# This ATS Scenario should only be used if supporting Form 8975 

October 1, 2023 - These are the most current forms available.

Tax Year 2023<br>1041 MeF ATS Scenario 6<br>Red Apples Trust<br>00-4000666

Please Note: Form 8975 Schedule A, Part II, Line 1 accepts addresses per the form instructions. Part II, Line 2 accepts one or more entity identification numbers, such as a company registration number for the constituent entity when filed electronically

## Forms Included in Scenario 6

Form 1041
Schedule I (Form1041)
Schedule C (Form1040)
Schedule D (Form 1041)
Form 4797
Form 8858
Form 8960
8975
8975 - Schedule A (3)
Form 8453-FE
Schedule K-1 (4)
Taxpayer Name, Address, and TIN
Red Apples Trust
5 Test Street
Lanham, MD 20706
00-4000666
Total Prior Year Income Amount: 824,500,000
Signature Information
Practitioner Signature PIN Method
K1 Data

- Interest Income must be distributed equally to the beneficiaries
- Ordinary Dividends must be distributed equally to the beneficiaries
- Schedule C Income must be distributed equally to the beneficiaries

Form 8995 or Form 8995 -A is not required for this scenario.

Tax Exempt Expense Allocation Statement

| Expense | Total Expenses | Amount <br> Allocated to <br> Tax Exempt <br> Income | Amount <br> Allocated to <br> Taxable Income | Explanation |
| :--- | :--- | :--- | :--- | :--- |
| Expense 1 | $1,000,000$ | 400,000 | 600,000 | Test scenario <br> data only |
| Expense 2 | $1,000,000$ | 100,000 | 900,000 | Test scenario <br> data only |
| Total | $2,000,000$ | 500,000 | $1,500,000$ |  |



Schedule A Charitable Deduction. Don't complete for a simple trust or a pooled income fund.
1 Amounts paid or permanently set aside for charitable purposes from gross income. See instructions
2 Tax-exempt income allocable to charitable contributions. See instructions
3 Subtract line 2 from line 1
4 Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes

| 1 |  |
| :---: | :--- |
| 2 |  |
| 3 |  |
|  |  |
| 4 |  |
| 5 |  |
|  |  |
| 6 |  |
| 7 |  |

7 Charitable deduction. Subtract line 6 from line 5. Enter here and on page 1, line 13

| 1 | $822,820,000$ |
| :---: | ---: |
| 2 | 500,000 |
| 3 |  |
| 4 |  |
| 5 |  |
|  |  |
| 6 | $-94,000,000$ |
| 7 | $729,320,000$ |
|  |  |
| 9 | $729,320,000$ |
| 10 |  |
| 11 | $729,320,000$ |
| 12 | 500,000 |
| 13 | $728,820,000$ |
| 14 | $728,820,000$ |
| 15 | $728,820,000$ |

5 Add lines 3 and 4
6 Section 1202 exclusion allocable to capital gains paid or permanently set aside for charitable purposes. See instructions

## Schedule B Income Distribution Deduction

1 Adjusted total income. See instructions . . . . . . . . . . . . . . . . . . . . . 1
2 Adjusted tax-exempt interest
3 Total net gain from Schedule D (Form 1041), line 19, column (1). See instructions
4 Enter amount from Schedule A, line 4 (minus any allocable section 1202 exclusion)
5 Capital gains for the tax year included on Schedule A, line 1. See instructions
6 Enter any gain from page 1, line 4, as a negative number. If page 1, line 4, is a loss, enter the loss as a positive number.
7 Distributable net income. Combine lines 1 through 6 . If zero or less, enter -0-
8 If a complex trust, enter accounting income for the tax year as determined under the governing instrument and applicable local law
9 Income required to be distributed currently
10 Other amounts paid, credited, or otherwise required to be distributed
11 Total distributions. Add lines 9 and 10. If greater than line 8, see instructions
12 Enter the amount of tax-exempt income included on line 11
13 Tentative income distribution deduction. Subtract line 12 from line 11


14 Tentive in distribution duction Subtract line 2 from lin 7 if

Schedule G Tax Computation and Payments (see instructions)
Part I - Tax Computation



Name of estate or trust
Employer identification number
RED APPLES TRUST

## Part I Estate's or Trust's Share of Alternative Minimum Taxable Income

1 Adjusted total income or (loss) (from Form 1041, line 17). ESBTs, see instructions
2 Interest
3 Taxes
4 Refund of taxes
5 Depletion (difference between regular tax and AMT).
6 Net operating loss deduction. Enter as a positive amount
7 Interest from specified private activity bonds exempt from the regular tax.
8 Qualified small business stock (see instructions)
9 Exercise of incentive stock options (excess of AMF income over regular tax income).
10 Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)
11 Disposition of property (difference between AMT and regular tax gain or loss)
12 Depreciation on assets placed in service after 1986 (difference between regul
13 Passive activities (difference between AMT and regular tax income or loss)
14 Loss limitations (difference between AMT and regular tax income or loss).
15 Circulation costs (difference between regular tax and AMT)
16 Long-term contracts (difference between AMT and regular tax income)
17 Mining costs (difference between regular tax and AMT).
18 Research and experimental costs (difference between regular tax and AMT)
19 Income from certain installment sales before January 1, 1987
20 Intangible drilling costs preference
00-4000666

1 Other adjustments, including income-based related adjustments
22 Alternative tax net operating loss deduction (See the instructions for the limitation that applies.)
23 Adjusted alternative minimum taxable income. Combine lines 1 through 22
Complete Part II below before going to line 24 .
24 Income distribution deduction from Part II, line 42
25 Estate tax deduction (from Form 1041, line 19)


26 Add lines 24 and 25

| 26 | $728,820,000$ |
| ---: | ---: |
| 27 | $94,000,000$ |

27 Estate's or trust's share of alternative minimum taxable income. Subtract line 26 from line 23
If line 27 is:

- $\$ 28,400$ or less, stop here and enter -0- on Form 1041, Schedule G, line 1 c . The estate or trust isn't
liable for the alternative minimum tax.
- Over $\$ 28,400$, but less than $\$ 208,200$, go to line 43.
- $\$ 208,200$ or more, enter the amount from line 27 on line 49 and go to line 50.
- ESBTs, see instructions.


## Part II Income Distribution Deduction on a Minimum Tax Basis

28 Adjusted alternative minimum taxable income (see instructions)

| 28 | $822,820,000$ |
| :--- | ---: |
| 29 | 500,000 |
| 30 |  |
|  |  |
| 31 |  |
| 32 |  |
| 33 | $94,000,000)$ |
| 34 |  |
|  |  |
| 35 | $729,320,000$ |
| 36 | $729,320,000$ |
| 37 | $\mathbf{0}$ |
| 38 | $729,320,000$ |
| 39 | 500,000 |
| 40 | $728,820,000$ |

## Part II Income Distribution Deduction on a Minimum Tax Basis (continued)

41 Tentative income distribution deduction on a minimum tax basis. Subtract line 29 from line 35. If zero or less, enter -0-

| 41 | $728,820,000$ |
| :--- | :--- |
| 42 | $728,820,000$ |

## Part III Alternative Minimum Tax

43 Exemption amount .
44 Enter the amount from line 27
45 Phase-out of exemption amount
46 Subtract line 45 from line 44. If zero or less, enter -0-

| 43 | $\$ 28,400$ |
| :--- | :--- |

47 Multiply line 46 by 25\% (0.25)

| 47 | $23,476,350$ |
| ---: | ---: |
| $-\frac{0}{49}$ | $-\quad-\quad \frac{0}{94,000,000}$ |

49 Subtract line 48 from line 44
50 Go to Part IV of Schedule I to figure line 50 if the estate or trust has qualified dividends or has a gain on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherwise, if line 49 is:

- $\$ 220,700$ or less, multiply line 49 by $26 \%$ (0.26).
- Over $\$ 220,700$, multiply line 49 by $28 \%(0.28)$ and subtract $\$ 4,414$ from the result

51 Alternative minimum foreign tax credit (see instructions)
52 Tentative minimum tax. Subtract line 51 from line 50
53 Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a)
54 Alternative minimum tax. Subtract line 53 from line 52 . If zero or less, enter -0 - Enter here and on Form 1041, Schedule G, line 1c

## sult



| 50 | $18,798,818$ |
| ---: | ---: |
| 51 | 0 |
| 52 | $18,798,818$ |
| 53 | $18,798,758$ |
|  |  |
| 54 | 60 |

## Part IV Line 50 Computation Using Maximum Capital Gains Rates

Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet, or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instructions before completing this part.
55 Enter the amount from line 49
56 Enter the amount from line 26 of Schedule D (Form 1041), line 13 of the Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as refigured for the AMT, if necessary).
57 Enter the amount from Schedule D (Form 1041), line 18b, column (2) (as refigured for the AMT, if necessary). If you didn't complete Schedule D for the regular tax or the AMT, enter -0-
58 If you didn't complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 56. Otherwise, add lines 56 and 57 and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary).
59 Enter the smaller of line 55 or line 58

| 56 | 94,000,000 |
| :---: | :---: |
| 57 | 0 |
| 58 | 94,000,000 |


|  |  |
| :--- | :--- |
| 55 | $94,000,000$ |

60 Subtract line 59 from line 55
94,000,000
61 If line 60 is $\$ 220,700$ or less, multiply line 60 by $26 \%$ ( 0.26 ). Otherwise, multiply line 60 by $28 \%$ ( 0.28 ) and subtract $\$ 4,414$ from the result
62 Maximum amount subject to the 0\% rate.
63 Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 23; if zero or less, enter -0-
64 Subtract line 63 from line 62. If zero or less, enter -0-
65 Enter the smaller of line 55 or line 56
66 Enter the smaller of line 64 or line 65. This amount is taxed at 0\%
67 Subtract line 66 from line 65


| Line 50 Computation Using Maximum Capital Gains Rates (continued) |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| 68 | Maximum amount subject to rates below 20\% | 68 | \$14,650 |  |
| 69 | Enter the amount from line 64 | 69 | 3,000 |  |
| 70 | Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 23; if zero or less, enter -0- |   <br> 70  |  |  |
| 71 | Add line 69 and line 70 | 71 | 3,000 |  |
| 72 | Subtract line 71 from line 68. If zero or less, enter -0- | 72 | 11,650 |  |
| 73 | Enter the smaller of line 67 or line 72 | 73 | 11,650 |  |
| 74 | Multiply line 73 by 15\% (0.15) |  | 74 | 1,748 |
| 75 | Add lines 66 and 73 <br> If lines 75 and 55 are the same, skip lines 76 through 80 and go to line 81. Oth |  | $\frac{14,650}{\text { ine } 76 .}$ |  |
| 76 | Subtract line 75 from line 65 | 76 | 93,985,350 |  |
| 77 | Multiply line 76 by 20\% (0.20) |  | 77 | 18,797,070 |
|  | If line 57 is zero or blank, skip lines 78 through 80 and go to line 81. Othe | e, g | 78. |  |
| 78 | Add lines 60, 75, and 76 | 78 | 94,000,000 |  |
| 79 | Subtract line 78 from line 55 | 79 | 0 |  |
| 80 | Multiply line 79 by 25\% (0.25) |  | 80 | 0 |
| 81 | Add lines 61, 74, 77, and 80 . |  | 81 | 18,798,818 |
| 82 | If line 55 is $\$ 220,700$ or less, multiply line 55 by $26 \%$ (0.26). Otherwise, multiply and subtract \$4,414 from the result |  |  | 26,315,586 |
| 83 | Enter the smaller of line 81 or line 82 here and on line 50....). |  | 83 | 18,798,818 |

SCHEDULE C (Form 1040)

Profit or Loss From Business
(Sole Proprietorship)
Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065. Go to www.irs.gov/ScheduleC for instructions and the latest information. Internal Revenue Service

| Name of proprietor |
| :--- |
| RED APPLES TRUST |
| A $\quad$ Principal business or profession, including product or service (see instructions) |
| GOODS AND SERVICES |

## Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked
2 Returns and allowances
3 Subtract line 2 from line 1
4 Cost of goods sold (from line 42)

|  |  |
| ---: | ---: |
| 1 | $130,000,000$ |
| 2 | $10,000,000$ |
| 3 |  |
| 5 |  |
| 6 |  |
| 7 |  |
|  |  |

Part II Expenses. Enter avnenenc for buciness uon of vour home nly on line 30.


- If a loss, you must go to line 32 .

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

- If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on Form 1041, line 3.All investment is at risk. 32b Some investment is not
- If you checked 32b, you must attach Form 6198. Your loss may be limited. at risk.


## Part III Cost of Goods Sold (see instructions)



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.

43 When did you place your vehicle in service for business purposes? (month/day/year) 01

44 Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:


Part V Other Expenses. List below business expenses not included on lines 8-26, line 27b, or line 30.
$\qquad$

## Capital Gains and Losses

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.
Internal Revenue Service
Name of estate or trust
RED APPLES TRUST

| Employer identification number |
| :--- | :--- |
| $00-4000666$ |

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? . . . . . . . $\square$ Yes $\square$ No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.
Note: Form 5227 filers need to complete only Parts I and II.


Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than 1 Year (see instructions)

| See instructions for how to figure the amounts to enter on the lines below. <br> This form may be easier to complete if you round off cents to whole dollars. | (d) <br> Proceeds (sales price) | (e) <br> Cost (or other basis) | (g) <br> Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g) |  | (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 |  |  |  |  |  |
| 8b Totals for all transactions reported on Form(s) 8949 with Box D checked |  |  |  |  |  |
| 9 Totals for all transactions reported on Form(s) 8949 with Box E checked |  |  |  |  |  |
| 10 Totals for all transactions reported on Form(s) 8949 with Box F checked. |  |  |  |  |  |
| Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 <br> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts <br> Capital gain distributions . <br> Gain from Form 4797, Part I . <br> Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2022 Capital Loss Carryover Worksheet |  |  |  | 11 |  |
|  |  |  |  | 12 |  |
|  |  |  |  | 13 |  |
|  |  |  |  | 14 | 94,000,000 |
|  |  |  |  | 15 | ) |
| Part III, line 18a, column (3) |  |  |  | 16 | 94,000,000 |

Page 2


Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover
Worksheet, as necessary.

## Part IV Capital Loss Limitation

20 Enter here and enter as a (loss) on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4c, if a trust), the smaller of:
a The loss on line 19, column (3) or b $\$ 3,000$
20
Note: If the loss on line 19, column (3), is more than $\$ 3,000$, or if Form 1041, page 1, line 23 (or Form 990-T, Part I, line 11), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

## Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18 a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line $2 b(2)$, and Form 1041, line 23 , is more than zero.
Caution: Skib this part and comolete the Schedule D Tax Worksheet in the instructions if.

- Either line 18b, col. (2), or line 18c, col. (2), is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g, are more than zero, or
- There are amounts on lines $4 e$ and $4 g$ of Form 4952.

Form 990-T trusts. Complete this part only if both lines 18 a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, Part I, line 11, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2), or line 18c, col. (2), is more than zero.

| 21 | Enter taxable income from Form 1041, line 23 (or Form 990 |  | art I, line 11) | 21 | 93,999,700 |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 22 | Enter the smaller of line 18a or 19 in column (2) but not less than zero |  | $94,000,000$ |  |  |  |  |
| 23 | Enter the estate's or trust's qualified dividends from Form 1041, line $2 \mathrm{~b}(2)$ (or enter the qualified dividends included in income in Part I of Form 990-T). | 23 |  |  |  |  |  |
| 24 | Add lines 22 and 23 | 24 | 94,000,000 |  |  |  |  |
| 25 | If the estate or trust is filing Form 4952, enter the amount from line 4 g ; otherwise, enter -0- | 25 |  |  |  |  |  |
| 26 | Subtract line 25 from line 24. If zero or less, enter -0- |  |  | 26 | 94,000,000 |  |  |
| 27 | Subtract line 26 from line 21. If zero or less, enter -0- |  |  | 27 |  |  |  |
| 28 | Enter the smaller of the amount on line 21 or \$3,000 |  |  | 28 | 2,800 |  |  |
| 29 | Enter the smaller of the amount on line 27 or line 28 |  |  | 29 | 0 |  |  |
| 30 | Subtract line 29 from line 28. If zero or less, enter -0-. This | am | unt is taxed at 0\% |  |  | 30 | 2,800 |
| 31 | Enter the smaller of line 21 or line 26 |  |  | 31 | 93,999,700 |  |  |
| 32 | Subtract line 30 from line 26 |  |  | 32 | 93,997,200 |  |  |
| 33 | Enter the smaller of line 21 or \$14,650 |  |  | 33 | 13,700 |  |  |
| 34 | Add lines 27 and 30 |  |  | 34 | 2,800 |  |  |
| 35 | Subtract line 34 from line 33. If zero or less, enter -0- |  |  | 35 | 10,900 |  |  |
| 36 | Enter the smaller of line 32 or line 35 |  |  | 36 | 10,900 |  |  |
| 37 | Multiply line 36 by 15\% (0.15) |  | . . . . . |  |  | 37 | 1,635 |
| 38 | Enter the amount from line 31 |  |  | 38 | 93,999,700 |  |  |
| 39 | Add lines 30 and 36 |  |  | 39 | 13,700 |  |  |
| 40 | Subtract line 39 from line 38. If zero or less, enter -0- |  |  | 40 | 93,986,000 |  |  |
| 41 | Multiply line 40 by 20\% (0.20) |  |  |  |  | 41 | 18,797,200 |
| 42 | Figure the tax on the amount on line 27. Use the 2023 Tax R and Trusts (see the Schedule $G$ instructions in the Instructio | e Sch for F | hedule for Estates orm 1041) | 42 | 0 |  |  |
| 43 | Add lines 37, 41, and 42 |  |  | 43 | 18,798,835 |  |  |
| 44 | Figure the tax on the amount on line 21. Use the 2023 Tax Ra and Trusts (see the Schedule G instructions in the Instruction | e Sch for F | hedule for Estates orm 1041) | 44 | 34,778,152 |  |  |

45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, Part I, line 1a (or Form 990-T, Part II, line 2).

Department of the Treasury Internal Revenue Service

# Sales of Business Property <br> (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) <br> Attach to your tax return. Go to www.irs.gov/Form4797 for instructions and the latest information. 

Name(s) shown on return


RED APPLES TRUST
1a Enter the gross proceeds from sales or exchanges reported to you for 2023 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 . See instructions
b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets

| Identifying number |  |  |
| :---: | :---: | :---: |
| 00-4000666 |  |  |
| or 1099-S (or | 1a | 2,750,000 |
| . . . . | 1b |  |
| ns of MACRS | 1c |  |

## 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)

## Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)



Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties. Add property columns A through D, line 24
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6

|  |  |
| :--- | :--- |
| 30 |  |
| 31 |  |
|  |  |
| 32 |  |

## Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50\% or Less (see instructions)

33 Section 179 expense deduction or depreciation allowable in prior years
34 Recomputed depreciation. See instructions
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report

|  | (a) Section <br> 179 | (b) Section <br> 280F(b)(2) |
| :---: | :---: | :---: |
| 33 |  |  |
| 34 |  |  |
| 35 |  |  |

Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs)
(Rev. September 2021)
Department of the Treasury Internal Revenue Service

- Go to www.irs.gov/Form8858 for instructions and the latest information. Information furnished for the FDE's or FB's annual accounting period (see instructions)

Attachment beginning J anuary 1 , 20 23 , and ending December 31 , $20 \quad 23$

Sequence No.

## Name of person filing this return

## Red Apples Trust

Filer's identifying number

| Number, street, and ro |
| :--- |
| $\mathbf{5}$ Test Street |
| City or town, state, and ZIP code |
| Lanham, Md. 20706 |
| Filer's tax year beginning |


| Important: | Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in |  |  |
| :--- | :--- | :--- | :--- |
|  | U.S. dollars unless otherwise indicated. |  |  |
| Check here | $\square$ FDE of a U.S. person | $\square$ FDE of a controlled foreign corporation (CFC) | $\square$ FDE of a controlled foreign partnership |
|  | $\square$ FB of a U.S. person | $\square$ FB of a CFC | $\square$ FB of a controlled foreign partnership |
| Check here | $\square$ | Initial Form 8858 | $\square$ Final Form 8858 |



2 Provide the following information for the FDE's or FB's accounting period stated above.

| Name, address, and identifying number of branch office or agent (if any) in <br> the United States | bame and address (including corporate department, if applicable) of person(s) <br> with custody of the books and records of the FDE or FB, and the location of |
| :--- | :--- | with custody of the books and records of the FDE or FB, and the location of such books and records, if different

3 For the tax owner of the FDE or FB (if different from the filer), provide the following (see instructions):

| a Name and address | b Annual accounting period covered by the return (see instructions) |  |
| :---: | :---: | :---: |
| McIntosh Apples 54 Any Street Grand Bahama F-44735 |  |  |
|  | c(1) U.S. identifying number, if any |  |
|  | c(2) Reference ID number (see instructions) |  |
|  | MAB 17890 |  |
|  | d Country under whose laws organized | e Functional currency |


| 4 For the direct owner of the FDE or FB (if different from the tax owner), provide the following (see instructions): |  |
| :--- | :--- | :--- |
| a Name and address | b Country under whose laws organized |

5 Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a $10 \%$ or more direct or indirect interest. See instructions.

## Schedule C Income Statement (see instructions)

Important: Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM). If you are using the average exchange rate (determined under section 989(b)), check the following box .

|  |  |  | Functional Currency | U.S. Dollars |
| :---: | :---: | :---: | :---: | :---: |
| 1 | Gross receipts or sales (net of returns and allowances) | 1 | - |  |
| 2 | Cost of goods sold. | 2 |  |  |
| 3 | Gross profit (subtract line 2 from line 1) . | 3 | , |  |
| 4 | Dividends . | 4 |  |  |
| 5 | Interest. | 5 |  |  |
| 6 | Gross rents, royalties, and license fees . | 6 | $\square$ |  |
| 7 | Gross income from performance of services | 7 |  |  |
| 8 | Foreign currency gain (loss) | 8 |  |  |
| 9 | Other income. . . . . | 9 |  |  |
| 10 | Total income (add lines 3 through 9) | 10 |  |  |
| 11 | Total deductions (exclude income tax expense) . . . . . . . . . . . . | 11 |  |  |
| 12 | Income tax expense | 12 |  |  |
| 13 | Other adjustments | 13 |  |  |
| 14 | Net income (loss) per books . . . . . . . . . . . . . . . . . | 14 |  |  |

## Schedule C-1 $\quad$ Section 987 Gain or Loss Information

Note: See the instructions if there are multiple recipients of remittances from the FDE or FB.

1 Remittances from the FDE or FB
2 Section 987 gain (loss) recognized by recipient
3 Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement).

|  | (a) <br> Amount stated in functional currency of FDE or FB | (b) <br> Amount stated in functional currency of recipient |  |
| :---: | :---: | :---: | :---: |
| 1 |  |  |  |
| 2 |  |  |  |
|  |  |  |  |
| 3 |  |  |  |
|  |  | Yes | No |
|  | - . . . . . |  |  |
|  | ct to remittances od used prior to |  |  |
|  |  |  |  |

4 Were all remittances from the FDE or FB treated as made to the direct owner?
5 Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting .

## Schedule F Balance Sheet

Important: Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.


## Schedule G $\quad$ Other Information (continued)

6 Is the FDE or FB a qualified business unit as defined in section 989(a)?.
Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.

7a During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7 c .
b Enter the total amount of the base erosion payments
\$
c Enter the total amount of the base erosion tax benefit \$
8a During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c
b Enter the total amount of the base erosion payments \$
c Enter the total amount of the base erosion tax benefit \$
9 Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?

Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.
10a If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?
b If "Yes," enter the amount of the dual consolidated loss.
\$
11a If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503 (d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c .
b Enter the amount of the dual consolidated loss for the combined separate unit . . \$ ( $\qquad$
c Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)
\$
12a Was any portion of the dual consolidated loss on line 10b or 11 b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13
b Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d
c If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503 (d)-6 attached to the return? After answering this question, go to line 13a
d If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503 (d)-4? If "Yes," go to line 12e .
e Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year . . \$ $\qquad$ . See instructions.
13a During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?
b If "Yes," enter the total amount of recapture . . . . . . \$ . See instructions.
Schedule H Current Earnings and Profits or Taxable Income (see instructions)
Important: Enter the amounts on lines 1 through 6 in functional currency.

|  | Current year net income (loss) per foreign books of account |
| :---: | :---: |
| 2 | Total net additions |
| 3 | Total net subtractions |
| 4 | Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3) |
| 5 | DASTM gain (loss) (if applicable) |
| 6 | Combine lines 4 and 5. |
| 7 | Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions)) |
|  |  |


| 1 |  |
| :--- | :--- |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |
| 7 |  |

## Schedule I Transferred Loss Amount (see instructions)

Important: See instructions for who has to complete this section.

1 Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2 .
2 Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10\%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3
3 Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4
4 Enter the transferred loss amount included in gross income as required under section 91. See instructions

| Yes | No |
| :--- | :--- |
|  |  |
|  |  |
|  |  |
|  |  |

Schedule J Income Taxes Paid or Accrued (see instructions)

|  |  | Foreign Income Taxes |  |  | Foreign Tax Credit Separate Categories |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| (a) <br> Country or Possession | (b) Foreign Tax Year (YYYY-MM-DD) | (c) Foreign Currency | (d) Conversion Rate | (e) <br> U.S. Dollars | (f) Foreign Branch | (g) Passive | (h) General | (i) Other |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  | $\triangle$ |  |  |  |  |  |
| Totals |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | Rev. 9 |



January
Information about Form 8975 and its separate instructions is at www.irs.gov/form8975.
Internal Revenue Service

Internal Revenue Service

3
Enter the number of Schedules A (Form 8975) attached to this Form 8975 Part I Identification of Filer


Part II Additional Information
Enter any additional information related to the multinational enterprise group.

SCHEDULE A (Form 8975)
(Rev. December 2020)
Department of the Treasury
Internal Revenue Service

Tax Jurisdiction and Constituent Entity Information

## For reporting period beginning <br> 01/01 <br> , 20 _ 23 , , and ending <br> 12/31/

, $20 \quad 23$
OMB No. 1545-2272
A separate Schedule A (Form 8975) is to be completed for each tax jurisdiction of the multinational enterprise group. - Go to www.irs.gov/Form8975 for instructions and the latest information.

## Red Apples Trust

Part I Tax Jurisdiction Information. All financial amounts must be stated in U.S. dollars. See instructions.
Tax jurisdiction
MX

| 1. Revenues |  |  | 2. Profit (loss) before income tax | 3. Income tax paid (on cash basis) | 4. Income tax accrued-current year | 5. Stated capital | 6. Accumulated earnings | 7. Number of employees | 8. Tangible assets other than cash and cash equivalents |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| (a) Unrelated party | (b) <br> Related party | (c) Total |  |  |  |  |  |  |  |
| 23,974,000 | 836,0 | 24,8 | 7,443,000 | 2,232,900 | 1,674,675 | 6,202,500 | 2,170,875 | 31 | 22,329,000 |

Part II Constituent Entity Information

| 1. Constituent entities resident in the tax jurisdiction | $\begin{aligned} & \text { 2. Entity } \\ & \text { role } \end{aligned}$ | 3. TIN | 4. Tax jurisdiction of organization or incorporation if different from tax residence | 5. Main business activities |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | (a) Activity code |  | (b) <br> If you entered the code for "Other," describe the business activity. |
| Manzana Roja |  | MRJ 120417R24 |  | CBC511 |  |  |
| Empire Apples |  | AEP031212F8P |  | CBC511 |  |  |
| Braeburn Apples |  | URA1116049Q1 |  | CBC511 |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Schedule A (Form 8975) (Rev. 12-2020)

| Constituent Entity Information (continued) |  | 3. TIN |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 1. Constituent entities resident in the tax jurisdiction | 2. Entity role |  | 4. Tax jurisdiction of organization or incorporation if diferent from tax jurisdiction ofresidence residence | 5. Main business activities |  |
|  |  |  |  | (a) <br> Activity code | If you entered the code for "Other," describe the business activity. |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

## Part III Additional Information

Enter any additional information related to the information reported in Part I and II.

SCHEDULE A

## (Form 8975)

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

Tax Jurisdiction and Constituent Entity Information

## For reporting period beginning <br> 01/01 <br> , 20 _ 23 , , and ending <br> 12/31/

, $20 \quad 23$
OMB No. 1545-2272
A separate Schedule A (Form 8975) is to be completed for each tax jurisdiction of the multinational enterprise group. - Go to www.irs.gov/Form8975 for instructions and the latest information.

## Red Apples Trust

Part I Tax Jurisdiction Information. All financial amounts must be stated in U.S. dollars. See instructions.
Tax jurisdiction
US

| 1. Revenues |  |  | 2. Profit (loss) before income tax | 3. Income tax paid (on cash basis) | 4. Income tax accrued-current year | 5. Stated capital | 6. Accumulated earnings | 7. Number of employees | 8. Tangible assets other than cash and cash equivalents |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| (a) <br> Unrelated party | (b) <br> Related party | (c) Total |  |  |  |  |  |  |  |
| 846,184,800 | 4,386,000 | 850,570,800 | 255,171,240 | 102,067,496 | 76,551,372 | 212,642,700 | 74,424,945 | 542 | 765,513,720 |

Part II Constituent Entity Information

| 1. Constituent entities resident in the tax jurisdiction | 2. Entity role | 3. TIN | 4. Tax jurisdiction of organization or incorporation if different from tax jurisdiction of residence | 5. Main business activities |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | (a) <br> Activity code |  | (b) <br> If you entered the code for "Other," describe the business activity. |
| Gala Apples |  | 185973948 |  | CBC506 |  |  |
| Honeycrisp Apples |  | 175939473 |  | CBC511 |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Schedule A (Form 8975) (Rev. 12-2020)

| Constituent Entity Information (continued) |  | 3. TIN |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 1. Constituent entities resident in the tax jurisdiction | 2. Entity role |  | 4. Tax jurisdiction of organization or incorporation if diferent from tax jurisdiction ofresidence residence | 5. Main business activities |  |
|  |  |  |  | (a) <br> Activity code | If you entered the code for "Other," describe the business activity. |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

## Part III Additional Information

Enter any additional information related to the information reported in Part I and II.

SCHEDULE A

## (Form 8975)

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

Tax Jurisdiction and Constituent Entity Information

## For reporting period beginning <br> 01/01 <br> , 20 _ 23 , and ending <br> 12/31/

, 20 .-23
OMB No. 1545-2272

- A separate Schedule A (Form 8975) is to be completed for each tax jurisdiction of the multinational enterprise group. - Go to www.irs.gov/Form8975 for instructions and the latest information.


## Red Apples Trust

Part I Tax Jurisdiction Information. All financial amounts must be stated in U.S. dollars. See instructions.
Tax jurisdiction
HK

| 1. Revenues |  |  | 2. Profit (loss) before income tax | 3. Income tax paid (on cash basis) | 4. Income tax accrued-current year | 5. Stated capital | 6. Accumulated earnings | 7. Number of employees | 8. Tangible assets other than cash and cash equivalents |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| (a) <br> Unrelated party | (b) <br> Related party | (c) Total |  |  |  |  |  |  |  |
| 7,984,000 |  | 7,984,000 | 2,395,000 |  |  | 1,996,000 | 698,600 | 7 | 7,185,600 |



Schedule A (Form 8975) (Rev. 12-2020)

| Constituent Entity Information (continued) |  | 3. TIN |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 1. Constituent entities resident in the tax jurisdiction | 2. Entity role |  | 4. Tax jurisdiction of organization or incorporation if diferent from tax jurisdiction ofresidence residence | 5. Main business activities |  |
|  |  |  |  | (a) <br> Activity code | If you entered the code for "Other," describe the business activity. |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

## Part III Additional Information

Enter any additional information related to the information reported in Part I and II.

$6 \quad \square$ I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the estate's or trust's taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

Under penalties of perjury, I declare that the above amounts (or the amounts on the attached listing) agree with the amounts shown on the corresponding lines of the electronic portion of the 2023 U.S. Income Tax Return(s) for Estates and Trusts. I have also examined a copy of the return(s) being filed electronically with the IRS, and all accompanying schedules and statements. To the best of my knowledge and belief, they are true, correct, and complete. If I am not the transmitter, I consent that the return(s), including this declaration and accompanying schedules and statements, be sent to the IRS by the return transmitter. I also consent to the IRS's sending the ERO and/or transmitter an acknowledgment of receipt of transmission and an indication of whether or not the return(s) is accepted, and, if rejected, the reason(s) for the rejection.

Sign
Here Signature of fiduciary or officer representing fiduciary $\overline{\text { Date }}$

## Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above estate or trust return(s) and that the entries on Form 8453-FE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return(s), and only declare that this form accurately reflects the data on the return(s). The fiduciary or an officer representing the fiduciary will have signed this form before I submit the return(s). I will give the fiduciary or officer representing the fiduciary a copy of all forms and information to be filed with the IRS, and have followed all other requirements described in Pub. 4164, Modernized e-File (MeF) Guide for Software Developers and Transmitters. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above estate or trust return(s) and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

| ERO's | ERO's signature | Date | Check if also paid preparer | Check if selfemployed $\square$ | ERO's SSN or PTIN |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Use | Firm's name (or yours if self-employed), address, and ZIP code |  |  | EIN |  |
| Only |  |  |  | Phone no. |  |

Under penalties of perjury, I declare that I have examined the above estate or trust return(s) and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

| Paid Preparer Use Only | Print/Type preparer's name | Preparer's signature | Date | Check if $\square$ self-employed | PTIN |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | Firm's name |  |  | Firm's EIN |  |
|  | Firm's address |  |  | Phone no. |  |
| For Privacy Act and Paperwork Reduction Act Notice, see instructions. |  |  | No. 65092M |  | m 84 |

beginning 1 / / 2023 ending 12 / / 2023
Beneficiary's Share of Income, Deductions,
Credits, etc.

beginning 1 / / 2023 ending 12 / / 2023
Beneficiary's Share of Income, Deductions,
Credits, etc.

beginning 1 / / 2023 ending 12 / / 2023

| Beneficiary's Share of Income, Deductions, |
| :--- |
| Credits, etc. | See back of form and instructions.


beginning 1 / / 2023 ending 12 / / 2023
Beneficiary's Share of Income, Deductions,
Credits, etc.


