, 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 Form 8992, Schedule A, line 1, column (i). If the U.S. shareholder is a member of a U.S. consolidated group, elave line 3b blank.  c Specified Interest Expense If the U.S. shareholder is not a member of a U.S. consolidated group, subtract line 3b from line 3a. If zero or less, enter -0 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 Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0-	Part	·		,
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If the U.S. shareholder is a member of a U.S. consolidated group, leave line 3b blank.  c Specified Interest Expense If the U.S. shareholder is not a member of a U.S. consolidated group, subtract line 3b from line 3a. If zero or less, enter -0  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 Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0			67,876	
c Specified Interest Expense If the U.S. shareholder is not a member of a U.S. consolidated group, subtract line 3b from line 3a. If zero or less, enter -0  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.  Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0			•	1
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.  Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0		group, leave line 3b blank.		
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.  4 Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0	С	·		
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 Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0		- · · · · · · · · · · · · · · · · · · ·		470.004
from Schedule B (Form 8992), Part II, column (m), that pertains to the U.S. shareholder.  4 Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0				30 1/6,331
4       Net DTIR. Subtract line 3c from line 2. If zero or less, enter -0-       4       595,731         5       GILTI. Subtract line 4 from line 1       5       2,850,367				
5 GILTI. Subtract line 4 from line 1	4	, and the state of		4 595,731
2000		,		
	For Pa	perwork Reduction Act Notice, see separate instructions. Cat. No. 37816Y		Form <b>8992</b> (Rev. 12-2020)

### 2020 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Form **8994**(Rev. January 2021)
Department of the Treasury Internal Revenue Service

### **Employer Credit for Paid Family and Medical Leave**

► Attach to your tax return.

► Go to www.irs.gov/Form8994 for instructions and the latest information.

OMB No. 1545-2282

Attachment Sequence No. **994** 

Name(s) shown on return

Total Forms Filed = 6,692

_			
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	5,290
•			4.400
2	Employer credit for paid family and medical leave from partnerships and S corporations (see instructions)	2	1,402
	Add lines 1 and 0. Darksayahina and C. saynayahina wanayahina ayaayah ah Cahadula K. All athawa		
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	6,692

#### 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

(Rev. January 2021)

#### **Employer Credit for Paid Family and Medical Leave**

► Attach to your tax return.

OMB No. 1545-2282

Attachment

26,943

Form **8994** (Rev. 1-2021)

	ernal Revenue Service • Go to www.irs.gov/Form8994 for instructions and the latest information.			Sequence No. <b>994</b>
Name(s	) shown on return	Total Forms Filed = 6,692	ldentifyir	g number
A	employee(s) to	a written policy providing for at least 2 weeks of annual paid family and medical whom wages are paid (prorated for any part-time employees)? See instructions.  Do not file Form 8994 (see instructions for an exception that may apply to a partnersh		
В	employee? Se	ten policy provide paid family and medical leave of at least 50% of the wages not e instructions.  Do not file Form 8994 (see instructions for an exception that may apply to a partnersh	•	
С	☐ Yes.	mily and medical leave to at least one qualifying employee during the tax year? See in Do not file Form 8994 (see instructions for an exception that may apply to a partnersh		
D	in your written  Yes.	ed at least one qualifying employee who was not covered by the Family and Medical policy and otherwise comply with "non-interference" language? See instructions.  Do not file Form 8994 (see instructions for an exception that may apply to a partnersh		
1	qualifying emp Leave Credit	paid family and medical leave credit figured for wages paid during your tax year to you oloyee(s) while on family and medical leave (if you use the Paid Family and Medical Worksheet, the total from column (d)). See instructions for the adjustment you mudeduction for salaries and wages	cal ust	26,427
2	Employer cred	it for paid family and medical leave from partnerships and S corporations (see instruction	ns) 2	517
3	Add lines 1 ar	nd 2. Partnerships and S corporations, report this amount on Schedule K. All othe	ers,	

Cat. No. 37804G

report this amount on Form 3800, Part III, line 4j . . . . . . . . . . . . . . .

For Paperwork Reduction Act Notice, see separate instructions.

Department of the Treasury Internal Revenue Service

#### **Qualified Business Income Deduction Simplified Computation**

► Attach to your tax return.

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

OMB No. 1545-2294 Sequence No. **55** 

Name(s) shown on return

Total Forms 8995 Filed =

35,951,550

Total Forms 8995A Filed =

Your taxpayer identification number 3,426,224

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 \$163,300 (\$326,600 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 tenter income or income	
ii Number of forms with trade, business, or aggregations = 31,253,266  iii Number of forms with aggregation business operations = 127,091  iv  v  2 Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	acc)
Number of forms with trade, business, or aggregations = 31,253,266    Number of forms with aggregation business operations = 127,091    Number of forms with aggregation business operations = 127,091    Number of forms with aggregation business operations = 127,091    Vullet	J55)
Number of forms with trade, business, or aggregations = 31,253,266    Number of forms with aggregation business operations = 127,091    Number of forms with aggregation business operations = 127,091    Number of forms with aggregation business operations = 127,091    Number of forms with aggregation business operations = 127,091    Vumber of forms with trade, business operations = 31,253,266    Vumber of forms with trade, business operations = 31,253,266    Vumber of forms with trade, business operations = 127,091    Vumber of forms with trade, business operations = 31,253,266    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business operations = 127,091    Vumber of forms with aggregation business income of (loss)	
Number of forms with aggregation business operations = 127,091  iv  2 Total qualified business income or (loss). Combine lines 1i through 1v, column (c)  3 Qualified business net (loss) carryforward from the prior year.  4 Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-  5 Qualified business income component. Multiply line 4 by 20% (0.20)  6 Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)  7 Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year.  8 Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-  8 Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-  9 REIT and PTP component. Multiply line 8 by 20% (0.20)  10 Qualified business income deduction before the income limitation. Add lines 5 and 9  10 27,05	
Total qualified business income or (loss). Combine lines 1i through 1v, column (c)  Qualified business net (loss) carryforward from the prior year.  Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0- Qualified Business income component. Multiply line 4 by 20% (0.20)  Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)  Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year.  Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-  REIT and PTP component. Multiply line 8 by 20% (0.20)  Qualified business income deduction before the income limitation. Add lines 5 and 9  2 28,285,796 2 3 (8,296,696 ) 4 18,114,319 5 19,61	
Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	
Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	
Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	
Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	
column (c)	
column (c)	
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)	
<ul> <li>Qualified business income component. Multiply line 4 by 20% (0.20)</li> <li>Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)</li> <li>Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year</li> <li>Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-</li> <li>REIT and PTP component. Multiply line 8 by 20% (0.20)</li> <li>Qualified business income deduction before the income limitation. Add lines 5 and 9</li> <li>19,61</li> <li>10,399,097</li> <li>216,552</li> <li>8</li> <li>10,244,652</li> <li>9</li> <li>9,460</li> <li>27,08</li> </ul>	
Gualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	
(see instructions)  7 Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	,491
7 Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	
year	
Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	
or less, enter -0-  9 REIT and PTP component. Multiply line 8 by 20% (0.20)	
9 REIT and PTP component. Multiply line 8 by 20% (0.20)	
10 Qualified business income deduction before the income limitation. Add lines 5 and 9	996
	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
<b>12</b> Net capital gain (see instructions)	
13 Subtract line 12 from line 11. If zero or less, enter -0	
	6,796
15 Qualified business income deduction. Enter the lesser of line 10 or line 14. Also enter this amount on	
	3,624
	<b>6,002</b> )
17 Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than	004
,	<b>261</b> )

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

Cat. No. 37806C

Form **8995** 

Qualified Business Income Deduction Simplified Computation

2020

OMB No. 1545-2294

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

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

Attachment Sequence No. **55** 

Name(s) shown on return

Total Forms 8995 Filed =

35,951,550

Total Forms 8995A Filed =

Your taxpayer identification number 3,426,224

**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 \$163,300 (\$326,600 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	Number of forms with trade, business, or aggregations = 31,253,266			
iii	Number of forms with aggregation business operations = 127,091			
iv				
v				_
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2 236,816,334		
3	Qualified business net (loss) carryforward from the prior year	3 (333,072,080)	-	
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4 433,152,474	-	
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5	184,709,747
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6 10,720,911		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior		-	
	year	7 ( 2,895,012 )		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0	8 11,648,302		
9			9	2,329,563
10	Qualified business income deduction before the income limitation. Add lines 5 and		10	187,039,309
11	Taxable income before qualified business income deduction	11 4,975,906,961		, ,
12		<b>12</b> 1,089,639,579		
13	Subtract line 12 from line 11. If zero or less, enter -0			
14	Income limitation. Multiply line 13 by 20% (0.20)	14	796,650,743	
15	Qualified business income deduction. Enter the lesser of line 10 or line 14. Also et the applicable line of your return	15	165,628,961	
16	the applicable line of your return	16	( <b>553,064,695</b> )	
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 ar	10	( 000,00 <del>4</del> ,090 )	
.,	zero, enter -0	17	( 3,820,955 )	
For Pri	·	No. 37806C		Form <b>8995</b> (2020)

Name

2020 Line Item Estimates—All figures are estimates based on samples.

Number of returns filed for selected lines

Form **8997** 

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

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

► Attach to your tax return.

OMB No. 1545-0123

2020
Attachment
Sequence No. 997

Department of the Treasury Internal Revenue Service

Total Forms Filed = 19,520

Tax identification number (see instructions)

		estment Holdings Due to Deferrals Prior to Begining last year's ending QOF investment holdings, attach			
(a)	(b)	(c) Description of QOF investment (for example, 100 shares or 25% interest)	(d)	Deferred gain held in QOF	
Qualified Opportunity Fund (QOF) EIN	Date QOF investment acquired (MM/DD/YYYY)		Special gain code	(e) Amount of short-term deferred gain remaining in QOF	(f) Amount of long-term deferred gain remaining in QOF
				2,628	11,791
<b>1</b> Enter t	he totals, if any	, from continuation sheet	. ▶		
2 Enter t	he totals from	columns (e) and (f)	. ▶		
Part II C	(b)	ear Capital Gains Deferred by Investing in QOF	(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)	Special gain code	(e) Amount of short-term deferred gain remaining in QOF	(f) Amount of long-term deferred gain remaining in QOF
				3,585	8,177
<b>1</b> Enter t	he totals, if any	, from continuation sheet	. ▶		
2 Enter t	he totals from o	columns (e) and (f). See instructions for reporting on Form 8	949 ▶		
		Rules Regarding the Waiver of Certain Treaty Bene			
Yes. Y	ou may not elec	expayer whose tax year began after March 13, 2020? See in to defer tax on an eligible gain by investing in a QOF unless y estion and go to Part III.			
•		taxpayer, see the instructions to determine if you are requi- grafter December 21, 2017, and all tax years that began after			·
Waiver of To		s on Future Inclusions by a Foreign Eligible Taxpa	yer (fo	r Tax Years Begi	nning After
Do you here	eby irrevocably deferring by in	waive any benefits available under an applicable U.S. incorvesting in a QOF from being subject to federal income tax			
	ou may not elec	ral of the eligible gain in Part II and on Form 8949. t to defer tax on an eligible gain by investing in a QOF. <b>Do</b> I or on Form 8949.	not rep	ort the deferral of	any otherwise

### **Initial and Annual Statement of** Qualified Opportunity Fund (QOF) Investments • Go to www.irs.gov/Form8997 for the latest information.

► Attach to your tax return.

OMB No. 1545-0123 Attachment Sequence No. **997** 

Department of the Treasury Internal Revenue Service

Name

Total Forms Filed = 19,520

Tax identification number (see instructions)

Part I T	otal QOF Inversifier on the contract of the co	estment Holdings Due to Deferrals Prior to Begini last year's ending QOF investment holdings, attach	<b>ning of</b> explan	Tax Year ation.		
(a)	(b)	(c)	(d)	Deferred gain held in QOF		
Qualified Opportunity Fund (QOF) EIN	Date QOF investment acquired (MM/DD/YYYY)	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	
				1,361,222	13,029,963	
		, from continuation sheet	. ▶			
2 Enter t	Current Tax Y	ear Capital Gains Deferred by Investing in QOF	. ▶			
(a)	(b)	(c)	(d)	Deferred gain in	nvested 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)	Special gain code	(e) Amount of short-term deferred gain remaining in QOF	(f) Amount of long-term deferred gain remaining in QOF	
				1,202,023	7,551,034	
<b>1</b> Enter t	he totals, if any	, from continuation sheet	. •			
		olumns (e) and (f). See instructions for reporting on Form 8	. , a⊿a ►			
		tules Regarding the Waiver of Certain Treaty Bene				
Are you a fo  Yes. Yo  No. Sk	reign eligible ta ou may not elect ip the next que foreign eligible t	xpayer whose tax year began after March 13, 2020? See in to defer tax on an eligible gain by investing in a QOF unless yestion and go to Part III.  Example 21, 2017, and all tax years that began after December 21, 2017, and all tax years that began after	nstruction ou chectred to at	k "Yes" in response tach a written state	to the next question ment for the portion	
/aiver of Ti larch 13, 2	020, Only)	s on Future Inclusions by a Foreign Eligible Taxpa				
	deferring by inv	waive any benefits available under an applicable U.S. incorvesting in a QOF from being subject to federal income tax				
	ou may not elect	ral of the eligible gain in Part II and on Form 8949. It to defer tax on an eligible gain by investing in a QOF. <b>Do</b> If <b>or on Form 8949.</b>	not rep	ort the deferral of a	any otherwise	

Cat. No. 37821R

## 2020 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

Form 8997 (2020)

Part III C	OF Investme	ents for Which Gain Is Included During Current Tax	( Year		,
(a)	(b)	(c)	(d)	Deferred ga	
Qualified Opportunity Fund (QOF) EIN	Date QOF sold or disposed (MM/DD/YYYYY)  Description of inclusion event (for example, sale of 100 shares, gift of 25% interest, or distribution of \$1,000, etc.)	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	
				46	386
	_	r, from continuation sheet	. •		
		columns (e) and (f). See instructions for reporting on Form 89			
		sposed of any investment(s) and didn't receive a Form 109 Instructions for Form 8949 for reporting requirements of ar			on from the QOF or
Part IV T	otal QOF Inv	estment Holdings at Year End Due to Deferrals (se	e instr	uctions)	
(a)	(b)	(c)	(d)	Deferred gain investe	d in QOF investment
Qualified Opportunity Fund (QOF) EIN	Date QOF investment acquired (MM/DD/YYYY)	Description of interest acquired (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
				4,719	15,250
		r, from continuation sheet	. ▶		
2 Enter t	he totals from o	columns (e) and (f)	. ▶		Form <b>8997</b> (2020)

## 2020 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8997 (2020)					Page <b>2</b>
Part III C	OF Investme	ents for Which Gain Is Included During Current Ta	x Year		
(a) Qualified Opportunity Fund (QOF) EIN	(b) Date QOF sold or disposed (MM/DD/YYYY)  (c) Description of inclusion event (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	
		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	
				48,003	650,204
<b>1</b> Enter t	he totals, if any	, from continuation sheet	▶		
2 Enter t	he totals from c	olumns (e) and (f). See instructions for reporting on Form 8	949 ▶		
	•	posed of any investment(s) and didn't receive a Form 109 Instructions for Form 8949 for reporting requirements of a			on from the QOF or
Part IV T	otal QOF Inv	estment Holdings at Year End Due to Deferrals (se	ee instr	ructions)	
(a)	(b)	(c)	(d)	Deferred gain invested in QOF investment	
Qualified Opportunity Fund (QOF) EIN	Date QOF investment acquired (MM/DD/YYYY)	Description of interest acquired (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
				2,340,800	18,847,730
<b>1</b> Enter t	the totals, if any	, from continuation sheet	▶		
2 Enter t	the totals from c	columns (e) and (f)	▶		
					Form <b>8997</b> (2020)