## 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, 2019 

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This 2019 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 2019 Individual SOI Complete Report weighted file. The estimates presented here are based on returns filed in Processing Year 2020 that were sampled statistically and then weighted to estimate the entire 2019 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.

2019 Complete Report estimates:
157,796,807 Total, all individual returns filed
Estimates of returns filed electronically:
142,162,470 Total, all individual returns filed

## Suggested Citation

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Individual Income Tax Returns
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## Totals for Forms and Schedules

## Line Item Estimate Totals for Tax Year 2019

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 2019

| Type of Form | Total | Electronically Filed |
| :---: | :---: | :---: |
| All returns filed | 157,796,807 | 142,162,470 |
| Form 1040, U.S. Individual Income Tax Return | 142,164,886 | 128,737,582 |
| Form 1040-SR, U.S. Tax Return for Seniors | 15,370,013 | 13,308,612 |
| Schedule 1, Additional Income and Adjustments to Income | 67,749,535 | 61,546,779 |
| Schedule 2, Additional Taxes | 31,847,436 | 29,282,398 |
| Schedule 3, Additional Credits and Payments | 41,659,819 | 38,793,313 |
| Schedule A, Itemized Deductions | 17,555,341 | 15,773,884 |
| Schedule B, Interest and Ordinary Dividends | 24,509,399 | 22,270,550 |
| Schedule C, Profit or Loss From Business (Sole Proprietorship) | 31,516,038 | 27,625,952 |
| Schedule D, Capital Gains and Losses | 22,624,729 | 20,710,932 |
| Schedule E, Supplemental Income and Loss | 19,554,982 | 17,779,087 |
| Schedule EIC, Earned Income Credit | 19,170,892 | 18,207,350 |
| Schedule F, Profit or Loss From Farming | 1,802,168 | 1,647,260 |
| Schedule R, Credit for the Elderly or the Disabled | 45,049 | 33,790 |
| Schedule SE, Self-Employment Tax | 21,817,853 | 19,105,717 |
| Schedule 8812, Additional Child Tax Credit | 19,960,254 | 18,801,087 |
| Form 461, Limitation on Business Losses | 5,220 | 3,337 |
| Form 965-A, Individual Report of Net 965 Tax Liability | 21,541 | 18,499 |
| Form 982, Reduction of Tax Attributes Due to Discharge of Indebtedness (and Section 1082 Basis Adjustment) | 122,246 | 113,166 |
| Form 2106, Employee Business Expenses | 493,832 | 386,163 |
| Form 2439, Undistributed Long-Term Capital Gains | 3,611 | 2,562 |
| Form 2441, Child and Dependent Care Expenses | 7,204,483 | 6,854,325 |
| Form 3468, Investment Credit | 23,832 | 23,122 |
| Form 3800, General Business Credit | 657,165 | 617,193 |
| Form 3903, Moving Expenses | 113,005 | 98,380 |
| Form 4136, Credit for Federal Tax Paid on Fuels | 305,996 | 276,132 |
| Form 4562, Depreciation and Amortization | 9,998,476 | 9,207,904 |
| Form 4684, Casualties and Thefts | 95,349 | 86,812 |
| Form 4797, Sales of Business Property | 3,282,996 | 3,033,727 |
| Form 4835, Farm Rental Income and Expenses | 488,173 | 438,795 |
| Form 4952, Investment Interest Expense Deduction | 1,398,942 | 1,271,966 |
| Form 5329, Additional Taxes on Qualified Plans (including IRAs) and Other Tax-Favored Accounts | 2,581,137 | 2,369,704 |
| Form 5405, Repayment of the First-Time Homebuyer Credit | 111,075 | 98,405 |
| Form 5695, Residential Energy Credits | 2,079,940 | 1,884,561 |
| Form 5884, Work Opportunity Credit | 6,582 | 5,952 |

Totals for Forms and Schedules from Line Item Estimates for Tax Year 2019—Continued

| Type of Form | Total | Electronically Filed |
| :---: | :---: | :---: |
| Form 6251, Alternative Minimum Tax-Individuals | 5,821,195 | 5,342,418 |
| Form 6252, Installment Sale Income | 463,472 | 429,253 |
| Form 6765, Credit for Increasing Research Activities | 12,728 | 12,132 |
| Form 6781, Gains and Losses From Section 1256 Contracts and Straddles | 417,338 | 378,413 |
| Form 8283, Noncash Charitable Contributions | 3,931,839 | 3,587,448 |
| Form 8396, Mortgage Interest Credit | 101,853 | 99,109 |
| Form 8582, Passive Activity Loss Limitations | 7,892,207 | 7,293,141 |
| Form 8586, Low-Income Housing Credit | 4,264 | 3,923 |
| Form 8606, Nondeductible IRAs | 2,710,268 | 2,520,461 |
| Form 8615, Tax for Certain Children Who Have Unearned Income | 359,546 | 336,320 |
| Form 8801, Credit for Prior Year Minimum Tax—Individuals, Estates, and Trusts | 441,466 | 400,461 |
| Form 8814, Parents' Election To Report Child's Interest and Dividends | 100,566 | 93,955 |
| Form 8824, Like-Kind Exchanges | 56,674 | 51,524 |
| Form 8829, Expenses for Business Use of Your Home | 3,126,581 | 2,812,494 |
| Form 8839, Qualified Adoption Expenses | 100,030 | 93,454 |
| Form 8846, Credit for Employer Social Security and Medicare Taxes Paid on Certain Employee Tips | 24,693 | 22,469 |
| Form 8853, Archer MSAs and Long-Term Care Insurance Contracts | 144,471 | 132,890 |
| Form 8863, Education Credits (American Opportunity \& Lifetime Learning Credits) | 9,192,640 | 8,578,183 |
| Form 8880, Credit for Qualified Retirement Savings Contributions | 9,708,336 | 9,156,601 |
| Form 8889, Health Savings Accounts (HSAs) | 14,414,454 | 13,586,679 |
| Form 8903, Domestic Production Activities Deduction | 58,311 | 55,520 |
| Form 8910, Alternative Motor Vehicle Credit | 17,950 | 17,893 |
| Form 8911, Alternative Fuel Vehicle Refueling Property Credit | 28,345 | 25,562 |
| Form 8917, Tuition and Fees Deduction | 1,294,251 | 1,182,326 |
| Form 8936, Qualified Plug-in Electric Drive Motor Vehicle Credit | 167,136 | 156,643 |
| Form 8938, Statement of Specified Foreign Financial Assets | 489,258 | 389,462 |
| Form 8959, Additional Medicare Tax | 5,603,964 | 5,290,338 |
| Form 8960, Net Investment Income Tax- Individuals, Estates, and Trusts | 6,410,663 | 5,965,162 |
| Form 8962, Premium Tax Credit | 5,998,900 | 5,367,335 |
| Form 8990, Limitation on Business Interest Expense Under Section 163(J) | 192,574 | 188,583 |
| Form 8992, U.S. Shareholder Calculation of Global Intangible Low-Taxed Income (GILTI) | 21,754 | 15,797 |
| Form 8994, Employer Credit for Paid Family and Medical Leave | 1,340 | 1,288 |
| Form 8995, Qualified Business Income Deduction Simplified Computation | 30,401,399 | 28,474,165 |
| Form 8995-A, Qualified Business Income Deduction | 3,167,180 | 3,025,914 |
| Form 8997, Initial and Annual Statement of Qualified Opportunity Fund (QOF) Investments | 13,332 | 11,908 |

# Limitations and Guidelines for the 2019 Line Item Estimates 

Since SOI obtained the line counts used in this package from the Tax Year 2019 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 $129,456,380$ and $130,095,129$.) These confidence intervals correspond to the estimates for all individual income tax returns filed for Tax Year 2019.

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

| Item | Line number on 1040 | 95\% confidence interval |
| :---: | :---: | :---: |
| Salaries and wages | 1 | 129,775,754 (129,456,380 , 130,095,129) |
| Taxable interest | 2 b | $48,676,014(48,369,705,48,982,323)$ |
| Tax-exempt interest | 2a | $6,242,423 \quad(6,125,536,6,359,310)$ |
| Ordinary dividends | 3b | 28,980,261 (28,738,009 , 29,222,513) |
| Qualified dividends | 3a | $26,757,958(26,525,340$, 26,990,576) |
| Gross IRAs, pensions and annuities | 4a | 15,641,734 (15,430,421 , 15,853,048) |
| Taxable IRAs, pensions and annuities | 4b | 28,284,849 (28,005,944 , 28,563,754) |
| Total Social Security benefits | 5b | 30,022,335 (29,732,575 , 30,312,096) |
| Taxable Social Security benefits | 5 a | 22,416,436 (22,168,862 , 22,664,010) |
| Total income | 6 | 157,197,473 (157,008,716 , 157,386,230) |
| Adjusted gross income (amount in thousands) | 7 | 11,966,873,976 (11,947,092,812 , 11,986,655,139) |
| Basic standard deduction | 8 | 138,307,604 (138,030,377 , 138,584,832) |
| Additional standard deduction | 8 | $23,725,778 \quad(23,459,380,23,992,175)$ |
| Total itemized deductions | 8 | 17,348,989 (17,144,805 , 17,553,172) |
| Qualified business income deduction | 9 | 22,243,545 (22,040,969 , 22,446,120) |
| Taxable income | 10 | 124,143,848 (123,834,436 , 124,453,260) |
| Income tax before credits | 11 | 123,689,755 (123,378,935 , 124,000,575) |
| Total credits | 12 | $59,886,820 \quad(59,533,289, \quad 60,240,351)$ |
| Income tax after credits | 13 | 103,985,756 (103,660,282 , 104,311,231) |
| Total tax liability | 15 | 109,069,293 (108,744,030 , 109,394,555) |
| Tax due at time of filing | 22 | $33,269,899(32,988,506,33,551,292)$ |
| Overpayment | 19 | 118,897,660 (118,554,451 , 119,240,870) |

Forms whose line entries have weak estimates (implying a return sampled count less than 50 ) are listed below:
Form 4972
Form 5884-A

# Description of the Sample for the Line Item Estimates 

This 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 U.S. Individual Income Tax Returns (Forms 1040 and 1040-SR (including electronic returns)) filed by U.S. citizens and residents during Calendar Year 2020.

All returns processed during 2020 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 2019. While most of the returns processed during Calendar Year 2020 were filed for Tax Year 2019, 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. (See footnote [1] for details.)

Tax data processed to the IRS Individual Master File at the Enterprise Computing Center at Martinsburg during Calendar Year 2020 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 the 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.

## 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 2019, about 0.5 percent of the sample returns were unavailable.

Due to the COVID-19 pandemic, delays in processing Tax Year 2019 returns occurred because of the temporary closing of submission processing centers. Approximately 5.8 million returns were ultimately processed during the beginning of Tax Year 2020. These returns were moved into the Tax Year 2019 study. There were also approximately 8.6 million returns filed for the purpose of receiving Economic Incentive Payments due to COVID-19. These returns had no significant income information included and were excluded in calculating estimates.

## 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 2019 

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.

# 2019 Line Item Estimates—All figures are estimates based on samples. <br> Number of returns filed for selected lines 

Total of all returns filed $=157,796,807$
Electronically Filed Returns $=142,162,470$

Department of the Treasury-Internal Revenue Service
(99)
U.S. Individual Income Tax Return


OMB No. 1545-0074 $\quad$ IRS Use Only - Do not write or staple in this space.
$\qquad$ $\square$ Single If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.


## 1040 Department of the Treasury-Internal Revenue Service

OMB No. 1545-007
Filing Status

## Check only

 one box.Single Married filing jointlyMarried filing separately (MFS)Head of household (HOH)Qualifying widow(er) (QW) If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

Age/Blindness $\quad$ You: $\quad \square$ Were born before January 2, $1955 \quad \square$ Are blind $\quad$ Spouse: $\quad \square$
$\square$ Was born before January 2, 1955 $\square$ Is blind Dependents (see instructions):

| (1) First name |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

(2) Social security number $\qquad$ 3) Relationship to you $\square$
(3) Relationship to you
(4) $\checkmark$ if qualifies for (see instructions):
Standard
Deduction for-

- Single or Married
filing separately,
$\$ 12,200$
- Married filing
jointly or Qualifying
widow(er),
$\$ 24,400$
- Head of
household,
$\$ 18,350$
- If you checked
any box under
Standard
Deduction,
see instructions.

1 Wages, salaries, tips, etc. Attach Form(s) W-2
2a Tax-exempt interest.
3a Qualified dividends
4a IRA distributions.
c Pensions and annuities
5a Social security benefits

| $2 a$ | $61,575,197$ |
| :---: | :---: |
| $3 a$ | $248,190,601$ |
| $4 a$ | $379,260,994$ |
| $4 c$ | $1,290,875,434$ |
| $5 a$ | $718,890,477$ |

b Taxable interest. Attach Sch. B if required
b Ordinary dividends. Attach Sch. B if required
b Taxable amount
d Taxable amount
b Taxable amount
6 Capital gain or (loss). Attach Schedule D if required. If not required, check here
7a Other income from Schedule 1, line 9
b Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and 7a. This is your total income
8a Adjustments to income from Schedule 1, line 22
b Subtract line 8a from line 7b. This is your adjusted gross income
9 Standard deduction or itemized deductions (from Schedule A)
10 Qualified business income deduction. Attach Form 8995 or Form 8995-A
11a Add lines 9 and 10
b Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-
ivacy Act, and Paperwork Reduction Act Notice, see separate instructions.



# 2019 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines 

Electronically Filed Returns $=142,162,470$

1040Department of the Treasury-Internal Revenue Service
(99) U.S. Individual Income Tax Return

Filing Status
Check only one box.

## 69,390,565 $\square$ Single

$\square$ 49,525,210Married filing separately (MFS)Head ot household $(\mathrm{HOH})$64,489 If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.


## Electronically Filed Returns = 142,162,470

Departmentof the Treasury-Mmennal Reverue Sevice (99)
U.S. Individual Income Tax Return

Filing Status
Check only one box.
$\qquad$ Married filing jointlyMarried filing separately (MFS)Head of household ( HOH ) $\square$ Qualifying widow(er) (QW) If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

| Your first na | and middle initial | Last name |  | Your social security number |
| :---: | :---: | :---: | :---: | :---: |
| If joint return | ouse's first name and middle initial | Last name |  | Spouse's social security number |
| Home address (number and street). If you have a P.O. box, see instructions. Apt. no. |  |  |  | Presidential Election Campaign Check here if you, or your spouse if filing jointly, want $\$ 3$ to go to this fund. Checking a box below will not change your tax or refund. $\square$ You $\square$ Spouse |
| City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). |  |  |  |  |
| Foreign country name |  | Foreign province/state/county | Foreign postal code | If more than four dependents, see instructions and $\checkmark$ here |
| Standard Someone can claim: $\square$ You as a dependent $\quad \square$ Your spouse as a dependent <br> Deduction $\square$ Spouse itemizes on a separate return or you were a dual-status alien |  |  |  |  |

Age/Blindness You: $\square$ Were born before January 2, $1955 \quad \square$ Are blind Spouse
Dependents (see instructions):


| Dependents (see instructions): Last name <br> (1) First name |
| :--- |
|  | | (2) Social security number |
| :--- |

$\qquad$ Was born before January 2, $1955 \quad \square$ Is blind

| (3) Relationship to you | (4) $\backslash$ if qualifies for (see instructions: <br> Child tax credit <br> Credif tor other dependents |
| :---: | :---: |


| 2a | Tax-exempt interest . | 2a | 54,732,958 |
| :---: | :---: | :---: | :---: |
| 3a | Qualified dividends | 3a | 218,693,991 |
| 4a | IRA distributions . | 4a | 336,402,659 |
| c | Pensions and annuities | 4c | 1,159,484,502 |
| 5a | Social security benefits | 5a | 627,761,735 |

b Taxable interest. Attach Sch. B if required
b Ordinary dividends. Attach Sch. B if required
b Taxable amount
d Taxable amount
b Taxable amount

## Standard

Deduction for-

- Single or Married filing separately,
\$12,200
- Married filing jointly or Qualifying widow(er),
\$24,400
- Head of household, \$18,350
- If you checked any box under Standard Deduction, see instructions.
eck here
7a Other income from Schedule 1, line 9


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

## 2019 Line Item Estimates—All figures are estimates based on samples. <br> Number of returns filed for selected lines





SCHEDULE 1
(Form 1040 or 1040-SR)

## Additional Income and Adjustments to Income

- Attach to Form 1040 or 1040-SR.

Department of the Treasury Internal Revenue Service
-Go to www.irs.gov/Form 1040 for instructions and the latest information.
Name(s) shown on Form 1040 or 1040-SR
Total

67,749,535
At any time during 2019, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? $\qquad$

## Part I Additional Income

| 1 | Taxable refunds, credits, or offsets of state and local income taxes | 1 | 5,567,843 |
| :---: | :---: | :---: | :---: |
| 2a | Alimony received | 2a | 10.810.673 |
|  | Date of original divorce or separation agreement (see instructions) |  |  |
| 3 | Business income or (loss). Attach Schedule C | 3 | 354,741,301 |
| 4 | Other gains or (losses). Attach Form 4797 | 4 | 19,359,097 |
| 5 | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E | 5 | 771,975,979 |
| 6 | Farm income or (loss). Attach Schedule F | 6 | -23,797,084 |
| 7 | Unemployment compensation | 7 | 21,395,491 |
| 8 | Other income. List type and amount | 8 | 38,422,215 |
|  | ne lines 1 through 8. Enter here and on Form 1040 or 1040-SR, line 7a | 9 | 1,031,675,34 |

## Part II Adjustments to Income

10 Educator expenses
11 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106
12 Health savings account deduction. Attach Form 8889
13 Moving expenses for members of the Armed Forces. Attach Form 3903
14 Deductible part of self-employment tax. Attach Schedule SE
15 Self-employed SEP, SIMPLE, and qualified plans .
16 Self-employed health insurance deduction
17 Penalty on early withdrawal of savings
18a Alimony paid

| 10 | 937,722 |
| :---: | :---: |
|  |  |
| 11 | $2,764,429$ |
| 12 | $5,728,845$ |
| 13 | 293,751 |
| 14 | $33,645,174$ |
| 15 | $25,527,840$ |
| 16 | $31,384,974$ |
| 17 | 243,447 |
| 18 a | $12,374,364$ |

b Recipient's SSN
c Date of original divorce or separation agreement (see instructions)
19 IRA deduction
12,691,089
20 Student loan interest deduction
21 Tuition and fees. Attach Form 8917
14,144,721

22 Add lines 10 through 21. These are your adjustments to income. Enter here and on Form 1040 or 1040-SR, line 8a

144,925,513

For Paperwork Reduction Act Notice, see your tax return instructions.
8. Net oper. loss=

212,144,847
8. Stock options=

164,283
8. Cancel. of debt=

5,460,270
8. For. earn. inc. ex= $30,867,452$
8. Gambling inc. $=35,756,185$
8. Taxable HSA $=631,639$
8. Sec $965=\quad 262,314$
8. 461 Loss Limit $=\quad 3,530,839$
8. 8992 Low $t x=\quad 2,449,204$

Cat. No. 71479F
22. Dom. Prod. Ded $=258,101$
22. Archer MSA Ded. $=$ *
22. Housing ded. $=85,541$
22. Other adj. $=1,830,866$

SCHEDULE 2

## Additional Taxes

Department of the Treasury Internal Revenue Service

## lines




## SCHEDULE 2

(Form 1040 or 1040-SR)

## Additional Taxes

- Attach to Form 1040 or 1040-SR.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form 1040 for instructions and the latest information.
Name(s) shown on Form 1040 or 1040-SR

Total Forms Filed $=31,847,436$

## Part I

Tax


SCHEDULE 3
(Form 1040 or 1040-SR)
Department of the Treasury
Internal Revenue Service

## Additional Credits and Payments

Name(s) shown on Form 1040 or 1040-SR
Total Forms Filed $=41,659,818$
Part I Nonrefundable Credits


## Part II Other Payments and Refundable Credits

| 8 | 2019 estimated tax payments and amount applied from 2018 return | 8 | 10,012,062 |  |
| :---: | :---: | :---: | :---: | :---: |
| 9 | Net premium tax credit. Attach Form 8962 | 9 | 2,170,776 |  |
| 10 | Amount paid with request for extension to file (see instructions) | 10 | 1,432,185 |  |
| 11 | Excess social security and tier 1 RRTA tax withheld | 11 | 1,640,674 |  |
| 12 | Credit for federal tax on fuels. Attach Form 4136 . . . . . . . . . Other payments. Sec 965 | 12 | 305,996 |  |
| 13 | Credits from Form: a $\square 2439$ b $\square$ Reserved $\mathbf{c} \square 8885 \quad$ d $\square \ldots 11,640 \quad 205$ | 13 | A 4,425 | C |
| 14 | Add lines 8 through 13. Enter here and on Form 1040 or 1040-SR, line 18d . . . . . . . . | 14 | 14,316,068 |  |


| 6c | F8910 | 16,898 |
| :--- | :--- | :---: |
| 6c | Sch R | 40,998 |
| 6c | F8834 | $*$ |
| 6c | F8911 | 26,892 |
| 6c | F8936 | 162,686 |
| 6c | F8396 | 93,937 |
| 6c | F8839 | 63,531 |
| 6c | Other Cı | 4,638 |




For Paperwork Reduction Act Notice, see the Instructions for Forms 1040 and 1040-SR. Cat. No. 17145 C Schedule A (Form 1040 or 1040-SR) 2019

SCHEDULE A
(Form 1040 or 1040-SR)
(Rev. January 2020)
Department of the Treasury Internal Revenue Service (99)

## Itemized Deductions

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

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

Caution: Do not include expenses reimbursed or paid by others. 1 Medical and dental expenses (see instructions)
2 Enter amount from Form 1040 or 1040-SR, line 8b
3 Multiply line 2 by $7.5 \%$ ( 0.075 ) . . . . . . . . . . . . . 3 28,497,508 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- . . . . . . . . . 4 79,060,485

## Taxes You 5 State and local taxes.

Paid
a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5 a, but not both. If you elect to include general sales taxes instead of income taxes, check this box
b State and local real estate taxes (see instructions).
c State and local personal property taxes
d Add lines 5a through 5c
e Enter the smaller of line 5 d or $\$ 10,000$ ( $\$ 5,000$ if married filing separately)
6 Other taxes. List type and amount
7 Add lines 5e and 6
Interest
You Paid
Caution: Your mortgage interest deduction may be limited (see instructions).

8 Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box
a Home mortgage interest and points reported to you on Form 1098. See instructions if limited



Your social security number

138,949,911
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., and address .


10 Add lines 8 e and 9
11 Gifts by cash or check. If you made any gift of $\$ 250$ or more, see instructions
12 Other than by cash or check. If you made any gift of $\$ 250$ or more, see instructions. You must attach Form 8283 if over $\$ 500$.
13 Carryover from prior year

|  |  |
| :---: | :---: |
| $8 a$ | $180,253,174$ |
|  |  |
|  |  |
| $8 b$ | $3,386,497$ |
| $8 c$ | $1,061,715$ |
| $8 d$ | $2,841,620$ |
| $8 e$ | $185,020,702$ |
| 9 | $19,899,016$ |

14 Add lines 11 through 13


For Paperwork Reduction Act Notice, see the Instructions for Forms 1040 and 1040-SR. Cat. No. 17145C Schedule A (Form 1040 or 1040-SR) 2019


Note: If line 6 is over $\$ 1,500$, you must complete Part III.
Part III You must complete this part if you (a) had over $\$ 1,500$ of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.
Foreign Accounts and Trusts

7a At any time during 2019, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions
If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements
b If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located

8 During 2019, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions

Caution: If required, failure to file FinCEN Form 114 may result in substantial penalties. See instructions.

SCHEDULE B
(Form 1040 or 1040-SR)
Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on return

## Interest and Ordinary Dividends

- Go to www.irs.gov/ScheduleB for instructions and the latest information. $\rightarrow$ Attach to Form 1040 or 1040-SR.

Total schedules filed $=\mathbf{2 4 , 5 0 9 , 3 9 9}$

## Part I

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

## (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

## form.

$\qquad$
$\qquad$
$\qquad$
$\qquad$

## Part II

Ordinary

## Dividends

(See instructions

## and the

instructions for
Forms 1040 and
1040-SR, line 3b.)
Note: If you
received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary 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


2 Add the amounts on line 1
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815.
4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b
Note: If line 4 is over $\$ 1,500$, you must complete Part III.
5 List name of payer

Note: If line 6 is over $\$ 1,500$, you must complete Part III.
Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

## Foreign

 Accounts and TrustsCaution: If required, failure to file FinCEN Form 114 may result in substantial penalties. See instructions.

7a At any time during 2019, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions
If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements
b If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located
8 During 2019, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions

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


| SCHEDULE C <br> (Form 1040 or 1040-SR) <br> Department of the Treasury Internal Revenue Service (99) | Profit or Loss From Business <br> (Sole Proprietorship) |  | OMB No. 1545-0074 |  |
| :---: | :---: | :---: | :---: | :---: |
|  | (Sole Proprietorship) <br> Go to www.irs.gov/ScheduleC for instructions <br> Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partner | Form 1065. |  |  |
| Name of proprietor | chedules filed = 31,516,038 | Social security number (SSN) |  |  |
| Principal business or profession, including product or service (see instructions) |  | B Enter code from instructions |  |  |
|  |  |  |  |  |
| Business name. If no separate business name, leave blank. |  | D Employer ID number (EIN) (see instr.) |  |  |
| Business address (including suite or room no.) City, town or post office, state, and ZIP code |  |  |  |  |
|  |  |  |  |  |
| Accounting method: <br> (1) $\square$ Cash <br> (2) $\square$ $\square$ Accrual <br> (3) $\square$ $\square$ Other (specify) $\qquad$ instructions for limit on losses |  |  |  |  |
|  |  |  | $\square \mathrm{Yes}$ | No |
| If you started or acquired this business during 2019, check here |  |  | - $\square$ |  |
| Did you make any payments in 2019 that would require you to file Form(s) 1099? (see instructions) |  |  | $\square \mathrm{Yes}$ | $\square$ No |
| If "Yes," did you or will you file required Forms 1099? |  |  | $\square$ Yes | No |

## 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

|  |  |
| :---: | :---: |
| 1 | $26,267,257$ |
| 2 | 582,667 |
| 3 | $26,274,601$ |
| 4 | $4,083,609$ |
| 5 | $26,319,184$ |
| 6 | $1,133,512$ |
| 7 | $26,623,688$ |


| Part | II Expenses. Enter expenses for business use of your home only on line 30. |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 8 | Advertising . | 8 | 6,986,268 | 18 | Office expense (see instructions) |
| 9 | Car and truck expenses (see instructions). | 9 | 15,252,745 | 19 20 | Pension and profit-sharing plans Rent or lease (see instructions): |
| 10 | Commissions and fees | 10 | 1,511,136 | a | Vehicles, machinery, and equipment |
| 11 | Contract labor (see instructions) | 11 | 2,543,277 | b | Other business property |
| 12 | Depletion | 12 | 76,246 | 21 | Repairs and maintenance |
| 13 | Depreciation and section 179 expense deduction (not included in Part III) (see instructions). | 13 | 5,310,746 | 22 23 24 | Supplies (not included in Part III) Taxes and licenses Travel and meals: |
| 14 | Employee benefit programs (other than on line 19). | 14 | 218.786 | b | Travel . . . . . |
| 15 | Insurance (other than health) | 15 | 6,635,747 |  | instructions) |
| 16 | Interest (see instructions): |  |  | 25 | Utilities |
| a | Mortgage (paid to banks, etc.) | 16a | 476,623 | 26 | Wages (less employment credits). |
| b | Other | 16b | 1,504,638 | 27a | Other expenses (from line 48) |
| 17 | Legal and professional services | 17 | 9,318,969 |  | Reserved for future use |

28 Total expenses before expenses for business use of home. Add lines 8 through 27a . . . . . .
29 Tentative profit or (loss). Subtract line 28 from line 7.

| 18 | $8,572,787$ |
| :---: | :---: |
| 19 | 98,728 |
| 20 a | $2,124,918$ |
| 20 b | $3,533,936$ |
| 21 | $5,134,928$ |
| 22 | $12,759,472$ |
| 23 | $6,446,435$ |
| 24 a | $5,635,471$ |
| 24 b | $7,592,967$ |
| 25 | $14,832,262$ |
| 26 | $1,035,349$ |
| 27 a | $14,096,544$ |
| 27 b |  |
| 28 | $23,791,009$ |
| 29 | $27,584,359$ |
|  |  |

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:
1,963,832 and (b) the part of your home used for business: $\qquad$ . Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30
31 Net profit or (loss). Subtract line 30 from line 29.

- If a profit, enter on both Schedule 1 (Form 1040 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Schedule SE, line 2. (If you 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 .

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 or 1040-SR), line 3 (or Form 1040-NR, line 13) and on Scheaundsductible (losou (theckusqended Ioss harrvaker (-) 31 instructions). Estates and trusts, enter on Form 1041, line 3. 223,587
- If you checked 32b, you must attach Form 6198. Your loss may be limited.

Total Boxes Checked $=\mathbf{7 , 0 7 2 , 4 3 6}$

32a $\square$All investment is at risk. 32bSome investment is not at risk.


Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation
$\cdot . \quad \square$ Yes $\quad \square$ No

| 35 | $1,121,210$ |
| :--- | :---: |
| 36 | $2,191,429$ |
| 37 | 502,360 |
| 38 | $1,819,242$ |
| 39 | 884,981 |
| 40 |  |
| 41 | $1,118,865$ |
| 42 |  |

42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4
42
Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck 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) $\square$ 1 1

44 Of the total number of miles you drove your vehicle during 2019, enter the number of miles you used your vehicle for:
a Business $\qquad$ b Commuting (see instructions)

c Other $\qquad$
45 Was your vehicle available for personal use during off-duty hours?YesNo

46 Do you (or your spouse) have another vehicle available for personal use?. Yes No

47a Do you have evidence to support your deduction? Yes No
b If "Yes," is the evidence written?

## Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30 .

$\qquad$

## 2019 Line Item Estimates-All figures are estimates based on samples.

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


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 2019, enter the number of miles you used your vehicle for:
a Business $\qquad$ b Commuting (see instructions)
c Other

45 Was your vehicle available for personal use during off-duty hours?


46 Do you (or your spouse) have another vehicle available for personal use?.
Yes No

47a Do you have evidence to support your deduction? YesNo
b If "Yes," is the evidence written?


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

SCHEDULE D
(Form 1040 or 1040-SR)

Department of the Treasury Internal Revenue Service (99)

## Capital Gains and Losses

\author{

- Attach to Form 1040, 1040-SR, or 1040-NR. <br> - Go to www.irs.gov/ScheduleD for instructions and the latest information. <br> - Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.
}

Attachment Sequence No. 12

Total schedules filed $=\mathbf{2 2 , 6 2 4 , 7 2 9}$ Total Sales Reported with Form $1099=18,464,695$
Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? $\quad \square$ Yes $\square$ No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

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

| See instructions for how to figure the amounts to enter on the lines below. <br> This form may be easier to complete if you round off cents to whole dollars. | (d) <br> Proceeds (sales price) | (e) Cost (or other basis) | (g) <br> Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g) |  | (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 . | 3,422,682 | 3,397,152 |  |  | 3,294,974 |
| 1b Totals for all transactions reported on Form(s) 8949 with Box A checked | 8,695,977 | 8,663,679 | 2,240,047 |  | 8,321,023 |
| 2 Totals for all transactions reported on Form(s) 8949 with Box B checked | 2,283,389 | 1,975,177 | 235,204 |  | 1,870,074 |
| 3 Totals for all transactions reported on Form(s) 8949 with Box C checked | 728,955 | 745,310 | 77,329 |  | 677,794 |
| Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 <br> Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 |  |  |  | 4 | 438,847 |
|  |  |  |  | 5 | 1,020,624 |
| 6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions |  |  |  | 6 | 2,188,923 ) |
| 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back |  |  |  | 7 | 13,514,860 |

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

| See instructions for how to figure the amounts to enter on the lines below. <br> This form may be easier to complete if you round off cents to whole dollars. | (d) <br> Proceeds (sales price) | (e) 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 . | 3,484,976 | 3,456,840 |  |  | 3,390,146 |
| 8b Totals for all transactions reported on Form(s) 8949 with Box D checked | 8,806,482 | 8,784,388 | 1,950,879 |  | 8,508,046 |
| 9 Totals for all transactions reported on Form(s) 8949 with Box E checked | 5,805,860 | 5,416,992 | 318,547 |  | 5,428,326 |
| 10 Totals for all transactions reported on Form(s) 8949 with Box F checked. | 2,205,036 | 2,060,715 | 954,857 |  | 1,551,504 |
| 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 <br> 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 <br> 13 Capital gain distributions. See the instructions <br> 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions |  |  |  | 11 | 2,251,174 |
|  |  |  |  | 12 | 1,864,867 |
|  |  |  |  | 13 | 9,854,691 |
|  |  |  |  | 14 | 3,818,930 |
| Net long-term capital gain or (loss). Combine lines 8 a through 14 in column (h). Then go to Part III on the back. |  |  |  | 15 | 19,123,656 |

SCHEDULE D
(Form 1040 or 1040-SR)

Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on return
Total schedules filed $=\mathbf{2 2 , 6 2 4 , 7 2 9}$ Total Sales Reported with Form $1099=\mathbf{7 , 1 8 2}$,
Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? $\quad \square$ Yes $\square$ No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.
Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions)
Part I Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions)
See instructions for how to figure the amounts to enter on the lines below.
This form may be easier to complete if you round off cents to whole dollars.


## Capital Gains and Losses

# - Attach to Form 1040, 1040-SR, or 1040-NR. <br> - Go to www.irs.gov/ScheduleD for instructions and the latest information. <br> - Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10. 

| 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) Cost (or other basis) | (g) <br> Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g) |  | (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 | 388,887,325 | 390,894,855 |  |  | -2,007,529 |
| 1b Totals for all transactions reported on Form(s) 8949 with Box A checked | 3,155,799,478 | 3,248,547,662 | 93,901,878 |  | 1,153,694 |
| 2 Totals for all transactions reported on Form(s) 8949 with Box B checked | 1,218,863,056 | 1,223,292,009 | 5,164,158 |  | 735,205 |
| 3 Totals for all transactions reported on Form(s) 8949 with Box C checked | 162,381,067 | 170,315,195 | 2,983,193 |  | -4,950,935 |
| Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 |  |  |  | 4 | 1,196,080 |
|  |  |  |  | 5 | 14,166,652 |
| Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions |  |  |  | 6 | 177,543,031 ) |
| Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back |  |  |  | 7 | -167,249,861 |

4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1

Attachment Sequence No. 12

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

See instructions for how to figure the amounts to enter on the lines below.
This form may be easier to complete if you round off cents to whole dollars.


## Part III Summary

| 16 | Combine lines 7 and 15 and enter the result | 16 | 21,705,174 |
| :---: | :---: | :---: | :---: |
|  | - If line 16 is a gain, enter the amount from line 16 on Form 1040 or 1040-SR, line 6; or Form 1040-NR, line 14. Then go to line 17 below. <br> - If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21 . Also be sure to complete line 22. <br> - If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040 or 1040-SR, line 6; or Form 1040-NR, line 14. Then go to line 22. |  |  |
| 17 | Are lines 15 and 16 both gains? Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. |  |  |
| 18 | If you are required to complete the $\mathbf{2 8} \%$ Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet | 18 | 65,005 |
| 19 | If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet | 19 | 1,639,906 |
| 20 | Are lines 18 and 19 both zero or blank? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42). 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 or $1040-$ SR, line 6; or Form 1040-NR, line 14, the smaller of: |  |  |
|  | - The loss on line 16; or <br> - $(\$ 3,000)$, 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 or $1040-$ SR, line 3a; or Form 1040-NR, line 10b?Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42). |  |  |
|  |  |  |  |
|  | $\square$ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR. |  |  |

## Part III

## Summary

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 or $1040-S R$, line 6 ; or Form 1040-NR, line 14. 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 or $1040-$ SR, line 6; or Form 1040-NR, line 14. Then go to line 22.

17 Are lines 15 and 16 both gains?Yes. Go to line 18.No. Skip lines 18 through 21, and go to line 22.

18 If you are required to complete the $\mathbf{2 8 \%}$ Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet

19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet

20 Are lines 18 and 19 both zero or blank?Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42). 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 or 1040-SR, line 6; or Form 1040-NR, line 14, the smaller of:

- The loss on line 16 ; or
- (\$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 or 1040-SR, line 3a; or Form 1040-NR, line 10b?Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 12a (or in the instructions for Form 1040-NR, line 42).No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

| SCHEDULE E |
| :--- |
| (Form 1040 or 1040-SR) |
| Department of the Treasury |
| Internal Revenue Service (99) |

Supplemental Income and Loss<br>(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)<br>- Attach to Form 1040, 1040-SR, 1040-NR, or 1041.<br>- Go to www.irs.gov/ScheduleE for instructions and the latest information.

Part I 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 2019 that would require you to file Form(s) 1099? (see instructions) $\square$ <br> B If "Yes," did you or will you file required Forms 1099? |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1a | Physical address of each property (street, city, state, ZIP code) |  |  |  |  |  |  |  |
| A | Number of Returns with Rental Properties = 9,890,587 |  |  | Total Number of Rental Properties $=17,165,483$ |  |  |  |  |
| B | Number of Returns with Rovalties = |  | 1,916,186 | Total Number of Rovalties = |  |  | 2,822,580 |  |
| C |  |  |  |  |  |  |  |  |
| 1b | Type of Property (from list below) | 2 For each rental real estate property listed |  |  | Fair Rental Days | Personal Use Days | QJ |  |
| A |  |  |  | A |  |  | $\square$ |  |
| B |  |  |  | B |  |  | $\square$ |  |
| C |  |  |  | C |  |  | $\square$ |  |

Type of Property:


SCHEDULE E
(Form 1040 or 1040-SR)
Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on return

## 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.


Attachment Sequence No. 13 Total schedules filed $=19,554,982$

Your social security number

## Part I

 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 payment |  |
| :---: | :---: |
| B If "Yes," did you or will you |  |
| 1a | Physical address of ea |
| A |  |
| B |  |
| C |  |
| 1b | Type of Property (from list below) |
| A |  |
| B |  |
| C |  |

## Type of Property:

| 1 Single | le Family Residence | 3 Vacation/Short-Term Rental | 5 Land <br> 6 Royalties |  | 7 Self-Rental |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | i-Family Residence | 4 Commercial |  |  | 8 Other (describe) |  |  | C |
| Income: |  | Properties: |  | RENT A |  |  |  |  |
| 3 R | Rents received . . . . . . . . . . . . . |  | 3 | 365,137,426 |  |  |  |  |
| 4 R | Royalties received |  | 4 |  |  | 36,243,503 |  |  |
| Expenses:5 Advertising . . . . . . . . . . . . . .5 |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 A | Auto and travel (see instructions) |  | 6 |  |  |  |  |  |
| 7 C | Cleaning and maintenance |  | 7 |  |  |  |  |  |
| 8 C | Commissions. |  | 8 |  |  |  |  |  |
| 9 I | Insurance |  | 9 |  |  |  |  |  |
| 10 L | Legal and other professional fees |  | 10 |  |  |  |  |  |
| 11 | Management fees |  | 11 |  |  |  |  |  |
| 12 | Mortgage interest paid to banks, etc. (see instructions) |  | 12 | 56,866,799 |  |  |  |  |
| 13 | Other interest. |  | 13 |  |  |  |  | 7,123,612 |
| 14 R | Repairs. |  | 14 |  |  |  |  |  |
| 15 S | Supplies |  | 15 |  |  |  |  |  |
| 16 T | Taxes . |  | 16 | 54,740,277 |  |  |  |  |
| 17 U | Utilities |  | 17 |  |  |  |  |  |
| 18 D | Depreciation expense or depletionOther (list) |  | 18 | 92,548,188 |  | 4,060,558 |  |  |
| 19 |  |  | 19 |  |  |  |  |  |
| 20 T | Total expenses. Add lines 5 through 19. |  | 20 | 342,826,739 |  | 10,684,959 |  |  |
| 21 S | 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 |  | 21 | 22,316,308 |  | 25.558.544 |  |  |
| 22 D | Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) |  | 22 | ( 52,747,123 | nondeductible rental loss $=24,029,494$ <br> suspended loss carryover $=12,932,565$ ) |  |  |  |
| 23a | Total of all amounts reported on line 3 for all rental properties . . . . ${ }^{\text {a }}$ 23a $365,137,426$ |  |  |  |  |  |  |  |
| $b$ T | Total of all amounts reported on line 4 for all royalty properties |  |  |  | 23b | 36,243,503 |  |  |
| c | Total of all amounts reported on line 12 for all properties |  |  |  | 23c | 56,866,799 |  |  |
| d | Total of all amounts reported on line 18 for all properties |  |  |  | 23d | 96,608,746 |  |  |
| e T | Total of all amounts reported on line 20 for all properties |  |  |  | 23e | 353,506,077 |  |  |
| 24 | Income. Add positive amounts shown on line 21. Do not include any losses |  |  |  |  |  | 24 | 125,628,659 |
| 25 L | Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . |  |  |  |  |  | 25 | (66,656,878 ) |
| 26 T | 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 or 1040-SR), line 5, or Form 1040-NR, line 18. Otherwise, include this amount in the total on line 41 on page 2 . |  |  |  |  |  | 26 | 58,971,781 |

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.
Part II Income or Loss From Partnerships and S Corporations - Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you must check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (f) on line 28 and attach Form 6198 (see instructions). Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section
$\square$ Yes $\square$ No



Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.
Part II Income or Loss From Partnerships and S Corporations - Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you must check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (f) on line 28 and attach Form 6198 (see instructions). Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section
$\square$ Yes
No


## Part III Income or Loss From Estates and Trusts

33
(a) Name
(b) Employer
identification number


31,351,725


## 2019 Line Item Estimates—All figures are estimates based on samples. Number of returns filed for selected lines

SCHEDULE EIC

## (Form 1040 or 1040-SR)

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

Earned Income Credit
Qualifying Child Information
Complete and attach to Form 1040 or 1040-SR only if you have a qualifying child.


Total schedules filed $=\mathbf{1 9 , 1 7 0 , 8 9 2}$
Before you begin:

- See the instructions for Form 1040 or 1040-SR, line 18a, 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.


## Qualifying Child Information

Child 1
Child 2
Child 3

| 1 Child's name <br> If you have more than three qualifying children, you have to list only three to get the maximum credit. | First name Last name | First name Last name | First name Last name |
| :---: | :---: | :---: | :---: |
| 2 Child's SSN <br> The child must have an SSN as defined in the instructions for Form 1040 or 1040-SR, line 18a, unless the child was born and died in 2019. If your child was born and died in 2019 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. | 19,168,887 | 9,767,324 | 3,337,885 |
| 3 Child's year of birth | Year 19.170.892 <br> If born after 2000 and the child is younger than you (or your spouse, filing jointly), skip lines $4 a$ and $4 b$; go to line 5. | Year 9.767.324 $\qquad$ <br> If born after 2000 and the child is younger than you (or your spouse, $i$ filing jointly), skip lines $4 a$ and $4 b$; go to line 5. | Year 3.337.885 $\qquad$ <br> If born after 2000 and the child is younger than you (or your spouse, if filing jointly), skip lines $4 a$ and $4 b$; go to line 5. |
| 4 a Was the child under age 24 at the end of 2019, a student, and younger than you (or your spouse, if filing jointly)? | $\square$ Yes. $\square$ No. $1,361,735$ $\text { line } 4 b \text {. }$ | $\square$ Yes. $\square$ No. <br> 394,613 ve $4 b$. <br> line 5. | $\square$ Yes. $\square$ No. (124,565 <br> line 5. |
| b Was the child permanently and totally disabled during any part of 2019 ? | 13.188 $\square$ No. <br> Go to <br> The child is not a <br> line 5. qualifying child. | $\square$ 111.686 $\square$ No. <br> Go to <br> The child is not a <br> line 5. qualifying child. | $\square$ 34,384 $\quad \square$No. <br> Go to The child is not a <br> line 5. qualifying child. |
| 5 Child's relationship to you <br> (for example, son, daughter, grandchild, niece, nephew, eligible foster child, etc.) | 19,170,892 | 9,767,324 | 3,337,885 |
| 6 Number of months child lived with you in the United States during 2019 <br> - If the child lived with you for more than half of 2019 but less than 7 months, enter " 7 ." <br> - If the child was born or died in 2019 and your home was the child's home for more than half the time he or she was alive during 2019, enter " 12. ." | 19,170,892 <br> montns <br> Do not enter more than 12 months. | $9,766,322$ $\qquad$ IIUIIIIS <br> Do not enter more than 12 months. | 3,337,885 <br> Do not enter more than 12 months. |



1

- 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.


## Qualifying Child Information

Child 1
Child 2
Child 3

|  | Child's name <br> If you have more than three qualifying children, you have to list only three to get the maximum credit. | First name | Last name | First name | Last name | First name | Last name |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 2 Child's SSN <br> The child must have an SSN as defined in the instructions for Form 1040 or 1040-SR, line 18a, unless the child was born and died in 2019. If your child was born and died in 2019 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 <br> If born after 2000 and the child is younger than you (or your spouse, if filing jointly), skip lines $4 a$ and $4 b$; go to line 5 . |  | Year <br> If born after 2000 and the child is younger than you (or your spouse, if filing jointly), skip lines $4 a$ and $4 b$; go to line 5. |  | Year <br> If born after 2000 and the child is younger than you (or your spouse, if filing jointly), skip lines $4 a$ and $4 b$; go to line 5. |  |
| $4 \mathbf{a}$ Was the child under age 24 at the end of 2019, a student, and younger than you (or your spouse, if filing jointly)? |  | Yes. <br> Go to <br> line 5. | No. <br> Go to line 4b. | Yes. <br> Go to line 5. | No. <br> Go to line 4b. | Yes. <br> Go to line 5. | No. <br> Go to line $4 b$. |
| b Was the child permanently and totally disabled during any part of 2019 ? |  | Yes. <br> Go to line 5. | $\square$ No. <br> The child is not a qualifying child. | Yes. <br> Go to line 5. | No. <br> The child is not a qualifying child. | Yes. <br> Go to line 5. | No. <br> The child is not a qualifying child. |
| 5 Child's relationship to you <br> (for example, son, daughter, grandchild, niece, nephew, eligible foster child, etc.) |  |  |  |  |  |  |  |
| 6 Number of months child lived with you in the United States during 2019 <br> - If the child lived with you for more than half of 2019 but less than 7 months, enter "7." |  | $\qquad$ months Do not enter more than 12 months. |  | Do not enter more than 12 months. |  | Do not enter more than 12 months. |  |
| For Paperwork Reduction Act Notice, see your tax return instructions. |  |  |  | No. 13339M Schedule EIC (Form 1040 or 1040-SR) 2019 |  |  |  |

## SCHEDULE F (Form 1040 or 1040-SR) <br> Department of the Treasury

 Internal Revenue Service (99)
## Profit or Loss From Farming

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

Part I Farm Income-Cash Method. Complete Parts I and II. (Accrual method. Complete Parts II and III, and Part I, line 9.)
$1 a$
$b$
$c$
2
$3 a$
$4 a$
$5 a$
$b$
6
$a$
$c$
7
8
9
a Sales of livestock and other resale items (see instructions).
b Cost or other basis of livestock or other items reported on line 1a.
c Subtract line 1b from line 1a.

|  | . | $\cdot$ | $1 a$ |
| :---: | :---: | :---: | :---: |
|  | $\cdot$ | $\cdot$ | $1 b$ |
|  |  | 194,214 |  |

2 Sales of livestock, produce, grains, and other products you raised

| 3a | Cooperative distributions (Form(s) 1099-PATR). | 3a | ** | 427,972 |
| :--- | :--- | :--- | :--- | :--- |
|  | 4a | Agricultural program payments (see instructions) . | $\mathbf{4 a}$ | ** 483,175 |
|  |  |  |  |  | 3b Taxable amount

a Commodity Credit Corporation (CCC) loans reported under election
b CCC loans forfeited . . . . . . . . . $|5 \mathrm{5b}|$ ** 1,185
6 Crop insurance proceeds and federal crop disaster payments (see instructions):
a Amount received in 2019 . . . . . . . $6 \mathbf{6 a} \quad 141,153$
c If election to defer to 2020 is attached, check here


6b Taxable amount

7 Custom hire (machine work) income
8 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)
9 Gross income. Add amounts in the right column (lines $1 \mathrm{c}, 2,3 \mathrm{~b}, 4 \mathrm{~b}, 5 \mathrm{a}, 5 \mathrm{c}, 6 \mathrm{~b}, 6 \mathrm{~d}, 7$, and 8 ). If you use the accrual method, enter the amount from Part III, line 50. See instructions
Part II Farm Expenses-Cash and Accrual Method. Do not include personal or living expenses. See instructions.


36 Check the box that describes your investment in this activity and see instructions for where to report your loss:
a $\square$ All investment is at risk. b $\square$ Some investment is not at risk.
For Paperwork Reduction Act Notice, see the separate instructions.
Cat. No. 11346H
Schedule F (Form 1040 or 1040-SR) 2019
**Denotes that the line item is the addition of both cash and accrual methods of accounting

## SCHEDULE F

(Form 1040 or 1040-SR)
Department of the Treasury Internal Revenue Service (99)

## Profit or Loss From Farming

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

Attachment Sequence No. 14


Part I Farm Income-Cash Method. Complete Parts I and II. (Accrual method. Complete Parts II and III, and Part I, line 9.)


Part II Farm Expenses-Cash and Accrual Method. Do not include personal or living expenses. See instructions.

| 10 | Car and truck expenses (see instructions). Also attach Form 4562 |  |  | $\begin{aligned} & 23 \\ & 24 \end{aligned}$ | Pension and profit-sharing plans. <br> Rent or lease (see instructions): | 23 | 13,460 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 10 | 1,732,095 |  |  |  |  |
| 11 | Chemicals | 11 | 7,681,365 | a | Vehicles, machinery, equipment | 24a |  |
| 12 | Conservation expenses (see instructions) | 12 | 121,403 | $b$ | Other (land, animals, etc.) | 24b |  |
| 13 | Custom hire (machine work) | 13 | 5,331,934 | 25 | Repairs and maintenance | 25 | 10,749,149 |
| 14 | Depreciation and section 179 expense |  |  | 26 | Seeds and plants | 26 | 10,375,842 |
|  | (see instructions) . | 14 | 33,590,948 | 27 | Storage and warehousing | 27 |  |
| 15 | Employee benefit programs other than |  |  | 28 | Supplies . | 28 | 5,305,277 |
|  | on line 23 . . . . . . . . | 15 | 301,546 | 29 | Taxes | 29 | 4,047,522 |
| 16 | Feed | 16 | 17,752,932 | 30 | Utilities | 30 |  |
| 17 | Fertilizers and lime | 17 | 13,205,468 | 31 | Veterinary, breeding, and medicine | 31 |  |
| 18 | Freight and trucking | 18 |  | 32 | Other expenses (specify): |  |  |
| 19 | Gasoline, fuel, and oil . | 19 | 6,237,892 | a |  | 32a |  |
| 20 | Insurance (other than health) | 20 | 5,996,694 | b |  | 32b |  |
| 21 | Interest (see instructions): |  |  | c |  | 32c |  |
| a | Mortgage (paid to banks, etc.) | 21a | 4,967,932 | d |  | 32d |  |
| b | Other | 21b | 4,557,653 | e |  | 32e |  |
| 22 | Labor hired (less employment credits) | 22 | 6,822,958 | f |  | 32f |  |
| 33 | Total expenses. Add lines 10 through | If | 32 f is negative | stru | ns | 33 | 177,199,580 |
| 34 | Net farm profit or (loss). Subtract lin |  | 9 Total ọ | nma | ed expenses . 38,407,509 | 34 | -23,797,084 |


35 Reserved for future use.
267,932
36 Check the box that describes your investment in this activity and see instructions for where to report your loss:
a $\square$ All investment is at risk.

| Farm Income-Accrual Method (see instructions). |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 37 | Sales of livestock, produce, grains, and other products (see instructions) |  |  | 38b | Taxable amount |  | . |  | $37$ <br> 38b | 964,608 |  |
| 38a | Cooperative distributions (Form(s) 1099-PATR) | 38a | ** 427,972 |  |  |  | . |  |  | ** | 414,908 |
| 39a | Agricultural program payments | 39a | ** 483,175 | 39b | Taxable amount |  | . |  | 39b | ** 478,194 |  |
| $\begin{gathered} 40 \\ \quad \text { a } \end{gathered}$ | Commodity Credit Corporation (CCC) loans: |  |  |  |  |  |  |  | 40a | ** 3,613 |  |
| b | CCC loans forfeited . . . . . . . . . $\left.\bigsqcup 40 \mathrm{~b}\right\|^{* *} 1,185$ |  |  |  | Taxable amount |  | . |  | 40c | ** 1,148 |  |
| 41 | Crop insurance proceeds . . . . . . . . . . . . . . . . . . . . . . . . . . 41 |  |  |  |  |  |  |  |  |  |  |
| 42 | Custom hire (machine work) income . . . . . . . . . . . . . . . . . . . . . . . 42 ** 154,354 |  |  |  |  |  |  |  |  |  |  |
| 43 | Other income (see instructions) . . . . . . . . . . . . . . . . . . . . . . . . . 43 |  |  |  |  |  |  |  |  | ** | 521,491 |
| 44 | Add amounts in the right column for lines 37 through 43 (lines 37, 38b, 39b, 40a, 40c, 41, 42, and 43) |  |  |  |  |  |  |  | 44 |  | 9,504 |
| 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 . . . . . . . . . . . . . . . . . . . . |  |  |  | 47 |  |  |  |  |  |  |
| 48 | Inventory of livestock, produce, grains, and other products at end of year . . . . 48 |  |  |  |  |  |  |  |  |  |  |
| 49 | Cost of livestock, produce, grains, and other products sold. Subtract line 48 from line 47* |  |  |  |  |  |  |  | 49 |  |  |
| 50 | Gross income. Subtract line 49 from line 44. Enter the result here and on Part I, line 9 |  |  |  |  |  |  |  | 50 |  | 9,503 |

*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

CAUTION
Do not file Schedule F (Form 1040 or 1040-SR) 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 or 1040-SR).
- Income from breeding, raising, or caring for dogs, cats, or other pet animals. Instead, file Schedule C (Form 1040 or 1040-SR).
- 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)

Amounts of selected lines filed (in thousands of dollars)

Part III Farm Income-Accrual Method (see instructions).

*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

1Do not file Schedule F (Form 1040 or 1040-SR) 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 or 1040-SR).
- Income from breeding, raising, or caring for dogs, cats, or other pet animals. Instead, file Schedule C (Form 1040 or 1040-SR).
- 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)


You may be able to take this credit and reduce your tax if by the end of 2019:

- 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.
TIIP In most cases, the IRS can figure the credit for you. See instructions.
Part I Check the Box for Your Filing Status and Age
If your filing status is: And by the end of 2019: Check only one box:

Single,
Head of household, or
Qualifying widow(er)

1 You were 65 or older . . . . . . . . . . . . . . . . . . . . 1
2 You were under 65 and you retired on permanent and total disability . . 2

3 Both spouses were 65 or older.
4 Both spouses were under 65, but only one spouse retired on permanent and total disability
4

## Married filing <br> jointly

5 Both spouses were under 65, and both retired on permanent and total disability
5

6 One spouse was 65 or older, and the other spouse was under 65 and retired on permanent and total disability

6
7 One spouse was 65 or older, and the other spouse was under 65 and not retired on permanent and total disability

8 You were 65 or older and you lived apart from your spouse for all of 2019 . . 8
Married filing separately

9 You were under 65, you retired on permanent and total disability, and you lived apart from your spouse for all of 2019

| Did you check |
| :--- |
| box $1,3,7$, or $8 ?$ |

Yes $\longrightarrow$ Skip Part II and complete Part III on the back.

Part II Statement of Permanent and Total Disability (Complete only if you checked box 2, 4, 5, 6, or 9 above.)
If: 1 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 in 2019, check this box

- If you checked this box, you don't have to get another statement for 2019.
- 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 or 1040-SR)

Department of the Treasury Internal Revenue Service (99)

## 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.

Total schedules filed $=\mathbf{4 5 , 0 4 9}$
You may be able to take this credit and reduce your tax if by the end of 2019:

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


## Part I Check the Box for Your Filing Status and Age

If your filing status is: And by the end of 2019: Check only one box:

Single,
Head of household, or
Qualifying widow(er)

1 You were 65 or older . . . . . . . . . . . . . . . . . . . . 1
2 You were under 65 and you retired on permanent and total disability . . 2

3 Both spouses were 65 or older.
4 Both spouses were under 65, but only one spouse retired on permanent and total disability ..... 4

Married filing
jointly
5 Both spouses were under 65, and both retired on permanent and total disability
5

6 One spouse was 65 or older, and the other spouse was under 65 and retired on permanent and total disability

7 One spouse was 65 or older, and the other spouse was under 65 and not retired on permanent and total disability

8 You were 65 or older and you lived apart from your spouse for all of 2019 . . 8
Married filing
separately

9 You were under 65, you retired on permanent and total disability, and you
lived apart from your spouse for all of 2019 Yes $\longrightarrow$ Skip Part II and complete Part III on the back.
Did you check
box $1,3,7$, or 8 ? $\square$ No $\longrightarrow$ 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.)

If: 1 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 in 2019, check this box

- If you checked this box, you don't have to get another statement for 2019.
- If you didn't check this box, have your physician complete the statement in the instructions. You must keep the statement for your records.


## Part III Figure Your Credit

10 If you checked (in Part I):
Enter:
Box $1,2,4$, or 7 . . . . . . . . . . . . $\$ 5,000$

Box 3,5 , or 6 . . . . . . . . . . . . . $\$ 7,500$
Box 8 or 9
\$3,750


Did you check box 2, 4, 5, 6, or 9 in Part I? Yes You must complete line 11.

11 If you checked (in Part I):

- Box 6 , add $\$ 5,000$ to the taxable disability income of the spouse who was under age 65 . Enter the total.
- Box 2,4 , or 9 , enter your taxable disability income.
- Box 5 , add your taxable disability income to your spouse's taxable disability income. Enter the total.
TIIP For more details on what to include on line 11, see Figure Your Credit in the instructions.
12 If you completed line 11, enter the smaller of line 10 or line 11. All others, enter the amount from line 10

Enter the amount from line 10 on line 12 and go to line 13.


13 Enter the following pensions, annuities, or disability income that you (and your spouse if filing jointly) received in 2019.
a Nontaxable part of social security benefits and nontaxable part of railroad retirement benefits treated as social security (see instructions)
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)
c Add lines 13a and 13b. (Even though these income items aren't taxable, they must be included here to figure your credit.) If you didn't receive any of the types of nontaxable income listed on line 13a or $13 b$, enter -0 - on line $13 c$
14 Enter the amount from Form 1040 or 1040-SR, line 8b.
15 If you checked (in Part I):
Enter:
Box 1 or 2
Box 3, 4, 5, 6, or 7 \$7,500 Box 8 or 9 . . . . . . . . . $\$ 5,000$ \$10,000

16 Subtract line 15 from line 14. If zero or less, enter -0-
17 Enter one-half of line 16

| 14 |  |
| :--- | :--- | :--- |
|  |  |
| 15 |  |
|  |  |
| 16 | 43,659 |

18 Add lines 13c and 17


19 Subtract line 18 from line 12. If zero or less, stop; you can't take the credit. Otherwise, go to line 20.

| 18 | 43,669 |
| :---: | :---: |
| 19 | 43,010 |
| 20 |  |
| 21 |  |
| 22 | 40,998 |

20 Multiply line 19 by $15 \%$ (0.15)
21 Tax liability limit. Enter the amount from the Credit Limit Worksheet in the instructions
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 or 1040-SR), line 6 (check box c and enter "Sch R" on the line next to that box)

[^0]
## Part III Figure Your Credit

10 If you checked (in Part I): Enter:
Box $1,2,4$, or 7 . . . . . . . . . . . . $\$ 5,000$

Box 3,5 , or 6 . . . . . . . . . . . . . $\$ 7,500$
Box 8 or 9
\$3,750


- 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.

TIP For more details on what to include on line 11, see Figure Your Credit in the instructions.
12 If you completed line 11, enter the smaller of line 10 or line 11. All others, enter the amount from line 10

12
230,558

13 Enter the following pensions, annuities, or disability income that you (and your spouse if filing jointly) received in 2019.
a Nontaxable part of social security benefits and nontaxable part of railroad retirement benefits treated as social security (see instructions)
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)
c Add lines 13a and 13b. (Even though these income items aren't taxable, they must be included here to figure your credit.) If you didn't receive any of the types of nontaxable income listed on line 13a or $13 b$, enter -0 - on line 13c
14 Enter the amount from Form 1040 or 1040-SR, line 8b.
15 If you checked (in Part I):
Enter:
Box 1 or 2 . . . . . . . . . $\$ 7,500$
Box 3, 4, 5, 6 , or 7 . . . . . . \$10,000
Box 8 or 9 \$5,000
16 Subtract line 15 from line 14 . If zero or less, enter -0-
17 Enter one-half of line 16
18 Add lines 13c and 17


19 Subtract line 18 from line 12. If zero or less, stop; you can't take the credit. Otherwise, go to line 20.
20 Multiply line 19 by $15 \%$ (0.15)
21 Tax liability limit. Enter the amount from the Credit Limit Worksheet in the instructions
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 or 1040-SR), line 6 (check box c and enter "Sch R" on the line next to that box)

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

| Department of the Treasury |
| :--- | :--- |
| Internal Revenue Service (99) |$\quad$ Go to www.irs.gov/ScheduleSE for instructions and the latest information.

Before you begin: To determine if you must file Schedule SE, see the instructions.

## May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note: Use this flowchart only if you must file Schedule SE. If unsure, see Who Must File Schedule SE in the instructions.


Section A-Short Schedule SE. Caution: Read above to see if you can use Short Schedule SE.
1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A .

| 1 a | 521,506 |
| :---: | :---: |
|  |  |
| 1 b | 20,197 |
|  |  |
| 2 | $20,207,631$ |
| 3 |  |
| 4 | $20,519,814$ |

3 Combine lines 1a, 1b, and 2
4 Multiply line 3 by $92.35 \%$ ( 0.9235 ). If less than $\$ 400$, you don't owe self-employment tax; don't file this schedule unless you have an amount on line 1b .

20,519,814
Note: If line 4 is less than $\$ 400$ due to Conservation Reserve Program payments on line 1b, see instructions.
5 Self-employment tax. If the amount on line 4 is:

- \$132,900 or less, multiply line 4 by $15.3 \%$ ( 0.153 ). Enter the result here and on Schedule 2 (Form 1040 or 1040-SR), line 4, or Form 1040-NR, line 55.
- More than $\$ 132,900$, multiply line 4 by $2.9 \%$ ( 0.029 ). Then, add $\$ 16,479.60$ to the result.

Enter the total here and on Schedule 2 (Form 1040 or 1040-SR), line 4, or Form 1040-NR, line 55 .
6 Deduction for one-half of self-employment tax.
Multiply line 5 by $50 \%$ (0.50). Enter the result here and on Schedule 1 (Form 1040 or 1040-SR), line 14, or Form 1040-NR, line 27

6

SCHEDULE SE
(Form 1040 or 1040-SR)

Department of the Treasury
Internal Revenue Service (99)
Name of person with self-employment income (as shown on Form 1040, 1040-SR, or 1040-NR) Total schedules filed $=21,817,853$

## Self-Employment Tax

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

Social security number of person with self-employment income

Before you begin: To determine if you must file Schedule SE, see the instructions.

## May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note: Use this flowchart only if you must file Schedule SE. If unsure, see Who Must File Schedule SE in the instructions.


Section A-Short Schedule SE. Caution: Read above to see if you can use Short Schedule SE.
1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A .

| 1 a | $10,286,550$ |
| :---: | :---: |
| 1 b |  |
|  |  |
| 2 | $667,370,345$ |
| 3 |  |
| 4 | $625,507,909$ |

Note: If line 4 is less than $\$ 400$ due to Conservation Reserve Program payments on line 1b, see instructions.
5 Self-employment tax. If the amount on line 4 is:

- \$132,900 or less, multiply line 4 by $15.3 \%$ ( 0.153 ). Enter the result here and on Schedule 2 (Form 1040 or $1040-S R$ ), line 4, or Form 1040-NR, line 55.
- More than $\$ 132,900$, multiply line 4 by $2.9 \%$ ( 0.029 ). Then, add $\$ 16,479.60$ to the result. Enter the total here and on Schedule 2 (Form 1040 or 1040-SR), line 4, or Form 1040-NR, line 55 .

5
67,278,410
6 Deduction for one-half of self-employment tax.
Multiply line 5 by $50 \%$ (0.50). Enter the result here and on Schedule 1 (Form 1040 or 1040-SR), line 14, or Form 1040-NR, line 27

## Section B-Long Schedule SE

## Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is church employee income, see instructions. Also see instructions for the definition of church employee income.

A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had $\$ 400$ or more of other net earnings from self-employment, check here and continue with Part I
1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. Note: Skip lines 1a and 1b if you use the farm optional method (see instructions)
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
2 Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report. Note: Skip this line if you use the nonfarm optional method (see instructions).

Social security number of person with self-employment income

Page 2

Combine lines $1 \mathrm{a}, 1 \mathrm{~b}$, and 2 .
4a If line 3 is more than zero, multiply line 3 by $92.35 \%$ ( 0.9235 ). Otherwise, enter amount from line 3 Note: If line 4 a is less than $\$ 400$ due to Conservation Reserve Program payments on line 1 b , see instructions.
b If you elect one or both of the optional methods, enter the total of lines 15 and 17 here
c Combine lines 4 a and 4 b . If less than $\$ 400$, stop; you don't owe self-employment tax. Exception: If less than $\$ 400$ and you had church employee income, enter -0 - and continue

| $1 a$ | 521,506 |
| :---: | :---: |
| $1 b$ | 20,197 |

5 Enter your church employee income from Form W-2. See instructions for definition of church employee income
b Multiply line 5 a by $92.35 \%$ ( 0.9235 ). If less than $\$ 100$, enter $-0-$
6 Add lines 4c and 5b
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 2019
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 \$132,900 or more, skip lines 8 b through 10, and go to line 11
b Unreported tips subject to social security tax (from Form 4137, line 10)
c Wages subject to social security tax (from Form 8919, line 10)
d Add lines $8 \mathrm{a}, 8 \mathrm{~b}$, and 8 c
9 Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11
10 Multiply the smaller of line 6 or line 9 by 12.4\% (0.124) .
11 Multiply line 6 by $2.9 \%$ (0.029)
12 Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040 or 1040-SR), line 4, or Form 1040-NR, line 55
$20,460,855$
13 Deduction for one-half of self-employment tax. Multiply line 12 by $50 \%$ ( 0.50 ). Enter the result here and on Schedule 1 (Form 1040 or 1040-SR), line 14, or Form 1040-NR, line 27

## Part II Optional Methods To Figure Net Earnings (see instructions)

Farm Optional Method. You may use this method only if (a) your gross farm income ${ }^{1}$ wasn't more than $\$ 8,160$, or (b) your net farm profits ${ }^{2}$ were less than $\$ 5,891$.
14 Maximum income for optional methods
15 Enter the smaller of: two-thirds (2/3) of gross farm income ${ }^{1}$ (not less than zero) or $\$ 5,440$. Also include this amount on line 4b above
Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits ${ }^{3}$ were less than $\$ 5,891$ and also less than $72.189 \%$ of your gross nonfarm income, ${ }^{4}$ and (b) you had net earnings from self-employment of at least $\$ 400$ 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.
17 Enter the smaller of: two-thirds $(2 / 3)$ of gross nonfarm income ${ }^{4}$ (not less than zero) or the amount on line 16. Also include this amount on line 4b above

|  |  |
| :---: | :---: |
| 14 | 5,440 |
| 15 | 18,036 |
|  |  |
| 16 |  |
| 17 | 12,652 |

[^1]Name of person with self-employment income (as shown on Form 1040, 1040-SR, or 1040-NR)
Social security number of person with self-employment income

## Section B-Long Schedule SE

## Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is church employee income, see instructions. Also see instructions for the definition of church employee income.
A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had $\$ 400$ or more of other net earnings from self-employment, check here and continue with Part I
1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. Note: Skip lines 1a and 1b if you use the farm optional method (see instructions)
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
2 Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report. Note: Skip this line if you use the nonfarm optional method (see instructions).
3 Combine lines 1a, 1b, and 2.
4a If line 3 is more than zero, multiply line 3 by $92.35 \%$ ( 0.9235 ). Otherwise, enter amount from line 3 Note: If line 4 a is less than $\$ 400$ due to Conservation Reserve Program payments on line 1 b , see instructions.
b If you elect one or both of the optional methods, enter the total of lines 15 and 17 here
c Combine lines 4 a and 4 b. If less than $\$ 400$, stop; you don't owe self-employment tax. Exception: If less than $\$ 400$ and you had church employee income, enter -0 - and continue

| $1 a$ | $10,286,550$ |
| :---: | :---: |
| $1 b$ | 175,403 |

5 Enter your church employee income from Form W-2. See instructions for definition of church employee income
b Multiply line 5 a by $92.35 \%$ ( 0.9235 ). If less than $\$ 100$, enter $-0-$
6 Add lines 4c and 5b
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 2019
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 \$132,900 or more, skip lines 8 b through 10, and go to line 11
b Unreported tips subject to social security tax (from Form 4137, line 10)
c Wages subject to social security tax (from Form 8919, line 10)
d Add lines $8 \mathrm{a}, 8 \mathrm{~b}$, and 8 c
9 Subtract line 8d from line 7. If zero or less, enter -0-here and on line 10 and go to line 11
10 Multiply the smaller of line 6 or line 9 by 12.4\% (0.124) .
11 Multiply line 6 by 2.9\% (0.029)
12 Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040 or 1040-SR), line 4, or Form 1040-NR, line 55

628,289,372

| $\mathbf{6}$ | $\mathbf{6 2 8 , 2 8 9 , 3 7 2}$ |
| ---: | ---: |
| $\mathbf{7}$ | 132,900 |

155,988,240

| $8 \mathbf{d}$ | $155,988,240$ |
| :---: | :---: |
| 9 |  |
| 10 | $49,057,239$ |
| 11 | $18,220,130$ |
|  |  |
| 12 | $67,278,410$ |

67,278,410

13 Deduction for one-half of self-employment tax. Multiply line 12 by $50 \%$ ( 0.50 ). Enter the result here and on Schedule 1 (Form 1040 or 1040-SR), line 14, or Form 1040-NR, line 27

## Part II Optional Methods To Figure Net Earnings (see instructions)

Farm Optional Method. You may use this method only if (a) your gross farm income ${ }^{1}$ wasn't more than $\$ 8,160$, or (b) your net farm profits ${ }^{2}$ were less than $\$ 5,891$.
14 Maximum income for optional methods
15 Enter the smaller of: two-thirds ( $2 / 3$ ) of gross farm income ${ }^{1}$ (not less than zero) or $\$ 5,440$. Also include this amount on line 4b above
Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits ${ }^{3}$ were less than $\$ 5,891$ and also less than $72.189 \%$ of your gross nonfarm income, ${ }^{4}$ and (b) you had net earnings from self-employment of at least $\$ 400$ 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.
17 Enter the smaller of: two-thirds ( $2 / 3$ ) of gross nonfarm income ${ }^{4}$ (not less than zero) or the amount on line 16. Also include this amount on line 4b above

|  |  |
| :---: | :---: |
| 14 | 5,440 |
| 15 | 103,612 |
|  |  |
| 16 |  |
| 17 | 58,709 |

[^2][^3]

## 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
101040 and Enter the total of the amounts from Schedule 1 (Form 1040 or 1040-SR), 1040-SR filers: line 14, and Schedule 2 (Form 1040 or $1040-S R$ ), line 5, plus any taxes that you identified using code "UT" and entered on Schedule 2 (Form 1040 or $1040-\mathrm{SR}$ ), line 8.

1040-NR filers: Enter the total of the amounts from Form 1040-NR, lines 27 and 56 , plus any taxes that you identified using code "UT" and entered on line 60.
11 Add lines 9 and 10
121040 and Enter the total of the amounts from Form 1040 or 1040-SR, line 1040-SR filers: 18a, and Schedule 3 (Form 1040 or 1040-SR), line 11.
1040-NR filers: Enter the amount from Form 1040-NR, line 67.
13 Subtract line 12 from line 11. If zero or less, enter -0-
14 Enter the larger of line 8 or line 13 . . . .
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

## SCHEDULE 8812

(Form 1040 or 1040-SR)

## Additional Child Tax Credit

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


Total schedules filed $=19,960,254$
Your social security number

## Part I All Filers

Caution: If you file Form 2555, stop here; 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:
1040 and Enter the amount from line 8 of your Child Tax Credit and Credit for Other Dependents 1040-SR filers: Worksheet (see the instructions for Forms 1040 and 1040-SR, line 13a).
1040-NR filers: Enter the amount from line 8 of your Child Tax Credit and Credit for Other Dependents Worksheet (see the instructions for Form 1040-NR, line 49).
2 Enter the amount from Form 1040, line 13a; Form 1040-SR, line 13a; or Form 1040-NR, line 49
3 Subtract line 2 from line 1. If zero, stop here; you cannot claim this credit .
4 Number of qualifying children under 17 with the required social security number: $\qquad$ $x \$ 1,400$. Enter the result. If zero, stop here; you cannot claim this credit
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 smaller of line 3 or line 4
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 .
Yes. Subtract $\$ 2,500$ from the amount on line 6 a. Enter the result
8 Multiply the amount on line 7 by $15 \%$ ( 0.15 ) and enter the result .

| 6a | $585,954,081$ |
| :---: | :---: |
|  |  |
| 7 | $536,145,685$ |


| 8 | $80,422,373$ |
| :--- | :--- |

Next. On line 4, is the amount $\$ 4,200$ or more?
$\square$ 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 .
$\square$ Yes. 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
101040 and Enter the total of the amounts from Schedule 1 (Form 1040 or 1040-SR), 1040-SR filers: line 14, and Schedule 2 (Form 1040 or $1040-$ SR), line 5, plus any taxes that you identified using code "UT" and entered on Schedule 2 (Form 1040 or $1040-\mathrm{SR}$ ), line 8.
1040-NR filers: Enter the total of the amounts from Form 1040-NR, lines 27 and 56 , plus any taxes that you identified using code "UT" and entered on line 60.
11 Add lines 9 and 10
121040 and Enter the total of the amounts from Form 1040 or 1040-SR, line 1040-SR filers: 18a, and Schedule 3 (Form 1040 or 1040-SR), line 11.
1040-NR filers: Enter the amount from Form 1040-NR, line 67.
13 Subtract line 12 from line 11. If zero or less, enter -0-
14 Enter the larger of line 8 or line 13


## Part III Additional Child Tax Credit

15 This is your additional child tax credit
Enter this amount on Form 1040, line 18b;
Form 1040-SR, line 18b; or Form 1040-NR, line 64.

## Limitation on Business Losses

Department of the Treasury
Internal Revenue Service

$$
\text { Attach to your tax return. }
$$

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


Attachment Sequence No. 461

| Total Forms Filed $=$ | 5,220 |
| :--- | :--- |




## Part III Limitation on Losses

| 13 | If line 12 is a negative number, enter it here as a positive number. If line 12 is a positive number, enter it here as a negative number . | 13 | 2,008 |
| :---: | :---: | :---: | :---: |
| 14 | Add lines 9 and 13 | 14 | 5,220 |
| 15 | Enter \$255,000 (or \$510,000 if married filing jointly) . . . . . . . . . . . . . . . | 15 | 5,220 |
| 16 | Add lines 14 and 15. If less than zero, enter the amount from line 16 as a positive number on Schedule 1 (Form 1040 or 1040-SR), line 8 . See instructions if you are filing a tax return other than a Form 1040 or 1040-SR. If zero or greater, do not attach this form to your tax return | 16 | 3,365 |
| For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 16654I |  |  | m 461 |



## 2019 Line Item Estimates—All figures are estimates based on samples. <br> Number of returns filed for selected lines

Individual Report of Net 965 Tax Liability
OMB No. 1545-0074
(Rev. January 2020
Department of the Treasury
$\frac{\text { Internal Revenue Service }}{}$ Check this box if this is an amended report
Go to www.irs.gov/Form965A for instructions and the latest information.


Part I Report of Net 965 Tax Liability and Election To Pay in Installments


## Part II

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

|  | (a) <br> Year of Section 965(a) Inclusion, Liability Assumed, or Triggering Event | (b) <br> Paid for Year 1 | (c) <br> Paid for Year 2 | (d) <br> Paid for Year 3 | (e) <br> Paid for Year 4 | $\begin{aligned} & (\mathbf{f}) \\ & \text { Paid for Year } 5 \end{aligned}$ |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 |  |  |  |  |  |  | 1 |
| 2 |  |  |  |  |  |  | 2 |
| 3 |  |  |  |  |  |  | 3 |
| 4 |  |  |  |  |  |  | 4 |
| 5 |  |  |  |  |  |  | 5 |
| 6 |  |  |  |  |  |  | 6 |
| 7 |  |  |  |  |  |  | 7 |
| 8 |  |  |  |  |  |  | 8 |
| For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. ${ }^{\text {cot. No. 71277H }}$ Form 965-A (Rev. 1-2020) |  |  |  |  |  |  |  | Amounts of selected lines filed (in thousands of dollars)



## 2019 Line Item Estimates—All figures are estimates based on samples. <br> Number of returns filed for selected lines

Form 965-A (Rev. 1-2020)
Page 2
Part II Record of Amount of Net 965 Tax Liability Paid by the Taxpayer (continued)

|  | (g) <br> Paid for Year 6 | $\begin{aligned} & \text { (h) } \\ & \text { Paid for Year } 7 \end{aligned}$ | $\stackrel{\text { (i) }}{\text { Paid for Year } 8}$ | (j) <br> Net 965 Tax Liability Remaining Unpaid (see instructions) | (k) <br> 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 |
| Tota | . . . . . | . . . . . | . . . . | 6,708 | 4,226 |  |




${ }^{(\mathrm{e})}$



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

2019 Line Item Estimates-All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

| Form 965-A (Rev. 1-2020) |  |  |  |  |  | Page 2 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Par | Record of Amount of Net 965 Tax Liability Paid by the Taxpayer (continued) |  |  |  |  |  |
|  | (g) <br> Paid for Year 6 | (h) <br> Paid for Year 7 | $\begin{gathered} \text { (i) } \\ \text { Paid for Year } 8 \end{gathered}$ | (j) Net 965 Tax Liability Remaining Unpaid (see instructions) | (k) <br> Net 965 Tax Liability <br> Paid for the Reporting Year |  |
| 1 |  |  |  |  |  | 1 |
| 2 |  |  |  |  |  | 2 |
| 3 |  |  |  |  |  | 3 |
| 4 |  |  |  |  |  | 4 |
| 5 |  |  |  |  |  | 5 |
| 6 |  |  |  |  |  | 6 |
| 7 |  |  |  |  |  | 7 |
| 8 |  |  |  |  |  | 8 |
| Totals . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . $\quad 2,757,020$ |  |  |  |  |  |  |

Part III S Corporation Shareholder: Report of Calculation of Net 965 Tax Liability Related to 965 Amounts Allocated From an S Corporation and Election To Defer Such Net 965 Tax Liability


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


## 2019 Line Item Estimates—All figures are estimates based on samples. <br> Number of returns filed for selected lines



[^4]
## 2019 Line Item Estimates—All figures are estimates based on samples. <br> Amounts of selected lines filed (in thousands of dollars)

| Form 965-A (Rev. 1-2020) |  |  |  |  |  | Page 3 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Par | Annual Report of Deferred Net 965 Tax Liability Related to 965 Amounts Allocated From S Corporations (required every year until the liability is fully paid) |  |  |  |  |  |
|  | (a) <br> Election or Transfer Year | (b) S Corporation Name |  | (c) <br> S Corporation <br> Tax Identification Number | (d) <br> Beginning Deferred Net 965 Tax Liability (see instructions) |  |
| 1 |  |  |  |  |  | 1 |
| 2 |  |  |  |  |  | 2 |
| 3 |  |  |  |  |  | 3 |
| 4 |  |  |  |  |  | 4 |
| 5 |  |  |  |  |  | 5 |
| 6 |  |  |  |  |  | 6 |
| 7 |  |  |  |  |  | 7 |
| 8 |  |  |  |  |  | 8 |
| 9 |  |  |  |  |  | 9 |
| 10 |  |  |  |  |  | 10 |
|  | (e) <br> Reserved for Future Use | (f) Net 965 Tax Liability Triggered (see instructions) | (g) <br> 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) <br> 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 |
| Tot |  | . . . . . . | . . . . . . . . . | . . . . . . | 847,550 |  |
| If more lines are needed for any Part on this form, attach additional sheets. |  |  |  |  |  |  |
|  |  |  |  |  | Form 965-A (Rev. 1-2020) |  |


| Form 982 | Reduction of Tax Attributes Due to Discharge of Indebtedness (and Section 1082 Basis Adjustment) <br> Attach this form to your income tax return. <br> Go to www.irs.gov/Form982 for instructions and the latest information. |  |  | OMB No. 1545-0046 |
| :---: | :---: | :---: | :---: | :---: |
| (Rev. March 2018) Department of the Treasury Internal Revenue Service |  |  |  | Attachment <br> Sequence No. 94 |
| Name shown on return | Total Forms Filed = | 122,246 | Identifyi | er |

## Part I General Information (see instructions)

1 Amount excluded is due to (check applicable box(es)):
a Discharge of indebtedness in a title 11 case
b Discharge of indebtedness to the extent insolvent (not in a title 11 case)
c Discharge of qualified farm indebtedness
d Discharge of qualified real property business indebtedness
e Discharge of qualified principal residence indebtedness (Caution: See instructions before checking this box if debt was discharged after 2017.) .
2 Total amount of discharged indebtedness excluded from gross income

| 2 | 122,246 |
| :--- | :--- |

3 Do you elect to treat all real property described in section 1221(a)(1), relating to property held for sale to customers in the ordinary course of a trade or business, as if it were depreciable property? .
$\square$ Yes $\square$ No
Part II Reduction of Tax Attributes. You must attach a description of any transactions resulting in the reduction in basis under section 1017. See Regulations section 1.1017-1 for basis reduction ordering rules, and, if applicable, required partnership consent statements. (For additional information, see the instructions for Part II.)

| Enter amount excluded from gross income: |  | 4 | 7,481 |
| :---: | :---: | :---: | :---: |
| 4 | For a discharge of qualified real property business indebtedness applied to reduce the basis of depreciable real property |  |  |
| 5 | That you elect under section 108(b)(5) to apply first to reduce the basis (under section 1017) of 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 | 344 |
| 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 tax year of the discharge . | 8 | * |
| 9 | Applied to reduce any net capital loss for the tax year of the discharge, including any capital loss carryovers to the tax year of the discharge | 9 | 482 |
| 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 | 21,370 |
| b | Applied to reduce the basis of your principal residence. Enter amount here ONLY if line 1e is checked | 10b | 4,895 |
| $\begin{gathered} 11 \\ a \end{gathered}$ | 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 not reduced on line 5 . | 11a | 0 |
| b | Land used or held for use in a trade or business of farming | 11b | * |
| c | Other property used or held for use in a trade or business or for the production of income | 11c | 0 |
| 12 | Applied to reduce any passive activity loss and credit carryovers from the tax year of the discharge | 12 | * |
| 13 | Applied to reduce any foreign tax credit carryover to or from the tax year of the discharge | 13 | * |

## Part III Consent of Corporation to Adjustment of Basis of Its Property Under Section 1082(a)(2)

Under section 1081(b), the corporation named above has excluded \$
from its gross income for the tax year beginning and ending Under that section, the corporation consents to have the basis of its property adjusted in accordance with the regulations prescribed under section 1082(a)(2) in effect at the time of filing its income tax return for that year. The corporation is organized under the laws of $\qquad$ --.
(State of incorporation)
Note: You must attach a description of the transactions resulting in the nonrecognition of gain under section 1081.

[^5]| Form <br> 982 | Reduction of Tax Attributes Due to Discharge of Indebtedness (and Section 1082 Basis Adjustment) <br> - Attach this form to your income tax return. <br> Go to www.irs.gov/Form982 for instructions and the latest information. |  |  | OMB No. 1545-0046 |
| :---: | :---: | :---: | :---: | :---: |
| (Rev. March 2018) Department of the Treasury Internal Revenue Service |  |  |  | Attachment <br> Sequence No. 94 |
| Name shown on return | Total Forms Filed $=$ | 122,246 | Identifying number |  |
| General Information (see instructions) |  |  |  |  |
| 1 Amount excluded is due to (check applicable box(es)): |  |  |  |  |
| a Discharge of | tedness in a title 11 ca |  | . . | . . $\square$ |
| b Discharge of i | tedness to the extent in | ( not in a | . | . . $\square$ |
| c Discharge of | ed farm indebtedness |  |  |  |
| d Discharge of | ed real property busin | ebtedness |  | . . . $\square$ |
| e Discharge was discha | fied principal residenc er 2017.) . | tedness | hecki | ox if debt |
| 2 Total amount | charged indebtedness | ed from g | . . | 6,944,869 |
|  | at all real property de dinary course of a trad | in sectio siness, as | eld for | Yes No |
| Part IIReducti <br>  <br>  <br>  <br> basis un <br> required | f Tax Attributes. Y section 1017. See Re nership consent stat | t attach ns sectio (For add | s res dering uction | the reduction and, if applicab art II.) |

## 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
5 That you elect under section 108(b)(5) to apply first to reduce the basis (under section 1017) of depreciable property
6 Applied to reduce any net operating loss that occurred in the tax year of the discharge or carried over to the tax year of the discharge

7 Applied to reduce any general business credit carryover to or from the tax year of the discharge
8 Applied to reduce any minimum tax credit as of the beginning of the tax year immediately after the tax year of the discharge
9 Applied to reduce any net capital loss for the tax year of the discharge, including any capital loss carryovers to the tax year of the discharge
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

|  |  |
| :---: | :---: |
| 4 | 7,481 |
| 5 | $*$ |
| 6 | 344 |
| 7 | $*$ |
| 8 | $*$ |
| 9 | 482 |
| $10 a$ | 21,370 |
| $10 b$ | 309,376 |
| $11 a$ |  |
| $11 b$ | $*$ |
| $11 c$ | 0 |
| 12 | $*$ |
| 13 | $*$ |

## Part III Consent of Corporation to Adjustment of Basis of Its Property Under Section 1082(a)(2)

Under section 1081(b), the corporation named above has excluded \$
from its gross income
for the tax year beginning
and ending
Under that section, the corporation consents to have the basis of its property adjusted in accordance with the regulations prescribed under section 1082(a)(2) in effect at the time of filing its income tax return for that year. The corporation is organized under the laws of

## (State of incorporation)

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

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

Department of the Treasury
Internal Revenue Service (99)


Part I Employee Business Expenses and Reimbursements

| Step 1 Enter Your Expenses |  | Column A Other Than Meals | Column B Meals |
| :---: | :---: | :---: | :---: |
| 1 Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.) | 1 | 277,351 |  |
| 2 Parking fees, tolls, and transportation, including train, bus, etc., that didn't involve overnight travel or commuting to and from work. | 2 | 143,335 |  |
| 3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Don't include meals | 3 | 138,542 |  |
| 4 Business expenses not included on lines 1 through 3. Don't include meals | 4 | 329,965 |  |
| 5 Meals expenses (see instructions) | 5 |  | 191,162 |
| 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 | 474,751 |  |

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 of your Form W-2 (see instructions).

|  |  |  |
| :--- | :--- | :--- |
| 7 | 14,862 | 5,547 |

## 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 on Form 1040-NR, line 8)
Note: If both columns of line 8 are zero, you can't deduct employee business expenses. Stop here and attach Form 2106 to your return.

9 In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50\% ( 0.50 )

| 8 | 470,798 |  | 191,122 |
| :---: | :---: | :---: | :---: |
| 9 |  |  | 191,122 |
|  | dule 1 work . $\downarrow$ | 10 | 476,277 |

For Paperwork Reduction Act Notice, see your tax return instructions.
Cat. No. 11700 N
Form 2106 (2019)


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
of your Form $W-2$ (see instructions) . . . . . . . . . . . . . . . . .

|  |  |  |
| :--- | :--- | :--- |
| 7 | 56,584 | 20,698 |

## 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 on Form 1040-NR, line 8)
Note: If both columns of line 8 are zero, you can't deduct employee business expenses. Stop here and attach Form 2106 to your return.

9 In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50\% ( 0.50 )

| 8 | 4,532,212 |  | 491,776 |
| :---: | :---: | :---: | :---: |
| 9 |  |  | 248,003 |
|  | edule 1 d work | 10 | 4,780,215 |

Part II Vehicle Expenses


Section B-Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)
22 Multiply line 13 by 58¢ (0.58). Enter the result here and on line 1
22 251,853
Section C-Actual Expenses

23 Gasoline, oil, repairs, vehicle insurance, etc.
24a Vehicle rentals
b Inclusion amount (see instructions)
c Subtract line 24b from line 24a.
25 Value of employer-provided vehicle (applies only if $100 \%$ of annual lease value was included on Form W-2-see instructions).
26 Add lines 23, 24c, and 25.
27 Multiply line 26 by the percentage on line 14
28 Depreciation (see instructions)
29 Add lines 27 and 28. Enter total here and on line 1

|  | (a) Vehicle 1 |  | (b) Vehicle 2 |  |
| :---: | :---: | :---: | :---: | :---: |
| 23 |  |  |  |  |
| 24a |  |  |  |  |
| 24b |  |  |  |  |
| $24 c$ |  |  |  |  |
|  |  |  |  |  |
| 25 |  |  |  |  |
| 26 |  |  |  |  |
| 27 |  |  |  |  |
| 28 |  | 26,829 |  |  |
| 29 |  |  |  |  |

Section D-Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

30 Enter cost or other basis (see instructions) .
31 Enter section 179 deduction and special allowance (see instructions) .
32 Multiply line 30 by line 14 (see instructions if you claimed the section 179 deduction or special allowance)
33 Enter depreciation method and percentage (see instructions)
34 Multiply line 32 by the percentage on line 33 (see instructions)
35 Add lines 31 and 34
36 Enter the applicable limit explained in the line 36 instructions
37 Multiply line 36 by the percentage on line 14
38 Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above

|  | (a) Vehicle 1 |  | (b) Vehicle 2 |  |
| :--- | :--- | :--- | :--- | :--- |
| 30 |  |  |  |  |
| 31 |  |  |  |  |
| 32 |  |  |  |  |
| 33 |  |  |  |  |
| 34 |  |  |  |  |
| 35 |  |  |  |  |
| 36 |  |  |  |  |
| 37 |  |  |  |  |
| 38 |  |  |  |  |

## Part II Vehicle Expenses



Section B-Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.) 22 Multiply line 13 by 58 C ( 0.58 ). Enter the result here and on line 1 . . . . . . . . . . . . . $22 \mid 2,439,167$

## Section C-Actual Expenses

23 Gasoline, oil, repairs, vehicle insurance, etc.
24a Vehicle rentals
b Inclusion amount (see instructions)
c Subtract line 24b from line 24a
25 Value of employer-provided vehicle (applies only if $100 \%$ of annual lease value was included on Form W-2-see instructions).
26 Add lines 23, 24c, and 25.
27 Multiply line 26 by the percentage on line 14
28 Depreciation (see instructions)
29 Add lines 27 and 28. Enter total here and on line 1

|  | (a) Vehicle 1 |  |
| :---: | :---: | :---: |
|  |  |  |
| 23 |  |  |
| $24 a$ |  |  |
| $24 b$ |  |  |
| $24 c$ |  |  |
|  |  |  |
| 25 |  |  |
| 26 |  | 213,318 |
| 27 |  |  |
| 28 |  |  |


|  | (b) Vehicle 2 |  |
| :--- | :--- | :--- |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Section D-Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

30 Enter cost or other basis (see instructions).
31 Enter section 179 deduction and special allowance (see instructions).
32 Multiply line 30 by line 14 (see instructions if you claimed the section 179 deduction or special allowance)
33 Enter depreciation method and percentage (see instructions)
34 Multiply line 32 by the percentage on line 33 (see instructions)
35 Add lines 31 and 34
36 Enter the applicable limit explained in the line 36 instructions
37 Multiply line 36 by the percentage on line 14
38 Enter the smaller of line 35 or line 37 . If you skipped lines 36 and 37 , enter the amount from line 35. Also enter this amount on line 28 above

|  | (a) Vehicle 1 |  | (b) Vehicle 2 |  |
| :--- | :--- | :--- | :--- | :--- |
| 30 |  |  |  |  |
| 31 |  |  |  |  |
|  |  |  |  |  |
| 32 |  |  |  |  |
| 33 |  |  |  |  |
| 34 |  |  |  |  |
| 35 |  |  |  |  |
| 36 |  |  |  |  |
| 37 |  |  |  |  |
| 38 |  |  |  |  |



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

| $\square$ VOID |  | CORRECTED |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Name, address, and ZIP code of RIC or REITTotal Forms Filed $=\quad 3,611$ |  | OMB No. 1545-0145 <br> 2019 <br> Form 2439 | Notice to Shareholder of Undistributed Long-Term Capital Gains <br> For calendar year 2019, or other tax year of the regulated investment company (RIC) or the real estate investment trust (REIT) beginning $\qquad$ , 2019, and ending $\qquad$ , 20 $\qquad$ |  |
| Identification number of RIC or REIT |  | 1a Total undistributed long-term capital gains3,555 |  | Copy A <br> Attach to <br> Form 1120-RIC or Form 1120-REIT. |
| Shareholder's identifying number |  | 1b Unrecaptured section 1250 gain 0 |  |  |
| Shareholder's name, address, and ZIP code |  | $\text { 1c Section } 1202 \text { gain }$ | 1d Collectibles (28\%) gain $0$ | For Instructions and Paperwork Reduction Act Notice, see back of Copies A and D. |
|  |  | 2 Tax paid by the RIC or REIT on the box 1a gains733 |  |  |

* Data not shown because of the small number of sample returns on which they are based.
- Attach to Form 1040, 1040-SR, or 1040-NR.
- Go to www.irs.gov/Form2441 for instructions and the latest information.
Total Forms Filed $=\quad 7,204,483$
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.


## Part I Persons or Organizations Who Provided the Care-You must complete this part.

 (If you have more than two care providers, see the instructions.)| 1 (a) Care provider's |
| :---: | :---: | :---: | :---: | :---: |
| name |$\quad$| (b) Address |
| :---: |
| (number, street, apt. no., city, state, and ZIP code) |

Caution: If the care was provided in your home, you may owe employment taxes. For details, see the instructions for Schedule 2 (Form 1040 or 1040-SR), line 7a; or Form 1040-NR, line 59a.

## Part II Credit for Child and Dependent Care Expenses

2 Information about your qualifying person(s). If you have more than two qualifying persons, see the instructions.


Child and Dependent Care Expenses

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

- Attach to Form 1040, 1040-SR, or 1040-NR.
- Go to www.irs.gov/Form2441 for instructions and the latest information.


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.
Part I Persons or Organizations Who Provided the Care - You must complete this part. (If you have more than two care providers, see the instructions.)

|  | (b) Address <br> (number, street, apt. no., city, state, and ZIP code) |  | (c) Identifying number (SSN or EIN) | (d) Amount paid (see instructions) |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | 42,803,117 |
| 1 (a) Care provider's name |  |  |  |  |
|  | Did you receive dependent care benefits? | $\left[\begin{array}{cc} \text { No } \\ \text { Yes } \end{array}\right.$ | plete only Part II b plete Part III on th | k 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 or 1040-SR), line 7a; or Form 1040-NR, line 59a.

## Part II Credit for Child and Dependent Care Expenses

2 Information about your qualifying person(s). If you have more than two qualifying persons, see the instructions.


## Part III Dependent Care Benefits

12 Enter the total amount of dependent care benefits you received in 2019. 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.
13 Enter the amount, if any, you carried over from 2018 and used in 2019 during the grace period. See instructions

14 Enter the amount, if any, you forfeited or carried forward to 2020. See instructions
15 Combine lines 12 through 14. See instructions
16 Enter the total amount of qualified expenses incurred in 2019 for the care of the qualifying person(s)
17 Enter the smaller of line 15 or 16
18 Enter your earned income. See instructions
19 Enter the amount shown below that applies to you.

- If married filing jointly, enter your spouse's earned income (if you or your spouse was a student or was disabled, see the instructions for line 5).
- If married filing separately, see instructions.
- All others, enter the amount from line 18.

20 Enter the smallest of line 17, 18, or 19
21 Enter \$5,000 (\$2,500 if married filing separately and you were required to enter your spouse's earned income on line 19)

| 16 | $1,424,804$ |
| :---: | :---: |
| 17 |  |
| 18 | $7,146,031$ |
|  |  |
|  |  |
| 19 | $4,468,882$ |
| 20 |  |
| 21 |  |

22 Is any amount on line 12 from your sole proprietorship or partnership?No. Enter - 0 -.
Yes. Enter the amount here
23 Subtract line 22 from line 15
24 Deductible benefits. Enter the smallest of line 20, 21, or 22 . Also, include this amount on the appropriate line(s) of your return. See instructions
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 $-0-$
26 Taxable benefits. Subtract line 25 from line 23. If zero or less, enter $-0-$. Also, include this amount on Form 1040 or $1040-S R$, line 1; or Form 1040-NR, line 8. On the dotted line next to Form 1040 or 1040-SR, line 1; or Form 1040-NR, line 8, enter "DCB".

|  |  |
| :---: | :---: |
| 12 | $1,568,176$ |
| 13 | 5,419 |
| 14 | 67,850 |
| 15 |  |


| $\mathbf{2 2}$ | 5,079 |
| :---: | :---: |
| $\mathbf{2 4}$ |  |
| $\mathbf{2 5}$ | 2,921 |
|  |  |
| $\mathbf{2 6}$ |  |

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)
28 Add lines 24 and 25

| $\mathbf{2 7}$ |  |
| :---: | :---: |
| $\mathbf{2 8}$ | $1,273,075$ |
| $\mathbf{2 9}$ |  |
| $\mathbf{3 0}$ |  |
| $\mathbf{3 1}$ | $6,496,596$ |

Form 2441 (2019)

# 2019 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars) 

## Part III Dependent Care Benefits

12 Enter the total amount of dependent care benefits you received in 2019. 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.
13 Enter the amount, if any, you carried over from 2018 and used in 2019 during the grace period. See instructions

14 Enter the amount, if any, you forfeited or carried forward to 2020. See instructions
15 Combine lines 12 through 14. See instructions
16 Enter the total amount of qualified expenses incurred in 2019 for the care of the qualifying person(s)

17 Enter the smaller of line 15 or 16 .
18 Enter your earned income. See instructions
19 Enter the amount shown below that applies to you.

- If married filing jointly, enter your spouse's earned income (if you or your spouse was a student or was disabled, see the instructions for line 5).
- If married filing separately, see instructions.
- All others, enter the amount from line 18.

20 Enter the smallest of line 17, 18, or 19
21 Enter \$5,000 (\$2,500 if married filing separately and you were required to enter your spouse's earned income on line 19)

| 16 | $13,605,528$ |
| :--- | :--- |
| 17 |  |
| 18 | $593,112,932$ |
|  |  |
| 19 | $301,571,416$ |
|  |  |
| 20 |  |
| 21 |  |

22 Is any amount on line 12 from your sole proprietorship or partnership?No. Enter -0-.
Yes. Enter the amount here
23 Subtract line 22 from line 15
24 Deductible benefits. Enter the smallest of line 20, 21, or 22 . Also, include this amount on the appropriate line(s) of your return. See instructions
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-

12
5,360,179

|  |  |
| :---: | :---: |
| $\mathbf{1 2}$ | $5,360,179$ |
| 13 | 10,988 |
| 14 | 65,955 |
| 15 |  |


|  |  |
| :---: | :---: |
| $\mathbf{1 2}$ | $5,360,179$ |
| $\mathbf{1 3}$ | 10,988 |
| $\mathbf{1 4}$ | 65,955 |
| $\mathbf{1 5}$ |  |


|  |  |
| :---: | :---: |
| $\mathbf{1 2}$ | $5,360,179$ |
| 13 | 10,988 |
| 14 | 65,955 |
| 15 |  |

## 15

Taxable benefits. Subtract line 25 from line 23. If zero or less, enter -0-. Also, include this amount on Form 1040 or $1040-S R$, line 1; or Form 1040-NR, line 8. On the dotted line next to Form 1040 or $1040-\mathrm{SR}$, line 1 ; or Form 1040-NR, line 8, enter "DCB".

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)
28 Add lines 24 and 25

| $\mathbf{2 7}$ |  |
| :---: | :---: |
| $\mathbf{2 8}$ | $4,445,252$ |
| $\mathbf{2 9}$ |  |
| $\mathbf{3 0}$ |  |
| $\mathbf{3 1}$ | $19,041,969$  <br> Form 2441 (2019)  |

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

## Investment Credit

- Attach to your tax return.
$>$ Go to www.irs.gov/Form3468 for instructions and the latest information.

Attachment Sequence No. 174

Total Forms Filed $=$
23,832
Identifying number

## Part I Information Regarding the Election To Treat the Lessee as the Purchaser of Investment Credit Property

If you are claiming the investment credit as a lessee based on a section 48(d) (as in effect on November 4, 1990) election, provide the following information. If you acquired more than one property as a lessee, attach a statement showing the information 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 II Qualifying Advanced Coal Project Credit, Qualifying Gasification Project Credit, and Qualifying Advanced Energy Project Credit
5 Qualifying advanced coal project credit (see instructions):
a 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) . . . . . . . . . \$ $\times 20 \%(0.20)$
b Qualified investment in advanced coal-based generation technology property placed in service during the tax year for projects described in section 48A(d)(3)(B)(ii) . . . . . . . . . \$
c 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)
\$
$\times 30 \%$ (0.30)
d Total. Add lines $5 \mathrm{a}, 5 \mathrm{~b}$, and 5 c
6 Qualifying gasification project credit (see instructions):
a 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
\$
$\times 30 \%(0.30)$
b Qualified investment in property other than in above placed in service during the tax year
\$ $\qquad$ $\times 20 \%(0.20)$
c Total. Add lines 6a and 6b
7 Qualifying advanced energy project credit (see instructions): Qualified investment in advanced energy project property placed in service during the tax year . . . . . . . . . . . . . . . . \$ ------------------------ $\times$ 30\% (0.30)

8 Reserved for future use
9 Enter the applicable unused investment credit from cooperatives (see instructions)
10 Add lines 5d, 6c, 7, and 9. Report this amount on Form 3800, Part III, line 1a



## Part III Rehabilitation Credit and Energy Credit

11 Rehabilitation credit (see instructions for requirements that must be met):
a Check this box if you are electing under section $47(\mathrm{~d})(5)$ 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
c 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:
e Pre-1936 buildings under the transition rule (see instructions). . \$ $\qquad$ $\times 10 \%(0.10)$
f Certified historic structures under the transition rule (see instructions) \$ $\qquad$ $\times 20 \%(0.20)$
g Certified historic structures with expenditures paid or incurred after 2017 and not under the transition rule (see instructions)
\$
$\times 4 \%(0.04)$
Note: This credit is allowed for a 5-year period beginning in the tax year that the qualified rehabilitated building is placed in service.
For properties identified on line 11 f or 11 g , complete lines 11 h and 11 i .
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)
\$ $\times 10 \%(0.10)$
b Basis of property using solar illumination or solar energy placed in service during the tax year that is attributable to periods after December 31, 2005, and the construction of which began before 2020 (see instructions)
$\times 30 \%(0.30)$
c 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)
\$
$\times 26 \%(0.26)$
Qualified fuel cell property (see instructions):
d 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)
e Applicable kilowatt capacity of property on line 12d (see instructions)
f Enter the lesser of line 12d or line 12e
g 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 \$

$\qquad$ $\times 30 \%(0.30)$

i Enter the lesser of line 12 g or line 12 h
j Basis of property placed in service during the tax year and the construction of which began in 2020
\$ $\times 26 \%(0.26)$

I Enter the lesser of line 12j or line 12k. Qualified microturbine property (see instructions):
m 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
\$
 $\times 10 \%$ ( 0.10 )
n Kilowatt capacity of property on line 12 m
o Enter the lesser of line 12 m or line 12 n

| $12 m$ |  |
| :---: | :---: |
| $12 n$ |  |
| 120 | 172 |

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


## Part III Rehabilitation Credit and Energy Credit

11 Rehabilitation credit (see instructions for requirements that must be met):
a 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
c 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:
e Pre-1936 buildings under the transition rule (see instructions).
 $\times 10 \%(0.10)$
f Certified historic structures under the transition rule (see instructions) \$ $\qquad$ $\times 20 \%$ (0.20)
g Certified historic structures with expenditures paid or incurred after 2017 and not under the transition rule (see instructions)
\$
$\times 4 \%(0.04)$
Note: This credit is allowed for a 5 -year period beginning in the tax year that the qualified rehabilitated building is placed in service.
For properties identified on line 11 f or 11 g , complete lines 11 h and 11 i .
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) . . . . . . . . . . . . . . . . \$
b Basis of property using solar illumination or solar energy placed in service during the tax year that is attributable to periods after December 31, 2005, and the construction of which began before 2020 (see instructions)
\$
$\times 30 \%(0.30)$
c 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)
\$
$\times 26 \%$ (0.26)
Qualified fuel cell property (see instructions):
d 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
e Applicable kilowatt capacity of property on line 12d (see instructions) \$ -------------------------$\times 30 \%(0.30)$
f Enter the lesser of line 12d or line 12e
g Basis of property placed in service during the tax year that is attributable to periods after October 3, 2008, and the construction of which began before 2020 \$ $\times 30 \%(0.30)$
h Applicable kilowatt capacity of property on line 12 g (see instructions) . -
i Enter the lesser of line 12 g or line 12 h
j Basis of property placed in service during the tax year and the construction of which began in 2020
\$
$\times 26 \%(0.26)$
k Applicable kilowatt capacity of property on line 12j (see instructions)
I Enter the lesser of line 12j or line 12k
Qualified microturbine property (see instructions):
m 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
n Kilowatt capacity of property on line 12 m
o Enter the lesser of line 12 m or line 12 n
\$
------

$\qquad$ $\times 10 \%(0.10)$

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



Part III Rehabilitation Credit and Energy Credit (continued)
Combined heat and power system property (see instructions):
Caution: You can't claim this credit if the electrical capacity of the property is more than 50 megawatts or has a mechanical energy capacity of more than 67,000 horsepower or an equivalent combination of electrical and mechanical energy capabilities.
p 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.
\$ $\qquad$ $\times 10 \%(0.10)$
q 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.
r Multiply line 12p by line 12q.
Qualified small wind energy property (see instructions):
s 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 . \$ $\qquad$ $\times 30 \%(0.30)$
t Enter the smaller of line 12s or \$4,000
$\mathbf{u}$ 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 . . . . . . . . . . . . . . . . . . . . \$
\$ $\times 30 \%$ (0.30)
v Basis of property placed in service during the tax year and the construction of which began in 2020.
\$ $\times 26 \%(0.26)$ Geothermal heat pump systems (see instructions):
w 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
\$ $\qquad$ $\times 10 \%(0.10)$ Qualified investment credit facility property (see instructions):
$\mathbf{x}$ 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 . . . . . . . . . . . . . . . . . . . \$ $\times 30 \%(0.30)$
y Basis of wind facility property placed in service during the tax year and the construction of which began during 2017.
\$ $\qquad$ $\times 24 \%(0.24)$
z Basis of wind facility property placed in service during the tax year and the construction of which began during 2018 or 2020
\$ $\qquad$ $\times 18 \%(0.18)$
aa Basis of wind facility property placed in service during the tax year and the construction of which began during 2019.
\$ $\qquad$ $\times 12 \%(0.12)$
13 Enter the applicable unused investment credit from cooperatives (see instructions)
14 Add lines 11e, 11f, 11g, 12a, 12b, 12c, 12f, 12i, 12l, 12o, 12r, 12t, 12u, 12v, 12w, 12x, 12y, 12z, 12aa and 13. Report this amount on Form 3800, Part III, line 4a .

| 12p |  |
| :---: | :---: |
| 12q |  |
| 12r | 529 |
| 12s |  |
| 12t | 0 |
| 12u | 0 |
| 12v | 0 |
| 12w | * |
| 12x | 252 |
| 12y | 0 |
| 12z | 175 |
| 12aa | * |
| 13 | * |
| 14 | 22,556 |

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

Part III Rehabilitation Credit and Energy Credit (continued)
Combined heat and power system property (see instructions):
Caution: You can't claim this credit if the electrical capacity of the property is more than 50 megawatts or has a mechanical energy capacity of more than 67,000 horsepower or an equivalent combination of electrical and mechanical energy capabilities.
p 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.
\$ $\qquad$ $\times 10 \%(0.10)$
q 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.
r Multiply line 12 p by line $12 q$
Qualified small wind energy property (see instructions):
s 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 . \$ $\qquad$ $\times 30 \%(0.30)$
t Enter the smaller of line 12s or \$4,000
$\mathbf{u}$ 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 . . . . . . . . . . . . . . . . . . . . \$
v Basis of property placed in service during the tax year and the construction of which began in 2020.
\$
$\times 26 \%$ (0.26)
Geothermal heat pump systems (see instructions):
w 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
\$
$\times 10 \%(0.10)$ Qualified investment credit facility property (see instructions):
$\mathbf{x}$ 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 . . . . . . . . . . . . . . . . . . . \$ $\times 30 \%(0.30)$
y Basis of wind facility property placed in service during the tax year and the construction of which began during 2017
\$
$\times 24 \%$ (0.24)
z Basis of wind facility property placed in service during the tax year and the construction of which began during 2018 or 2020
\$ $\times 18 \%(0.18)$
aa Basis of wind facility property placed in service during the tax year and the construction of which began during 2019
\$ $\times 12 \%(0.12)$
13 Enter the applicable unused investment credit from cooperatives (see instructions)
14 Add lines 11e, 11f, 11g, 12a, 12b, 12c, 12f, 12i, 12l, 12o, 12r, 12t, 12u, 12v, 12w, 12x, 12y, 12z, 12aa and 13. Report this amount on Form 3800, Part III, line 4a .

| 12p |  |
| :---: | :---: |
| 12q |  |
| 12r | 1,460 |
| 12s |  |
| 12t | 0 |
| 12u | 0 |
| 12v | 0 |
| 12w | * |
| 12x | 3,025 |
| 12y | 0 |
| 12z | 86 |
| 12aa | * |
| 13 | * |
| 14 | 889,297 |

* Data not shown because of the small number of sample returns on which they are based.
- You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

| Total Forms Filed $=657,165$ | Identifying number |
| :--- | :--- |

## Part I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT) (See instructions and complete Part(s) III before Parts I and II.)

| 1 | General business credit from line 2 of all Parts III with box A checked | 1 | 97,645 |
| :---: | :---: | :---: | :---: |
| 2 | Passive activity credits from line 2 of all Parts III with box B checked . . . 42846.483 |  |  |
| 3 | Enter the applicable passive activity credits allowed for 2019. See instructions | 3 | 36,357 |
| 4 | Carryforward of general business credit to 2019. Enter the amount from line 2 of Part III with box C checked. See instructions for statement to attach | 4 | 77.111 |
| 5 | Carryback of general business credit from 2020. 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 | 96,7 |

## Part II Allowable Credit

7 Regular tax before credits:

- Individuals. Enter the sum of the amounts from Form 1040 or 1040-SR, line 12a, and Schedule 2 (Form 1040 or 1040-SR), line 2, or the sum of the amounts from Form 1040-NR, lines 42 and 44
- Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the applicable line of your return
- 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- .
- Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54

|  |  |  |
| :--- | :--- | :--- |
| . | $\cdot$ | . |
| . | $\cdot$ | . |

9 Add lines 7 and 8
10a Foreign tax credit
b Certain allowable credits (see instructions)
c Add lines 10a and 10b


11 Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16
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
16 Subtract line 15 from line 11. If zero or less, enter -0-
448,659
546,408
17 Enter the smaller of line 6 or line 16
163,834
C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or reorganization.



## 2019 Line Item Estimates—All figures are estimates based on samples. <br> Number of returns filed for selected lines

Form 3800 (2019)

| Part II Allowable Credit (continued) |  |  |  |
| :---: | :---: | :---: | :---: |
| Note: If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -0- on line 26. |  |  |  |
| 18 | Multiply line 14 by 75\% (0.75). See instructions | 18 | 19,514 |
| 19 | Enter the greater of line 13 or line 18 | 19 | 23,392 |
| 20 | Subtract line 19 from line 11. If zero or less, enter -0- | 20 | 68,713 |
| 21 | Subtract line 17 from line 20. If zero or less, enter -0- | 21 | 68,693 |
| 22 | Combine the amounts from line 3 of all Parts III with box A, C, or D checked. | 22 | 5,873 |
| 23 | Passive activity credit from line 3 of all Parts III with box B checked . . . $\quad \mathbf{2 3} \mathbf{3}$ 3,961 |  |  |
| 24 | Enter the applicable passive activity credit allowed for 2019. See instructions | 24 | 1,926 |
| 25 | Add lines 22 and 24 | 25 | 7,749 |
| 26 | Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25 | 26 | 6,348 |
| 27 | Subtract line 13 from line 11. If zero or less, enter -0- | 27 | 577,863 |
| 28 | Add lines 17 and 26 | 28 | 167,945 |
| 29 | Subtract line 28 from line 27. If zero or less, enter -0- | 29 | 568,411 |
| 30 | Enter the general business credit from line 5 of all Parts III with box A checked | 30 | 233,952 |
| 31 | Reserved | 31 |  |
| 32 | Passive activity credits from line 5 of all Parts III with box B checked . . . $\quad 32 \pm 163,703$ |  |  |
| 33 | Enter the applicable passive activity credits allowed for 2019. See instructions | 33 | 91,777 |
| 34 | Carryforward of business credit to 2019. 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 | 65,494 |
| 35 | Carryback of business credit from 2020. 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 | 349,942 |
| 37 | Enter the smaller of line 29 or line 36 | 37 | 301,997 |
| 38 | Credit allowed for the current year. Add lines 28 and 37. <br> 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. <br> - Individuals. Schedule 3 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 51 <br> - Corporations. Form 1120, Schedule J, Part I, line 5c <br> - Estates and trusts. Form 1041, Schedule G, line 2b | 38 | 427,987 |


| Form 3800 (2019) Page 2 |  |  |  |
| :---: | :---: | :---: | :---: |
| Part II Allowable Credit (continued) |  |  |  |
| Note: If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -0- on line 26. |  |  |  |
| 18 | Multiply line 14 by 75\% (0.75). See instructions | 18 | 7,246,610 |
| 19 | Enter the greater of line 13 or line 18 | 19 | 7,259,212 |
| 20 | Subtract line 19 from line 11. If zero or less, enter -0- | 20 | 4,319,013 |
| 21 | Subtract line 17 from line 20. If zero or less, enter -0- | 21 | 4,236,323 |
| 22 | Combine the amounts from line 3 of all Parts III with box A, C, or D checked | 22 | 61,076 |
| 23 | Passive activity credit from line 3 of all Parts III with box B checked . . . $\quad \mathbf{2 3} \mathbf{2}$ 2,683 |  |  |
| 24 | Enter the applicable passive activity credit allowed for 2019. See instructions | 24 | 3,002 |
| 25 | Add lines 22 and 24 | 25 | 64,078 |
| 26 | Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25 | 26 | 33,784 |
| 27 | Subtract line 13 from line 11. If zero or less, enter -0- | 27 | 125,879,327 |
| 28 | Add lines 17 and 26 | 28 | 1,131,776 |
| 29 | Subtract line 28 from line 27. If zero or less, enter -0- | 29 | 124,747,551 |
| 30 | Enter the general business credit from line 5 of all Parts III with box A checked | 30 | 3,840,435 |
| 31 | Reserved | 31 |  |
| 32 | Passive activity credits from line 5 of all Parts III with box B checked . . . $\quad 32 \pm 669,855$ |  |  |
| 33 | Enter the applicable passive activity credits allowed for 2019. See instructions | 33 | 522,036 |
| 34 | Carryforward of business credit to 2019. 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 | 3,112,664 |
| 35 | Carryback of business credit from 2020. 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 | 7,475,136 |
| 37 | Enter the smaller of line 29 or line 36 | 37 | 3,969,017 |
| 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. <br> - Individuals. Schedule 3 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 51 <br> - Corporations. Form 1120, Schedule J, Part I, line 5c <br> - Estates and trusts. Form 1041, Schedule G, line 2b | 38 | 5,100,792 |

## Part III

General Business Credits or Eligible Small Business Credits (see instructions)
Complete a separate Part III for each box checked below. See instructions.
A $\square$ General Business Credit From a Non-Passive Activity
E $\square$ Reserved
B $\square$ General Business Credit From a Passive Activity
F $\square$ Reserved
C $\square$ General Business Credit Carryforwards
G $\square$ Eligible Small Business Credit Carryforwards
D $\square$ General Business Credit Carrybacks
H $\square$ Reserved

I 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

Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.

1a Investment (Form 3468, Part II only) (attach Form 3468)
b Reserved
c Increasing research activities (Form 6765)
d Low-income housing (Form 8586, Part I only)
e Disabled access (Form 8826) (see instructions for limitation)
f Renewable electricity, refined coal, and Indian coal production (Form 8835)
g Indian employment (Form 8845)
h Orphan drug (Form 8820)
i New markets (Form 8874)
j Small employer pension plan startup costs (Form 8881) (see instructions for limitation)
k Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)
I Biodiesel and renewable diesel fuels (attach Form 8864).
m Low sulfur diesel fuel production (Form 8896)
n Distilled spirits (Form 8906)
o Nonconventional source fuel (carryforward only)
p Energy efficient home (Form 8908)
q Energy efficient appliance (carryforward only)
r Alternative motor vehicle (Form 8910)
s Alternative fuel vehicle refueling property (Form 8911)
t Enhanced oil recovery credit (Form 8830).
u Mine rescue team training (Form 8923)
v Agricultural chemicals security (carryforward only)
w Employer differential wage payments (Form 8932)
x Carbon oxide sequestration (Form 8933)
y Qualified plug-in electric drive motor vehicle (Form 8936)
z Qualified plug-in electric vehicle (carryforward only)
aa Employee retention (Form 5884-A)
bb General credits from an electing large partnership (carryforward only)
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)
2 Add lines 1a through $1 z z$ and enter here and on the applicable line of Part I
3 Enter the amount from Form 8844 here and on the applicable line of Part II
4a Investment (Form 3468, Part III) (attach Form 3468)
b Work opportunity (Form 5884)
c Biofuel producer (Form 6478)
d Low-income housing (Form 8586, Part II)
e Renewable electricity, refined coal, and Indian coal production (Form 8835)
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846)
g Qualified railroad track maintenance (Form 8900)
h Small employer health insurance premiums (Form 8941)
i Increasing research activities (Form 6765)
j Employer credit for paid family and medical leave (Form 8994)
z Other
5 Add lines 4a through $4 z$ and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

|  | (b) <br> If claiming the credit from a pass-through entity, enter the EIN | (c) Enter the appropriate amount |
| :---: | :---: | :---: |
| 1a |  | 1,523 |
| 1b |  |  |
| 1c |  | 65,910 |
| 1d |  | 6,781 |
| 1e |  | 4,841 |
| 1 f |  | 1,065 |
| 1 g |  | 6,236 |
| 1h |  | 1,498 |
| 1 i |  | 1,382 |
| 1j |  | 5,182 |
| 1k |  | 19,768 |
| 11 |  | 4,127 |
| 1 m |  | 1,042 |
| 1n |  | 434 |
| 10 |  | * |
| 1p |  | 6,799 |
| 1q |  | * |
| 1r |  | 3,394 |
| 1s |  | 3,144 |
| 1t |  | 936 |
| 1u |  | * |
| 1v |  | 0 |
| 1w |  | 646 |
| 1x |  | * |
| 1y |  | 10,568 |
| 1z |  | * |
| 1aa |  | 7,182 |
| 1bb |  | 127 |
| 1zz |  | 3,680 |
| 2 |  | 141,382 |
| 3 |  | 8,188 |
| 4a |  | 23,021 |
| 4b |  | 84,602 |
| 4c |  | 2,118 |
| 4d |  | 8,960 |
| 4e |  | 1,113 |
| 4 f |  | 207,865 |
| 4g |  | 425 |
| 4h |  | 2,070 |
| 4i |  | 100,830 |
| 4j |  | 13,045 |
| 4z |  | 1,377 |
| 5 |  |  |
| 6 |  |  |

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


## Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below. See instructions.
A $\square$ General Business Credit From a Non-Passive Activity
E $\square$ Reserved
B $\square$ General Business Credit From a Passive Activity
F $\square$ Reserved
C $\square$ General Business Credit Carryforwards
G $\square$ Eligible Small Business Credit Carryforwards
D $\square$ General Business Credit Carrybacks
H $\square$ Reserved
I 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

Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.
1a Investment (Form 3468, Part II only) (attach Form 3468)
b Reserved
c Increasing research activities (Form 6765)
d Low-income housing (Form 8586, Part I only)
e Disabled access (Form 8826) (see instructions for limitation)
f Renewable electricity, refined coal, and Indian coal production (Form 8835)
g Indian employment (Form 8845).
h Orphan drug (Form 8820)
i New markets (Form 8874)
j Small employer pension plan startup costs (Form 8881) (see instructions for limitation)
k Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)
I Biodiesel and renewable diesel fuels (attach Form 8864).
m Low sulfur diesel fuel production (Form 8896)
n Distilled spirits (Form 8906)
o Nonconventional source fuel (carryforward only)
p Energy efficient home (Form 8908)
q Energy efficient appliance (carryforward only)
r Alternative motor vehicle (Form 8910)
s Alternative fuel vehicle refueling property (Form 8911)
t Enhanced oil recovery credit (Form 8830).
u Mine rescue team training (Form 8923)
v Agricultural chemicals security (carryforward only)
w Employer differential wage payments (Form 8932)
x Carbon oxide sequestration (Form 8933)
y Qualified plug-in electric drive motor vehicle (Form 8936)
z Qualified plug-in electric vehicle (carryforward only)
aa Employee retention (Form 5884-A)
bb General credits from an electing large partnership (carryforward only)
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)
2 Add lines 1a through $1 z z$ and enter here and on the applicable line of Part I
3 Enter the amount from Form 8844 here and on the applicable line of Part II
4a Investment (Form 3468, Part III) (attach Form 3468)
b Work opportunity (Form 5884)
c Biofuel producer (Form 6478)
d Low-income housing (Form 8586, Part II)
e Renewable electricity, refined coal, and Indian coal production (Form 8835)
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846)
g Qualified railroad track maintenance (Form 8900)
h Small employer health insurance premiums (Form 8941).
i Increasing research activities (Form 6765)
j Employer credit for paid family and medical leave (Form 8994).
z Other
5 Add lines 4a through $4 z$ and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

|  | (b) <br> If claiming the credit from a pass-through entity, enter the El |  |
| :---: | :---: | :---: |
| 1a |  | 14,070 |
| 1b |  |  |
| 1c |  | 659,334 |
| 1d |  | 33,218 |
| 1e |  | 10,344 |
| 1f |  | 57,926 |
| 1 g |  | 33,147 |
| 1h |  | 3,065 |
| 1i |  | 729 |
| 1j |  | 1,694 |
| 1k |  | 7,462 |
| 11 |  | 7,956 |
| 1m |  | 9,221 |
| 1n |  | 6,320 |
| 10 |  | * |
| 1p |  | 127,951 |
| 1q |  | * |
| 1r |  | 5,752 |
| 1s |  | 26,957 |
| 1t |  | 781 |
| 1u |  | * |
| 1v |  | 0 |
| 1w |  | 1,422 |
| 1x |  | * |
| 1y |  | 25,370 |
| 1z |  | * |
| 1aa |  | 15,302 |
| 1bb |  | 52 |
| $1 z z$ |  | 14,197 |
| 2 |  | 1,072,021 |
| 3 |  | 31,634 |
| 4a |  | 905,235 |
| 4b |  | 621,919 |
| 4c |  | 8,572 |
| 4d |  | 91,901 |
| 4e |  | 31,519 |
| 4f |  | 1,473,235 |
| 4 g |  | 34,312 |
| 4h |  | 6,886 |
| 4i |  | 1,348,328 |
| 4j |  | 4,239 |
| 4z |  | 13,535 |
| 5 |  |  |
| 6 |  |  |
|  |  | Form 3800 (2 |

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

זom 3903
Department of the Treasury Internal Revenue Service (99)
Name(s) shown on return

- Go to www.irs.gov/Form3903 for instructions and the latest information. $\rightarrow$ Attach to Form 1040, 1040-SR, or 1040-NR.
Total Forms Filed $=113,005 \quad$ Your social security number

Before you begin: You can deduct moving expenses only if you are a Member of the Armed Forces and meet certain other requirements. See the instructions to find out if you qualify.

1 Transportation and storage of household goods and personal effects (see instructions)

2 Travel (including lodging) from your old home to your new home (see instructions). Do not include the cost of meals

| $\mathbf{1}$ | 82,344 |
| :---: | :---: |
|  |  |
| $\mathbf{2}$ | 100,473 |
| $\mathbf{3}$ | 112,003 |
|  |  |
| $\mathbf{4}$ | 34,603 |
|  |  |
|  |  |

No. You cannot deduct your moving expenses. If line 3 is less than line 4, subtract line 3 from line 4 and include the result on Form 1040 or $1040-S R$, line 1; or Form 1040-NR, line 8.
$\square$ Yes. Subtract line 4 from line 3. Enter the result here and on Schedule 1 (Form 1040 or 1040-SR), line 13; or Form 1040-NR, line 26. This is your moving expense deduction


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 1 c and 2 b (type of use 13 or 14 ), $3 \mathrm{~d}, 4 \mathrm{c}$, and 5 , claimant has not waived the right to make the claim. For claims on lines 1c and 2 b (type of use 13 or 14), claimant certifies that a certificate has not been provided to the credit card issuer.

## 1 Nontaxable Use of Gasoline

|  |  | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Off-highway business use |  | \$. 183 |  |  |  |  |
| b | Use on a farm for farming purposes |  | . 183 |  |  |  | 362 |
|  | Other nontaxable use (see Caution above line 1) |  | . 183 | ) | \$ | 273,781 |  |
|  | Exported |  | . 184 |  |  | * | 411 |

## 2 Nontaxable Use of Aviation Gasoline

|  |  | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| a | Use in commercial aviation (other than foreign trade) |  | \$ . 15 |  | \$ | 178 | 354 |
| b | Other nontaxable use (see Caution above line 1) |  | . 193 |  |  | 1,282 | 324 |
| c | Exported |  | . 194 |  |  | 0 | 412 |
| d | LUST tax on aviation fuels used in foreign trade |  | . 001 |  |  | * | 433 |

3 Nontaxable Use of Undyed Diesel Fuel
Claimant certifies that the diesel fuel did not contain visible evidence of dye.
Exception. If any of the diesel fuel included in this claim did contain visible evidence of dye, attach an explanation and check here . . $\square$

|  |  | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| a | Nontaxable use |  | \$ . 243 |  |  |  |  |
| b | Use on a farm for farming purposes |  | . 243 |  | \$ | 46,999 | 360 |
| c | Use in trains |  | . 243 |  |  | * | 353 |
| d | Use in certain intercity and local buses (see Caution above line 1) |  | . 17 |  |  | * | 350 |
| e | Exported |  | . 244 |  |  | 0 | 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.$\quad \square$


[^6]Department of the Treasury Internal Revenue Service (99) Credit for Federal Tax Paid on Fuels

Name (as shown on your income tax return)
Go to www.irs.gov/Form4136 for instructions and the latest information. otal Forms Filed $=\quad 305,996$

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 1 c and 2 b (type of use 13 or 14 ), $3 \mathrm{~d}, 4 \mathrm{c}$, and 5 , claimant has not waived the right to make the claim. For claims on lines 1c and 2 b (type of use 13 or 14), claimant certifies that a certificate has not been provided to the credit card issuer.

## 1 Nontaxable Use of Gasoline

Note: CRN is credit reference number.

|  |  | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Off-highway business use |  | \$. 183 |  |  |  |  |
| b | Use on a farm for farming purposes |  | . 183 |  |  |  | 362 |
|  | Other nontaxable use (see Caution above line 1) |  | . 183 |  | \$ | 132,377 |  |
|  | Exported |  | . 184 |  |  | * | 411 |

## 2 Nontaxable Use of Aviation Gasoline

|  |  | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| a | Use in commercial aviation (other than foreign trade) |  | \$.15 |  | \$ | 164 | 354 |
| b | Other nontaxable use (see Caution above line 1) |  | . 193 |  |  | 805 | 324 |
| c | Exported |  | . 194 |  |  | 0 | 412 |
|  | 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 . . $\square$

|  | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Nontaxable use |  | \$ . 243 |  |  |  |  |
| Use on a farm for farming purposes |  | . 243 | ) | \$ | 22,047 | 360 |
| Use in trains |  | . 243 |  |  | * | 353 |
| Use in certain intercity and local buses (see Caution above line 1) |  | . 17 |  |  | * | 350 |
| Exported |  | . 244 |  |  | 0 | 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 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Nontaxable use taxed at \$. 244 |  | \$ . 243 |  |  |  |  |
| b | Use on a farm for farming purposes |  | . 243 |  | \$ | 3,719 | 346 |
| c | Use in certain intercity and local buses (see Caution above line 1) |  | . 17 |  |  | * | 347 |
| d | Exported |  | . 244 |  |  | 0 | 414 |
| e | Nontaxable use taxed at \$. 044 |  | . 043 |  |  | 0 | 377 |
| $f$ | Nontaxable use taxed at \$. 219 |  | . 218 |  |  | * | 369 |
| For Paperwork Reduction Act Notice, see the separate instructions. |  |  | Cat. No. 12625R |  | Form 4136 (2019) |  |  |

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

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

|  |  | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| a | Kerosene used in commercial aviation (other than foreign trade) taxed at \$. 244 |  | \$ . 200 |  | \$ | 174 | 417 |
| b | Kerosene used in commercial aviation (other than foreign trade) taxed at $\$ .219$ |  | . 175 |  |  | 179 | 355 |
| c | Nontaxable use (other than use by state or local government) taxed at $\$ .244$ |  | . 243 |  |  | 7,766 | 346 |
| d | Nontaxable use (other than use by state or local government) taxed at $\$ .219$ |  | . 218 |  |  | * | 369 |
| e | LUST tax on aviation fuels used in foreign trade |  | . 001 |  |  | * | 433 |
| 6 | Sales by Registered Ultimate Vendors of Undyed Diesel Fuel |  |  | Registration No. |  |  |  |
|  | Claimant certifies that it sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the diesel fuel did not contain visible evidence of dye. |  |  |  |  |  |  |
|  | Exception. If any of the diesel fuel included in this claim did contain visible evidence of dye, attach an explanation and check here . . $\square$ |  |  |  |  |  |  |
|  |  |  | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| a | Use by a state or local government |  | \$ 243 |  | \$ | 46,999 | 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 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a Use by a state or local government | \$ 243 |  |  |  |  |
| b Sales from a blocked pump | . 243 |  | \$ | 7,766 | 346 |
| c Use in certain intercity and local buses | . 17 |  |  | * | 347 |

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

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


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

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

|  |  | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| a | Kerosene used in commercial aviation (other than foreign trade) taxed at $\$ .244$ |  | \$ . 200 |  | \$ | 618 | 417 |
| b | Kerosene used in commercial aviation (other than foreign trade) taxed at $\$ .219$ |  | . 175 |  |  | 278 | 355 |
| c | Nontaxable use (other than use by state or local government) taxed at $\$ .244$ |  | . 243 |  |  | 3,719 | 346 |
| d | Nontaxable use (other than use by state or local government) taxed at $\$ .219$ |  | . 218 |  |  | * | 369 |
|  | 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 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Use by a state or local government | \$ . 243 |  | \$ | 22,047 | 360 |
|  | 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)

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 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a Use by a state or local government | \$ . 243 |  |  |  |  |
| b Sales from a blocked pump | . 243 |  | \$ | 3,719 | 346 |
| c Use in certain intercity and local buses | . 17 |  |  | * | 347 |

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

| Claimant sold the kerosene for use in aviation at a tax-excluded price and has not collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. See the instructions for additional information to be submitted. |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit |  |  | (e) CRN |
| a | Use in commercial aviation (other than foreign trade) taxed at $\$ .219$ |  | \$. 175 |  | \$ | 278 |  | 355 |
| b | Use in commercial aviation (other than foreign trade) taxed at $\$ .244$ |  | . 200 |  |  | 618 |  | 417 |
| c | Nonexempt use in noncommercial aviation |  | . 025 |  |  | ${ }^{*}$ |  | 418 |
| d | Other nontaxable uses taxed at \$.244 |  | . 243 |  |  | 3,719 |  | 346 |
| e | Other nontaxable uses taxed at \$.219 |  | . 218 |  |  | * |  | 369 |
|  | LUST tax on aviation fuels used in foreign trade |  | . 001 |  |  | 0 |  | 433 |

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

9 Reserved for future use

|  |  | (b) Rate | (c) Gallons of alcohol | (d) Amount of credit |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| a | 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. |  |  |  |  |  |

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 re The renewable diesel used to produce the renewable diese mixture was derived from biomass, met EPA's registration rea 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 about renewable diesel used in aviation.

|  | (b) Rate | (c) Gallons of biodiesel or renewable diesel | (d) Amount of credit |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a Biodiesel (other than agri-biodiesel) mixtures | \$1.00 |  | \$ | 0 | 388 |
| b Agri-biodiesel mixtures | 1.00 |  |  | 0 | 390 |
| c 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 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| a | Liquefied petroleum gas (LPG) (see instructions) |  | \$. 183 |  | \$ | 3,112 | 419 |
| b | "P Series" fuels |  | . 183 |  |  | * | 420 |
| c | Compressed natural gas (CNG) (see instructions) |  | . 183 |  |  | * | 421 |
| d | Liquefied hydrogen |  | . 183 |  |  | 0 | 422 |
| e | Fischer-Tropsch process liquid fuel from coal (including peat) |  | . 243 |  |  | 0 | 423 |
| f | Liquid fuel derived from biomass |  | . 243 |  |  | * | 424 |
| g | Liquefied natural gas (LNG) (see instructions) |  | . 243 |  |  | * | 425 |
| h | Liquefied gas derived from biomass |  | . 183 |  |  | * | 435 |

## 12 Alternative Fuel Credit

|  | (b) Rate | (c) Gallons, or gasoline or diesel gallon equivalents | (d) Amount of credit | (e) CRN |
| :---: | :---: | :---: | :---: | :---: |
| a Liquefied petroleum gas (LPG) (see instructions) | \$ . 50 |  | \$ 725 | 426 |
| b "P Series" fuels | . 50 |  | 14 | 427 |
| c Compressed natural gas (CNG) (see instructions) | . 50 |  | * | 428 |
| d Liquefied hydrogen | . 50 |  | 0 | 429 |
| e Fischer-Tropsch process liquid fuel from coal (including peat) | . 50 |  | 0 | 430 |
| f Liquid fuel derived from biomass | . 50 |  | 0 | 431 |
| g Liquefied natural gas (LNG) (see instructions) | . 50 |  | * | 432 |
| h Liquefied gas derived from biomass | . 50 |  | 0 | 436 |
| i Compressed gas derived from biomass | . 50 |  | * | 437 |

[^7]
## 9 Reserved for future use

|  |  |  |
| :--- | :--- | :--- |
|  |  |  |
| a | Reserved for future use |  |
| b | Reserved for future use |  |

## 10 Biodiesel or Renewable Diesel Mixture Credit

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 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| a Biodiesel (other than agri-biodiesel) mixtures | \$1.00 |  | \$ | 0 | 388 |
| b Agri-biodiesel mixtures | 1.00 |  |  | 0 | 390 |
| c 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.


## Alternative Fuel Credit

|  | (b) Rate | (c) Gallons, or gasoline or diesel gallon equivalents | (d) Amount of credit | (e) CRN |
| :---: | :---: | :---: | :---: | :---: |
| a Liquefied petroleum gas (LPG) (see instructions) | \$ . 50 |  | \$ 1,026 | 426 |
| b "P Series" fuels | . 50 |  | 3 | 427 |
| c Compressed natural gas (CNG) (see instructions) | . 50 |  | * | 428 |
| d Liquefied hydrogen | . 50 |  | 0 | 429 |
| e Fischer-Tropsch process liquid fuel from coal (including peat) | . 50 |  | 0 | 430 |
| f Liquid fuel derived from biomass | . 50 |  | 0 | 431 |
| g Liquefied natural gas (LNG) (see instructions) | . 50 |  | * | 432 |
| h Liquefied gas derived from biomass | . 50 |  | 0 | 436 |
| i Compressed gas derived from biomass | . 50 |  | * | 437 |

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


## Registration No.

a Liquefied petroleum gas (LPG) (see instructions)
b "P Series" fuels
c Compressed natural gas (CNG) (see instructions)
d Liquefied hydrogen
e Fischer-Tropsch process liquid fuel from coal (including peat)
f Liquid fuel derived from biomass
giquefied natural gas (LNG) (see instructions)
Liquefied gas derived from biomass

| (b) Rate | (c) Gallons <br> of alcohol | (d) Amount of credit |  | (e) CRN |
| :--- | :--- | :--- | :--- | :--- |
|  |  | $\$$ |  |  |
|  |  |  |  |  |

Registration No.
a Biodiesel (other than agri-biodiesel) mixtures
b Agri-biodiesel mixtures

| 13 | Registered Credit Card Issuers | Registration No. |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | (b) Rate | (c) Gallons |  | Amount | (e) CRN |
| a | Diesel fuel sold for the exclusive use of a state or local government | \$ 243 |  | \$ | 46.999 | 360 |
| b | Kerosene sold for the exclusive use of a state or local government | . 243 |  |  | 7,766 | 346 |
| c | Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at $\$ .219$ | . 218 |  |  | * | 369 |

## 14 Nontaxable Use of a Diesel-Water Fuel Emulsion

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

|  | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |  |
| :--- | :--- | :---: | :---: | :---: | :---: | :---: | :---: |
| a | Nontaxable use |  | $\$ .197$ |  | $\$$ | 0 |  |
| b | Exported |  | .198 |  | 309 |  |  |

15 Diesel-Water Fuel Emulsion Blending

## Registration No.

|  | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Blender credit | $\$ .046$ |  | $\$$ | 0 |  |

16 Exported Dyed Fuels and Exported Gasoline Blendstocks

|  |  | (b) Rate | (c) Gallons |  | (d) Amount of credit |  |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Exported dyed diesel fuel and exported gasoline blendstocks taxed at $\$ .001$ | \$ . 001 |  |  | \$ | * |  | 415 |
| b | Exported dyed kerosene | . 001 |  |  |  | 0 |  | 416 |
| 17 | Total income tax credit claimed. Add lines 1 through 16, column (d). Enter here and on Schedule 3 (Form 1040 or 1040-SR), line 12; Form 1120, Schedule J, line 20b; Form 1120-S, |  |  | 17 | \$ | 305,996 |  |  |

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


## 2019 Line Item Estimates—All figures are estimates based on samples. <br> Amounts of selected lines filed (in thousands of dollars)

| 13 | Registered Credit Card Issuers | Registration No. |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| a | Diesel fuel sold for the exclusive use of a state or local government | \$ . 243 |  | \$ | 22,047 | 360 |
| b | Kerosene sold for the exclusive use of a state or local government | . 243 |  |  | 3,719 | 346 |
| c | Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at $\$ .219$ | . 218 |  |  | * | 369 |

## 14 Nontaxable Use of a Diesel-Water Fuel Emulsion

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

|  | (a) Type of use | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| a | Nontaxable use |  | $\$ .197$ |  | $\$$ | 0 |  |
| b | Exported |  | .198 |  | 309 |  |  |

15 Diesel-Water Fuel Emulsion Blending

## Registration No.

|  | (b) Rate | (c) Gallons | (d) Amount of credit |  | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Blender credit | $\$ .046$ |  | $\$ 0$ | 0 | 310 |

16 Exported Dyed Fuels and Exported Gasoline Blendstocks

|  |  | (b) Rate | (c) Gallo |  |  | Amount of | (e) CRN |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| a | Exported dyed diesel fuel and exported gasoline blendstocks taxed at $\$ .001$ | \$ 001 |  |  | \$ | 0 | 415 |
| b | Exported dyed kerosene | . 001 |  |  |  | 0 | 416 |
| 17 | Total income tax credit claimed. Add lines 1 through 16, column (d). Enter here and on Schedule 3 (Form 1040 or 1040-SR), line 12; Form 1120, Schedule J, line 20b; Form 1120-S, line 23c; Form 1041, Schedule G, line 16b; or the proper line of other returns |  |  | 17 | \$ | 163,730 |  |

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

Part I Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I.
1 Maximum amount (see instructions).
2 Total cost of section 179 property placed in service (see instructions)
3 Threshold cost of section 179 property before reduction in limitation (see instructions)
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0 -. If married filing separately, see instructions

(c) Elected cost

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.
Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)
14 Special depreciation allowance for qualified property (other than listed property) placed in service
during the tax year. See instructions.

14 1,591,451
15 Property subject to section 168(f)(1) election
16 Other depreciation (including ACRS)

1,336
966,140

## Part III MACRS Depreciation (Don't include listed property. See instructions.)

## Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2019
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here

## Section B-Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only-see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 19a 3-year property |  | 64,544 |  |  |  | 63,854 |
| b 5-year property |  | 680,863 |  |  |  | 678,024 |
| c 7-year property |  | 573,595 |  |  |  | 571,745 |
| d 10-year property |  | 60,880 |  |  |  | 60,543 |
| e 15-year property |  | 136,344 |  |  |  | 136,141 |
| f 20-year property |  | 34,139 |  |  |  | 33,778 |
| g 25-year property |  | 7,669 | 25 yrs . |  | S/L | 7,660 |
| h Residential rental |  | 950,907 | 27.5 yrs . | MM | S/L | 947,950 |
| property undete | rmined type | 1,924 | 27.5 yrs . | MM | S/L | 1,896 |
| i Nonresidential real |  | 408,425 | 39 yrs . | MM | S/L | 407,324 |
| property Tota | al GDS cost | 2,465,978 |  | MM | S/L | 2,457,370 |
| Section C-Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System |  |  |  |  |  |  |
| 20a Class life |  | 14,163 |  |  | S/L | 14,161 |
| b 12-year |  | 1,140 | 12 yrs . |  | S/L | 1,091 |
| c 30-year |  | 4,626 | 30 yrs . | MM | S/L | 4,654 |
| d 40-year |  | 1,799 | 40 yrs . | MM | S/L | 1,829 |

## Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28

| (g), and line 21. Enter | 21 | $1,886,184$ |
| :--- | :--- | :--- |
|  |  |  |
| see instructions . | $\mathbf{2 2}$ | $9,707,819$ |

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

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

Depreciation and Amortization (Including Information on Listed Property) - Attach to your tax return. Go to www.irs.gov/Form4562 for instructions and the latest information.

Business or activity to which this form relates 9,998,476

Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I.
1 Maximum amount (see instructions).
2 Total cost of section 179 property placed in service (see instructions)
3 Threshold cost of section 179 property before reduction in limitation (see instructions)
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions

| $\mathbf{1}$ |  |
| :---: | :---: |
| $\mathbf{2}$ | $37,140,649$ |
| 3 |  |
| $\mathbf{4}$ |  |
|  |  |
| $\mathbf{5}$ | $2,786,423,861$ |

6
(a) Description of property $-$
7 Listed property. Enter the amount from line 29 7

1,837,065
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7
9 Tentative deduction. Enter the smaller of line 5 or line 8
10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 . See instructions
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11
(c) Elected cost

13 Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line $12>\mid 13$
Note: Don't use Part II or Part III below for listed property. Instead, use Part V.
Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)
14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions.
14 33,644,732

15 Property subject to section 168(f)(1) election
15
,644,732

16 Other depreciation (including ACRS)
13,631
Part III MACRS Depreciation (Don’t include listed property. See instructions.)

## Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2019
51,085,673
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here

## Section B-Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only-see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 19a 3-year property |  | 2,138,511 |  |  |  | 560,814 |
| b 5-year property |  | 14,613,251 |  |  |  | 2,426,152 |
| c 7-year property |  | 12,695,121 |  |  |  | 1,428,351 |
| d 10-year property |  | 3,177,308 |  |  |  | 238,893 |
| e 15-year property |  | 4,476,462 |  |  |  | 180,486 |
| f 20-year property |  | 2,004,864 |  |  |  | 58,791 |
| g 25-year property |  | 971,142 | 25 yrs . |  | S/L | 45,158 |
| h Residential rental |  | 169,491,674 | 27.5 yrs . | MM | S/L | 3,610,570 |
| property undete | rmined type | 52,190 | 27.5 yrs . | MM | S/L | 35,916 |
| i Nonresidential real |  | 55,183,764 | 39 yrs . | MM | S/L | 784,383 |
| property Tota | al GDS cost | 264,804,287 |  | MM | S/L | 9,369,513 |
| Section C-Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System |  |  |  |  |  |  |
| 20a Class life |  | 753,572 |  |  | S/L | 37,232 |
| b 12-year |  | 51,216 | 12 yrs . |  | S/L | 1,817 |
| c 30-year |  | 2,633,336 | 30 yrs . | MM | S/L | 61,594 |
| d 40-year |  | 1,161,390 | 40 yrs . | MM | S/L | 17,090 |

## Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28
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

[^8]23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs .

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.
Section A-Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

|  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| (a) <br> Type of property (list vehicles first) | (b) Date placed in service | (c) Business/ investment use percentage | (d) <br> Cost or other basis | (e) <br> Basis for repreciation <br> (businesssinvestment <br> use only) | $\begin{gathered} (f) \\ \begin{array}{c} \text { Recovery } \\ \text { period } \end{array} \end{gathered}$ |  |  | $\begin{gathered} \text { (h) } \\ \text { Depreciation } \end{gathered}$ deduction | $\begin{aligned} & \text { (i) } \\ & \begin{array}{c} \text { Elected section } 179 \\ \text { cost } \end{array} \end{aligned}$ |
| 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than $50 \%$ in a qualified business use. See instructions . |  |  |  |  |  |  | 25 | 280,621 |  |

26 Property used more than $50 \%$ in a qualified business use:

|  |  | $\%$ | $1,583,395$ |  |  | $1,368,755$ |  |
| :--- | ---: | ---: | :--- | :--- | :--- | :--- | :--- |
|  |  | $\%$ |  |  |  |  |  |
|  |  | $\%$ |  |  |  |  |  |

27 Property used 50\% or less in a qualified business use:


## Section B-Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than $5 \%$ owner," or related person. If you provided vehicles to your employees, first answer the questions in Section $C$ to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (don't include commuting miles)
31 Total commuting miles driven during the year
32 Total other personal (noncommuting) miles driven
33 Total miles driven during the year. Add lines 30 through 32
34 Was the vehicle available for personal use during off-duty hours? .
35 Was the vehicle used primarily by a more than $5 \%$ owner or related person?
36 Is another vehicle available for personal use?

|  |  | (b) Vehicle 2 |  | (c) <br> Vehicle 3 |  | (d) Vehicle 4 |  | (e) <br> Vehicle 5 |  | $\begin{gathered} (f) \\ \text { Vehicle } 6 \end{gathered}$ |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |

Section C-Questions for Employers Who Provide Vehicles for Use by Their Employees
Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5\% owners or related persons. See instructions.


## Part VI Amortization

\(\left.$$
\begin{array}{c|c|c|c|c|c}\text { (a) } \\
\text { Description of costs }\end{array}
$$ \quad $$
\begin{array}{c}\text { (b) } \\
\text { Date amortization } \\
\text { begins }\end{array}
$$ \quad $$
\begin{array}{c}\text { (c) } \\
\text { Amortizable amount }\end{array}
$$ \quad $$
\begin{array}{c}\text { (d) } \\
\text { Code section }\end{array}
$$ \begin{array}{c}Amortization <br>
period or <br>

percentage\end{array}\right\}\)| (f) |
| :---: |
| Amortization for this year |

42 Amortization of costs that begins during your 2019 tax year (see instructions):


Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.
Section A-Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

| 24a Do you have evidence to support the business/investment use claimed? $\square$ Yes $\square$ No |
| :--- |
| 24b $1 f$ "Yes," is the evidence written? $\square$ Yes $\square$ No |


| (a) <br> Type of property (list <br> vehicles first) | (b) <br> Date placed <br> in service | (c) <br> Binvestmens/ <br> percentage | (d) <br> Cost or other basis | (e) <br> Basis for depreciation <br> (business/investment <br> use only) | (f) <br> Recovery <br> period | (g) <br> Method/ <br> Convention | (h) <br> Depreciation <br> deduction | (i) <br> Elected <br> section 179 <br> cost |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\mathbf{2 5}$Special depreciation allowance for qualified listed property placed in service during <br> the tax year and used more than $50 \%$ in a qualified business use. See instructions | $\mathbf{2 5}$ | $5,544,682$ |  |  |  |  |  |  |

26 Property used more than $50 \%$ in a qualified business use:

|  |  | $\%$ | $46,146,582$ |  |  | $5,619,710$ |  |
| :--- | ---: | ---: | ---: | :--- | :--- | :--- | :--- |
|  |  | $\%$ |  |  |  |  |  |
|  |  | $\%$ |  |  |  |  |  |

27 Property used 50\% or less in a qualified business use:


## Section B-Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than $5 \%$ owner," or related person. If you provided vehicles to your employees, first answer the questions in Section $C$ to see if you meet an exception to completing this section for those vehicles.


## Section C-Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5\% owners or related persons. See instructions.


## Part VI Amortization

(a)
Description of costs
(b)

Date amortization begins
(c)

Amortizable amount
(d)

Code section
(e)

Amortization
period or percentage
(f) Amortization for this year

42 Amortization of costs that begins during your 2019 tax year (see instructions):


Casualties and Thefts

- Go to www.irs.gov/Form4684 for instructions and the latest information. - Attach to your tax return.


Department of the Treasury Internal Revenue Service
Name(s) shown on tax return
Total Forms Filed $=\quad 95,349$

Identifying number
SECTION A-Personal Use Property (Use this section to report casualties and thefts of property not used in a trade or business or for income-producing purposes. You must use a separate Form 4684 (through line 12) for each casualty or theft event involving personal use property. If reporting a qualified disaster loss, see the instructions for special rules that apply before completing this section.)
If the casualty or theft loss is attributable to a federally declared disaster, check here $\square$ and enter the FEMA disaster declaration number. (See instructions.)

1 Description of properties (show type, location (city, state, and ZIP code), and date acquired for each property). Use a separate line for each property lost or damaged from the same casualty or theft. If you checked the box and entered the FEMA disaster declaration number above, enter the ZIP code for the property most affected on the line for Property $\mathbf{A}$.

|  | Type of Property | City and State | ZIP Code | Date Acquired |
| :--- | :---: | :---: | :---: | :---: |
| Property A |  |  |  |  |
| Property B |  |  |  |  |
| Property C |  |  |  |  |
| Property D |  |  |  |  |

2 Cost or other basis of each property
3 Insurance or other reimbursement (whether or not you filed a claim) (see instructions) .
Note: If line 2 is more than line 3, skip line 4.
4 Gain from casualty or theft. If line 3 is more than line 2 , enter the difference here and skip lines 5 through 9 for that column. See instructions if line 3 includes insurance or other reimbursement you did not claim, or you received payment for your loss in a later tax year
5 Fair market value before casualty or theft
6 Fair market value after casualty or theft
7 Subtract line 6 from line 5
8 Enter the smaller of line 2 or line 7
9 Subtract line 3 from line 8 . If zero or less, enter -0- . .

|  | Properties |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | A | B | C | D |
| $\mathbf{2}$ |  |  |  |  |

10 Casualty or theft loss. Add the amounts on line 9 in columns A through D
11 Enter $\$ 100$ ( $\$ 500$ if qualified disaster loss rules apply; see instructions).
12 Subtract line 11 from line 10. If zero or less, enter -0-
Caution: Use only one Form 4684 for lines 13 through 18.
13 Add the amounts on line 4 of all Forms 4684
14 Add the amounts on line 12 of all Forms 4684. If you have losses not attributable to a federally declared disaster, see the instructions
Caution: See instructions before completing line 15.
15 - If line 13 is more than line 14, enter the difference here and on Schedule D. Do not complete the rest of this section.

- If line 13 is equal to line 14 , enter -0 - here. Do not complete the rest of this section.
- If line 13 is less than line 14, and you have no qualified disaster losses subject to the $\$ 500$ reduction on line 11 on any Form(s) 4684, enter -0 - here and go to line 16. If you have qualified disaster losses subject to the $\$ 500$ reduction, subtract line 13 from line 14 and enter the smaller of this difference or the amount on line 12 of the Form(s) 4684 reporting those losses. Enter that result here and on Schedule A (Form 1040 or 1040-SR), line 16, or Form 1040-NR, Schedule A, line 7. If you claim the standard deduction, also include on Schedule A (Form 1040 or 1040-SR), line 16, the amount of your standard deduction (see the Instructions for Forms 1040 and 1040-SR). Do not complete the rest of this section if all of your casualty or theft losses are subject to the $\$ 500$ reduction
16 Add lines 13 and 15 . Subtract the result from line 14

| 15 | 36,827 |
| :--- | :--- |
| 16 | 11,103 |
| 17 | 12,280 |
|  |  |
| 18 | 7,681 |

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

Casualties and Thefts

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

SECTION A-Personal Use Property (Use this section to report casualties and thefts of property not used in a trade or business or for income-producing purposes. You must use a separate Form 4684 (through line 12) for each casualty or theft event involving personal use property. If reporting a qualified disaster loss, see the instructions for special rules that apply before completing this section.)
If the casualty or theft loss is attributable to a federally declared disaster, check here $\square$ and enter the FEMA disaster declaration number. (See instructions.)

1 Description of properties (show type, location (city, state, and ZIP code), and date acquired for each property). Use a separate line for each property lost or damaged from the same casualty or theft. If you checked the box and entered the FEMA disaster declaration number above, enter the ZIP code for the property most affected on the line for Property $\mathbf{A}$.

|  | Type of Property | City and State | ZIP Code | Date Acquired |
| :--- | :---: | :---: | :---: | :---: |
| Property A |  |  |  |  |
| Property B |  |  |  |  |
| Property C |  |  |  |  |
| Property D |  |  |  |  |

2 Cost or other basis of each property
3 Insurance or other reimbursement (whether or not you filed a claim) (see instructions) .
Note: If line 2 is more than line 3, skip line 4.
4 Gain from casualty or theft. If line 3 is more than line 2, enter the difference here and skip lines 5 through 9 for that column. See instructions if line 3 includes insurance or other reimbursement you did not claim, or you received payment for your loss in a later tax year
5 Fair market value before casualty or theft
6 Fair market value after casualty or theft
7 Subtract line 6 from line 5
8 Enter the smaller of line 2 or line 7
9 Subtract line 3 from line 8 . If zero or less, enter -0- . .
2 Properties

10 Casualty or theft loss. Add the amounts on line 9 in columns A through D
Attachment
Sequence No. 26

## Total Forms Filed $=$

95,349
Identifying number

## SECTION B-Business and Income-Producing Property

## Part I Casualty or Theft Gain or Loss (Use a separate Part I for each casualty or theft.)

19 Description of properties (show type, location, and date acquired for each property). Use a separate line for each property lost or damaged from the same casualty or theft. See instructions if claiming a loss due to a Ponzi-type investment scheme and Section $\mathbf{C}$ is not completed.

Property A
Property B
Property C
Property D
$\qquad$

P

20 Cost or adjusted basis of each property
21 Insurance or other reimbursement (whether or not you filed a claim). See the instructions for line 3 . Note: If line 20 is more than line 21, skip line 22.
22 Gain from casualty or theft. If line 21 is more than line 20 , enter the difference here and on line 29 or line 34, column (c), except as provided in the instructions for line 33. Also, skip lines 23 through 27 for that column. See the instructions for line 4 if line 21 includes insurance or other reimbursement you did not claim, or you received payment for your loss in a later tax year
23 Fair market value before casualty or theft
24 Fair market value after casualty or theft
25 Subtract line 24 from line 23
26 Enter the smaller of line 20 or line 25
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- .

(c) Gains from casualties or thefts includible in income

Casualty or Theft of Property Held One Year or Less


## Casualty or Theft of Property Held More Than One Year



# 2019 Line Item Estimates-All figures are estimates based on samples. 

## SECTION B-Business and Income-Producing Property

## Part I Casualty or Theft Gain or Loss (Use a separate Part I for each casualty or theft.)

19 Description of properties (show type, location, and date acquired for each property). Use a separate line for each property lost or damaged from the same casualty or theft. See instructions if claiming a loss due to a Ponzi-type investment scheme and Section C is not completed.
Property A
Property B
Property C
Property D

20 Cost or adjusted basis of each property
21 Insurance or other reimbursement (whether or not you filed a claim). See the instructions for line 3 .
Note: If line 20 is more than line 21, skip line 22.
22 Gain from casualty or theft. If line 21 is more than line 20 , enter the difference here and on line 29 or line 34, column (c), except as provided in the instructions for line 33 . Also, skip lines 23 through 27 for that column. See the instructions for line 4 if line 21 includes insurance or other reimbursement you did not claim, or you received payment for your loss in a later tax year
23 Fair market value before casualty or theft
24 Fair market value after casualty or theft
25 Subtract line 24 from line 23
26 Enter the smaller of line 20 or line 25
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-


## Casualty or Theft of Property Held One Year or Less

28 Casualty or theft loss. Add the amounts on line 27. Enter the total here and on line 29 or line 34 (see instructions)

| Part II | Summary of Gains and Losses (from separate Parts I) | (b) Losses from casualties or thefts |  | (c) Gains from casualties or thefts includible in income |
| :---: | :---: | :---: | :---: | :---: |
|  | (a) Identify casualty or theft | (i) Trade, business rental, or royalty property | (ii) Incomeproducing property |  |



31 Combine line 30, columns (b)(i) and (c). Enter the net gain or (loss) here and on Form 4797, line 14. If Form 4797 is not otherwise required, see instructions

|  |  |
| ---: | ---: |
|  | ) |
|  |  |
|  |  |
|  |  |
|  |  |

32 Enter the amount from line 30, column (b)(ii) here. Individuals, enter the amount from income-producing property on Schedule A (Form 1040 or 1040-SR), line 16, or Form 1040-NR, Schedule A, line 7. (Do not include any loss on property used as an employee.) Estates and trusts, partnerships, and S corporations, see instructions
$-227,214$

## Casualty or Theft of Property Held More Than One Year

 the Note below. All others, enter this amount on Form 4797, line 14. If Form 4797 is not otherwise required, see instructions
b Enter the amount from line 35, column (b)(ii) here. Individuals, enter the amount from income-producing property on Schedule A (Form 1040 or 1040-SR), line 16, or Form 1040-NR, Schedule A, line 7. (Do not include any loss on property used as an employee.) Estates and trusts, enter on the "Other deductions" line of your tax return. Partnerships and S corporations, see the Note below .
39 If the loss on line 37 is less than or equal to the gain on line 36 , combine lines 36 and 37 and enter here. Partnerships, see the Note below. All others, enter this amount on Form 4797, line 3

| 33 | 62,215 |
| ---: | ---: |
|  |  |
| ) |  |
| ) |  |
| 36 | 149,228 |
| 37 | $1,425,967$ |
|  |  |
| $\mathbf{3 8 a}$ | $-732,087$ |
|  |  |
| $\mathbf{3 8 b}$ | 686,610 |
| 39 | 122,915 |

Note: Partnerships, enter the amount from line 38a, 38b, or 39 on Form 1065, Schedule K, line 11. S corporations, enter the amount from line 38a or 38b on Form 1120-S, Schedule K, line 10.

## 2019 Line Item Estimates—All figures are estimates based on samples. <br> Number of returns filed for selected lines

| Name(s) shown on tax return | Identifying number |
| :--- | :--- |
| SECTION C-Theft Loss Deduction for Ponzi-Type Investment Scheme Using the Procedures in Revenue |  |
| Procedure 2009-20 (Complete this section in lieu of Appendix A in Revenue Procedure 2009-20. See instructions.) |  |

## Part I Computation of Deduction

40 Initial investment
41 Subsequent investments (see instructions)
42 Income reported on your tax returns for tax years prior to the discovery year (see instructions)
43 Add lines 40, 41, and 42
44 Withdrawals for all years (see instructions)
45 Subtract line 44 from line 43 . This is your total qualified investment
46 Enter 0.95 ( $95 \%$ ) if you have no potential third-party recovery. Enter 0.75 (75\%) if you have potential third-party recovery
47 Multiply line 46 by line 45
48 Actual recovery


## Part II Required Statements and Declarations (See instructions.)

- I am claiming a theft loss deduction pursuant to Revenue Procedure 2009-20 from a specified fraudulent arrangement conducted by the following individual or entity.
Name of individual or entity $\qquad$ Taxpayer identification number (if known) Address
- I have written documentation to support the amounts reported in Part I of this Section C.
- I am a qualified investor, as defined in section 4.03 of Revenue Procedure 2009-20.
- If I have determined the amount of my theft loss deduction using 0.95 on line 46 above, I declare that I have not pursued and do not intend to pursue any potential third-party recovery, as that term is defined in section 4.10 of Revenue Procedure 2009-20.
- I agree to comply with the conditions and agreements set forth in Revenue Procedure 2009-20 and this Section C.
- If I have already filed a return or amended return that does not satisfy the conditions in section 6.02 of Revenue Procedure 2009-20, I agree to all adjustments or actions that are necessary to comply with those conditions. The tax year(s) for which I filed the return(s) or amended return(s) and the date(s) on which they were filed are as follows:


## SECTION C-Theft Loss Deduction for Ponzi-Type Investment Scheme Using the Procedures in Revenue

 Procedure 2009-20 (Complete this section in lieu of Appendix A in Revenue Procedure 2009-20. See instructions.)
## Part I Computation of Deduction

40 Initial investment.
41 Subsequent investments (see instructions)
42 Income reported on your tax returns for tax years prior to the discovery year (see instructions)
43 Add lines 40, 41, and 42
44 Withdrawals for all years (see instructions)
45 Subtract line 44 from line 43 . This is your total qualified investment
46 Enter 0.95 ( $95 \%$ ) if you have no potential third-party recovery. Enter 0.75 ( $75 \%$ ) if you have potential third-party recovery
47 Multiply line 46 by line 45
48 Actual recovery


## Part II Required Statements and Declarations (See instructions.)

- I am claiming a theft loss deduction pursuant to Revenue Procedure 2009-20 from a specified fraudulent arrangement conducted by the following individual or entity.
Name of individual or entity $\qquad$
Taxpayer identification number (if known)


## Address

- I have written documentation to support the amounts reported in Part I of this Section C.
- I am a qualified investor, as defined in section 4.03 of Revenue Procedure 2009-20.
- If I have determined the amount of my theft loss deduction using 0.95 on line 46 above, I declare that I have not pursued and do not intend to pursue any potential third-party recovery, as that term is defined in section 4.10 of Revenue Procedure 2009-20.
- I agree to comply with the conditions and agreements set forth in Revenue Procedure 2009-20 and this Section C.
- If I have already filed a return or amended return that does not satisfy the conditions in section 6.02 of Revenue Procedure 2009-20, I agree to all adjustments or actions that are necessary to comply with those conditions. The tax year(s) for which I filed the return(s) or amended return(s) and the date(s) on which they were filed are as follows:


## SECTION D-Election To Deduct Federally Declared Disaster Loss in Preceding Tax Year (See instructions.)

## Part I Election Statement

By providing all of the information below, the taxpayer elects, under section 165(i) of the Internal Revenue Code, to deduct a loss attributable to a federally declared disaster and that occurred in a federally declared disaster area in the tax year immediately preceding the tax year the loss was sustained.

Attach this Section D to your return or amended return for the tax year immediately preceding the tax year the loss was sustained to claim the disaster loss deduction.

52 Provide the name or a description of the federally declared disaster.

53 Provide the date or dates (mm/dd/yyyy) of the loss or losses attributable to the federally declared disaster

54 Specify the address, including the city or town, county or parish, state and ZIP code where the damaged or destroyed property was located at the time of the disaster.

## Part II Revocation of Prior Election

By providing all of the information below, the taxpayer revokes the prior election under section 165(i) of the Internal Revenue Code to deduct a loss attributable to a federally declared disaster and that occurred in a federally declared disaster area in the tax year immediately preceding the tax year the loss was sustained.

Attach this Section D to your amended return for the tax year immediately preceding the tax year the loss was sustained to remove the previous disaster loss deduction.

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

56 Specify the date ( $\mathrm{mm} / \mathrm{dd} / \mathrm{yyyy}$ ) you filed the prior election, which you are now revoking. (See instructions and note that new rules went into effect on October 13, 2016.)

57 Enclose your payment or otherwise provide evidence for, or explanation of, your arrangements for the repayment of the amount of any credit or refund which you received and which resulted from the prior election (which you are now revoking).

# 2019 Line Item Estimates—All figures are estimates based on samples. 

## SECTION D-Election To Deduct Federally Declared Disaster Loss in Preceding Tax Year (See instructions.)

## Part I Election Statement

By providing all of the information below, the taxpayer elects, under section 165(i) of the Internal Revenue Code, to deduct a loss attributable to a federally declared disaster and that occurred in a federally declared disaster area in the tax year immediately preceding the tax year the loss was sustained.
Attach this Section $D$ to your return or amended return for the tax year immediately preceding the tax year the loss was sustained to claim the disaster loss deduction.

52 Provide the name or a description of the federally declared disaster. $\qquad$

53 Provide the date or dates ( $\mathrm{mm} / \mathrm{dd} / \mathrm{yyyy}$ ) of the loss or losses attributable to the federally declared disaster.
54 Specify the address, including the city or town, county or parish, state and ZIP code where the damaged or destroyed property was located at the time of the disaster.

## Part II Revocation of Prior Election

By providing all of the information below, the taxpayer revokes the prior election under section 165(i) of the Internal Revenue Code to deduct a loss attributable to a federally declared disaster and that occurred in a federally declared disaster area in the tax year immediately preceding the tax year the loss was sustained.

Attach this Section $D$ to your amended return for the tax year immediately preceding the tax year the loss was sustained to remove the previous disaster loss deduction.

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

56 Specify the date ( $\mathrm{mm} / \mathrm{dd} / \mathrm{yyyy}$ ) you filed the prior election, which you are now revoking. (See instructions and note that new rules went into effect on October 13, 2016.)
57 Enclose your payment or otherwise provide evidence for, or explanation of, your arrangements for the repayment of the amount of any credit or refund which you received and which resulted from the prior election (which you are now revoking).

Department of the Treasury
Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

- Attach to your tax return. Internal Revenue Service
Total Forms Filed =

3,282,996
1 Enter the gross proceeds from sales or exchanges reported to you for 2019 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 . See instructions

297,844
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)

| 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 other basis, plus improvements and expense of sale |  | (g) Gain or (loss) Subtract (f) from the sum of (d) and (e) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | 2,197,135 |
| 3 <br> 4 <br> 5 <br> 6 <br> 7 | Gain, if any, from Form 4684, line 39 <br> Section 1231 gain from installment sales from Form 6252, line 26 or 37. <br> Section 1231 gain or (loss) from like-kind exchanges from Form 8824 <br> Gain, if any, from line 32, from other than casualty or theft <br> Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows <br> 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. <br> Individuals, partners, $\mathbf{S}$ 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. |  |  |  |  |  | 3 | 11,235 |
|  |  |  |  |  |  |  | 4 | 185,895 |
|  |  |  |  |  |  |  | 5 | 14,500 |
|  |  |  |  |  |  |  | 6 | 641,020 |
|  |  |  |  |  |  |  | 7 | 2,803,386 |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | Nonrecaptured net section 1231 losses from prior years. See instructions . . . . . . . . . . . . . |  |  |  |  |  | 8 | 251,080 |
|  | Subtract line 8 from line 7 . If zero or less, enter -0 -. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions |  |  |  |  |  | 9 | 136,415 |

## 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):


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

Sales of Business Property

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

- Attach to your tax return.

Department of the Treasury
Internal Revenue Service
3,282,996
Identifying number

1 Enter the gross proceeds from sales or exchanges reported to you for 2019 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 . See instructions

1
162,528,600
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)

2
(a) Descriptio
of property

|  | (b) Date acquired <br> (mo., day, yr.) | (c) Date sold <br> (mo., day, yr.) | (d) Gross <br> sales price | (e) Depreciation <br> allowed or <br> allowable since <br> acquisition |
| :---: | :---: | :---: | :---: | :---: |

3 Gain, if any, from Form 4684, line 39
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37.
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824
6 Gain, if any, from line 32, from other than casualty or theft
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, $\mathbf{S}$ corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9 . If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines $8,9,11$, and 12 below.
8 Nonrecaptured net section 1231 losses from prior years. See instructions
9 Subtract line 8 from line 7 . If zero or less, enter -0 -. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions


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):


18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.
a If the loss on line 11 includes a loss from Form 4684, line 35 , column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040 or Form 1040-SR), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions
b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040 or Form 1040-SR), Part I, line 4


For Paperwork Reduction Act Notice, see separate instructions.
Cat. No. 13086

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

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

| 19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property: |  |  |  | (b) Date acquired (mo., day, yr.) | (c) Date sold (mo., day, yr.) |
| :---: | :---: | :---: | :---: | :---: | :---: |
| A |  |  |  |  |  |
| B |  |  |  |  |  |
| C |  |  |  |  |  |
| D |  |  |  |  |  |
| These columns relate to the properties on lines 19A through 19D. |  | Property A | Property B | Property C | Property D |
| 20 Gross sales price (Note: See line 1 before completing.) <br> 21 Cost or other basis plus expense of sale. <br> 22 Depreciation (or depletion) allowed or allowable. <br> 23 Adjusted basis. Subtract line 22 from line 21. <br> 24 Total gain. Subtract line 23 from line 20 | 20 |  |  |  |  |
|  | 21 |  |  |  |  |
|  | 22 |  |  |  |  |
|  | 23 |  |  |  |  |
|  | 24 |  |  |  |  |
| 25 If section 1245 property: <br> a Depreciation allowed or allowable from line 22 <br> b Enter the smaller of line 24 or 25 a. |  |  |  |  |  |
|  | 25a |  |  |  |  |
|  | 25b | 251,309 |  |  |  |
| 26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26 g , except for a corporation subject to section 291. <br> a Additional depreciation after 1975. See instructions <br> b Applicable percentage multiplied by the smaller of line 24 or line $26 a$. See instructions. <br> c Subtract line 26 a from line 24 . If residential rental property or line 24 isn't more than line 26 a , skip lines 26 d and 26 e <br> d Additional depreciation after 1969 and before 1976. <br> e Enter the smaller of line 26c or 26d <br> f Section 291 amount (corporations only) <br> g Add lines 26b, 26e, and $26 f$ | 26a |  |  |  |  |
|  | 26b |  |  |  |  |
|  | 26c |  |  |  |  |
|  | 26d |  |  |  |  |
|  | 26. |  |  |  |  |
|  | 268 |  |  |  |  |
|  | 26 g | 3,718 |  |  |  |
| 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. <br> a Soil, water, and land clearing expenses <br> b Line 27a multiplied by applicable percentage. See instructions <br> c Enter the smaller of line 24 or 27 b | 27a |  |  |  |  |
|  | 27b |  |  |  |  |
|  | 27c | * |  |  |  |
| 28 If section 1254 property: <br> a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions <br> b Enter the smaller of line 24 or 28a. |  |  |  |  |  |
|  | 28a |  |  |  |  |
|  | 28b | 97 |  |  |  |
| 29 If section 1255 property: <br> a Applicable percentage of payments excluded from income under section 126. See instructions . <br> b Enter the smaller of line 24 or 29a. See instructions |  |  |  |  |  |
|  | 29a |  |  |  |  |
|  | 29b |  |  |  |  |

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

|  |  |
| :---: | :---: |
| $\mathbf{3 0}$ | $1,022,722$ |
| $\mathbf{3 1}$ | 570,596 |
| $\mathbf{3 2}$ | 641,722 |

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

641,722

## 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 |  |  |  |
| Form 4797 (2019) |  |  |  |

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


## 2019 Line Item Estimates-All figures are estimates based on samples. <br> Amounts of selected lines filed (in thousands of dollars)

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

| (a) Description of section 1245, 1250, 1252, 1254, or 1255 property: |  |  |  | (b) Date acquired (mo., day, yr.) | (c) Date sold (mo., day, yr.) |
| :---: | :---: | :---: | :---: | :---: | :---: |
| A |  |  |  |  |  |
| B |  |  |  |  |  |
| c |  |  |  |  |  |
| D |  |  |  |  |  |
| These columns relate to the properties on lines 19A through 19D. |  | Property A | Property B | Property C | Property D |
| 20 Gross sales price (Note: See line 1 before completing.) <br> 21 Cost or other basis plus expense of sale . <br> 22 Depreciation (or depletion) allowed or allowable. <br> 23 Adjusted basis. Subtract line 22 from line 21. | 20 |  |  |  |  |
|  | 21 |  |  |  |  |
|  | 22 |  |  |  |  |
|  | 23 |  |  |  |  |
| 24 Total gain. Subtract line 23 from line 20 | 24 |  |  |  |  |
| 25 If section 1245 property: <br> a Depreciation allowed or allowable from line 22 <br> b Enter the smaller of line 24 or 25 a. | 25a |  |  |  |  |
|  | 25b | 5,293,201 |  |  |  |
| 26 If section 1250 property: If straight line depreciation was used, enter - -0 on line 26 g , except for a corporation subject to section 291. <br> a Additional depreciation after 1975. See instructions | 26a |  |  |  |  |
| b Applicable percentage multiplied by the smaller of line 24 or line 26 a . See instructions. | 26b |  |  |  |  |
| c Subtract line 26 a from line 24 . If residential rental property or line 24 isn't more than line 26 a , skip lines 26 d and 26 e | 26c |  |  |  |  |
| d Additional depreciation after 1969 and before 1976. . | 26d |  |  |  |  |
| e Enter the smaller of line 26 c or 26 d <br> f Section 291 amount (corporations only) | 26 e |  |  |  |  |
|  | 266 |  |  |  |  |
|  | 26 g | 93,438 |  |  |  |
| 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. | 27a |  |  |  |  |
| a Soil, water, and land clearing expenses <br> b Line 27a multiplied by applicable percentage. See instructions <br> c Enter the smaller of line 24 or 27 b | 27b |  |  |  |  |
|  | 27c | * |  |  |  |
| 28 If section 1254 property: <br> a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions <br> b Enter the smaller of line 24 or 28 a. |  |  |  |  |  |
|  | 28a |  |  |  |  |
|  | 28b | 17,045 |  |  |  |
| 29 If section 1255 property: |  |  |  |  |  |
| a Applicable percentage of payments excluded from income under section 126. See instructions . | 29a |  |  |  |  |
| b Enter the smaller of line 24 or 29a. See instructions | 29b |  |  |  |  |

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

| $\mathbf{3 0}$ | $68,318,185$ |
| :---: | :---: |
| $\mathbf{3 1}$ | $13,041,354$ |
| $\mathbf{3 2}$ | $55,276,831$ |

31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13
55,276,831
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

## 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.

|  |
| :--- |
|  |
| 33 |
| 34 |
| 35 |

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

Department of the Treasury Internal Revenue Service (99)

- Attach to Form 1040, Form 1040-SR, or Form 1040-NR.
- Go to www.irs.gov/Form4835 for the latest information.


## Total Forms Filed $=\mathbf{4 8 8 , 1 7 3}$



Part I Gross Farm Rental Income-Based on Production. Include amounts converted to cash or the equivalent.

|  | Income from production of livestock, produce, grains, and other crops |  |  | 1 | 195,162 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 2a | Cooperative distributions (Form(s) 1099-PATR) . . 2 la | 76,434 | 2b Taxable amount | 2b |  |
| 3a | Agricultural program payments (see instructions) . . 3a | 175,493 | 3b Taxable amount | 3b | 174,561 |
| a | Commodity Credit Corporation (CCC) loans (see instructions): |  |  |  |  |
| b | CCC loans forfeited . . . . . . . . . . . 4b | 0 | 4c Taxable amount | 4c |  |
| 5 | Crop insurance proceeds and federal crop disaster payments (see instructions): |  |  |  | 21,681 |
| c | Amount received in 2019 . . . . . . . . . . .If election to defer to 2020 is attached, check here $\mathbf{5} \quad \mathbf{2 6 , 0 8 5} \quad$ 5b Taxable amount |  |  | 5d |  |
| 6 | Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) |  |  | 6 | 212,215 |
| 7 | Gross farm rental income. Add amounts in the right column for lines 1 through 6. Enter the total here and on Schedule E (Form 1040 or 1040-SR), line 42 |  |  | 7 | 448,888 |

Part II Expenses-Farm Rental Property. Do not include personal or living expenses.

| 8 | Car and truck expenses (see Schedule F (Form 1040 or 1040-SR) instructions). Also attach Form 4562 | 8 | 37,008 |  | Pension and profit-sharing plans <br> Rent or lease: | 21 | * |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 9 | Chemicals | 9 | 48,573 | a | Vehicles, machinery, and |  |  |
| 10 | Conservation expenses (see instructions) | 10 | 4,877 |  | equipment (see instructions) | 22a |  |
| 11 | Custom hire (machine work) . | 11 | 32,070 | b | Other (land, animals, etc.) | 22b |  |
| 12 | Depreciation and section 179 expense deduction not claimed elsewhere | 12 | 131,371 |  | Repairs and maintenance | 23 <br> 24 | 111,625 |
| 13 | Employee benefit programs other than on line 21 (see Schedule F (Form 1040 or $1040-\mathrm{SR}$ ) instructions) . | 13 | * |  | Storage and warehousing Supplies <br> Taxes | 25 <br> 26 <br> 27 | 62,636 309,663 |
| 14 | Feed | 14 | 10,213 | 28 | Utilities. | 28 |  |
| 15 | Fertilizers and lime . | 15 | 65,999 |  | Veterinary, breeding, and |  |  |
| 16 | Freight and trucking | 16 |  |  | medicine . | 29 |  |
| 17 | Gasoline, fuel, and oil | 17 | 64,566 |  | Other expenses (specify): |  |  |
| 18 | Insurance (other than health) | 18 | 183,804 | a |  | 30a |  |
| 19 | Interest (see instructions): |  |  | b |  | 30b |  |
| a | Mortgage (paid to banks, etc.) | 19a | 36,556 | c |  | 30c |  |
| b | Other | 19b | 20,141 | d |  | 30d |  |
| 20 | Labor hired (less employment credits) |  |  | e |  | 30e |  |
|  | (see Schedule F (Form 1040 or |  |  | f |  | 30f |  |
|  | 1040-SR) instructions) . . . . . | 20 | 9,512 | g |  | 30g |  |
| 31 | Total expenses. Add lines 8 through 30g | See | tructions |  |  | 31 | 388,576 |
| 32 | Net farm rental income or (loss). Subtr on Schedule E (Form 1040 or 1040-SR), instructions |  | from line If the res | he re a los | ult is income, enter it here and you must go to line 34 . See | 32 | 460,631 |
| 33 | Reserved for future use |  |  |  |  | 33 |  |
| 34 | If line 32 is a loss, check the See instructions . |  | describ | your | investment in this activity. | $34 a$ $34 b$ | All investment is at risk. <br> Some investment is not at risk. |
|  | You may have to complete Form 8582 you checked. If you checked box 34b, y either case, enter the deductible loss See instructions . | to de u mu here duct | mine your complete on Sche loss.(+) | uctible <br> 619 <br> E (Fo <br> pend | loss, regardless of which box 8 before going to Form 8582. In orm 1040 or $1040-S R$ ), line 40. ed loss carryover. ( - ). $=37,747$. | 34c | 85,566 |
| For | work Reducti |  |  |  | Cat. No. 13117W |  | Form 4835 (2019) |

[^9]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

2a Cooperative distributions (Form(s) 1099-PATR)

| $2 a$ | $1,138,456$ |
| :---: | :---: |

s)
3a $1,095,765$

2b Taxable amount
Commodity Credit Corporation
(CCC) loan

CCC loans reported under election
b CCC loans forfeited $\square$ . 4b 0 4c Taxable amount
5 Crop insurance proceeds and federal crop disaster payments (see instructions):
a Amount received in 2019. is . . . . . . . $\square$ 5a 131,416 5b Taxable amount
c If election to defer to 2020 is attached, check here $\square \quad$ 5d Amount deferred from 2018
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)
7 Gross farm rental income. Add amounts in the right column for lines 1 through 6. Enter the total here and on Schedule E (Form 1040 or 1040-SR), line 42 .

| 1 | $4,464,990$ |
| :---: | :---: |
| $2 b$ |  |
| $3 b$ | $1,089,271$ |
| $4 a$ | $*$ |
| 4 c |  |
| 5 b | 108,198 |
| 5 d |  |
| 6 | $3,286,940$ |
| 7 | $9,766,256$ |

Part II Expenses - Farm Rental Property. Do not include personal or living expenses.

| 8 | Car and truck expenses (see Schedule F (Form 1040 or 1040-SR) instructions). Also attach Form 4562 | 8 | 43,272 |  <br> If the result is income, enter it here and a loss, you must go to line 34 . See <br> your investment in this activity. <br> uctible loss, regardless of which box $m 6198$ before going to Form 8582. In E (Form 1040 or 1040-SR), line 40. ended loṣs carryouver $(-)=.72,007$ |  | 21 | * |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 9 | Chemicals | 9 | 315,643 |  |  |  |  |
| 10 | Conservation expenses (see instructions) | 10 | 18,977 |  |  | 22a |  |
| 11 | Custom hire (machine work) | 11 | 125,515 |  |  | 22b |  |
| 12 | Depreciation and section 179 expense |  |  |  |  | 23 | 302,851 |
|  | deduction not claimed elsewhere | 12 | 965,177 |  |  | 24 | 263,109 |
| 13 | Employee benefit programs other than |  |  |  |  | 25 |  |
|  | on line 21 (see Schedule F (Form 1040 |  |  |  |  | 26 | 67,722 |
|  | or 1040-SR) instructions) . . | 13 | * |  |  | 27 | 906,471 |
| 14 | Feed | 14 | 13,072 |  |  | 28 |  |
| 15 | Fertilizers and lime | 15 | 478,903 |  |  |  |  |
| 16 | Freight and trucking | 16 |  |  |  | 29 |  |
| 17 | Gasoline, fuel, and oil | 17 | 72,950 |  |  |  |  |
| 18 | Insurance (other than health) | 18 | 283,394 |  |  | 30a |  |
| 19 | Interest (see instructions): |  |  |  |  | 30b |  |
| a | Mortgage (paid to banks, etc.) | 19a | 330,937 |  |  | 30c |  |
| b | Other | 19b | 143,621 |  |  | 30d |  |
| 20 | Labor hired (less employment credits) |  |  |  |  | 30e |  |
|  | (see Schedule F (Form 1040 or |  |  |  |  | 30f |  |
|  | 1040-SR) instructions) . . | 20 | 39,038 |  |  | 30g |  |
| 31 | Total expenses. Add lines 8 through 30 | See | tructions |  |  | 31 | 5,343,930 |
| 32 | Net farm rental income or (loss). Subtr on Schedule E (Form 1040 or 1040-SR) instructions | line | 1 from line If the res |  |  | 32 | 4,422,326 |
| 33 | Reserved for future use |  |  |  |  | 33 |  |
| 34 | If line 32 is a loss, check the See instructions . |  | describ |  |  | $34 a$ $34 b$ | All investment is at risk. <br> Some investment is not at risk. |
|  | You may have to complete Form 8582 you checked. If you checked box 34b, y either case, enter the deductible loss See instructions . . Nonded | to de ou mu here uctib | mine your complete on Sched oss (+.) / su |  |  | 34c | 616,750 |
|  |  |  |  |  |  |  | 4835 (2019) |


| 105 | Investment Interest Expense Deduction <br> Go to www.irs.gov/Form4952 for the latest information. <br> Attach to your tax return. |  | OMB No. 1545-0191 |
| :---: | :---: | :---: | :---: |
| Department of the Treasury Internal Revenue Service (99) |  |  | $\text { R(1) } 19$ <br> Attachment <br> Sequence No. 51 |
| Name(s) shown on return | Total Forms Filed $=$ | 1,398,942 | number |

## Part I Total Investment Interest Expense



## Part II Net Investment Income

4a Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)
b Qualified dividends included on line 4a
c Subtract line 4b from line 4a

| 4a | 1,285,083 |  | 1,242,240 |
| :---: | :---: | :---: | :---: |
| 4b | 1,042,689 |  |  |
| $\begin{array}{l\|l} \text { 4d } & 640,100 \\ \hline \end{array}$ |  | 4c |  |
|  |  |  | 285,442 |
| 4e | 603,410 |  |  |
| come. See instructions |  | 4f |  |
|  |  | 4 g | 133,492 |
|  |  | 4h | 1,257,863 |
|  |  | 5 | 377,928 |
|  |  | 6 | 1,213,591 |

## Part III Investment Interest Expense Deduction


fom 4952

## Department of the Treasury

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

## Part I Total Investment Interest Expense



## Part II Net Investment Income

4a Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)
b Qualified dividends included on line 4a
c Subtract line 4b from line 4a
d Net gain from the disposition of property held for investment
e Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions
f Subtract line 4 e from line 4 d


## Part III Investment Interest Expense Deduction



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.

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

| Home address (number and street), or P.O. box if mail is not delivered to your home |  | Apt. no. |
| :--- | :--- | :--- | :--- | :--- | :--- |
| City, town or post office, state, and ZIP code. If you have a foreign address, also complete the <br> spaces below. See instructions. | If this is an amended <br> return, check here |  |
| Foreign country name | Foreign province/state/county | Foreign postal code | If you only owe the additional $10 \%$ tax on early distributions, you may be able to report this tax directly on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57, without filing Form 5329. See the instructions for Schedule 2 (Form 1040 or 1040-SR), line 6, or for Form 1040-NR, line 57.

Part I Additional Tax on Early Distributions. Complete this part if you took a taxable distribution before you reached age $591 / 2$ from a qualified retirement plan (including an IRA) or modified endowment contract (unless you are reporting this tax directly on Form 1040, 1040-SR, or 1040-NR-see above). You also may have to complete this part to indicate that you qualify for an exception to the additional tax on early distributions or for certain Roth IRA distributions. See instructions.
1 Early distributions included in income. For Roth IRA distributions, see instructions .
2 Early distributions included on line 1 that are not subject to the additional tax (see instructions).
Enter the appropriate exception number from the instructions:
3 Amount subject to additional tax. Subtract line 2 from line 1
4 Additional tax. Enter 10\% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57

| $\mathbf{1}$ | $1,744,375$ |
| :---: | :---: |
| $\mathbf{2}$ | 747,595 |
| $\mathbf{3}$ | $1,273,561$ |
| $\mathbf{4}$ | $1,269,309$ |

Caution: If any part of the amount on line 3 was a distribution from a SIMPLE IRA, you may have to include $25 \%$ of that amount on line 4 instead of 10\%. See instructions.
Part II Additional Tax on Certain Distributions From Education Accounts and ABLE Accounts. Complete this part if you included an amount in income, on Schedule 1 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 21, 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

| $\mathbf{5}$ | 224,871 |
| :---: | :---: |
| $\mathbf{6}$ |  |
| $\mathbf{7}$ | 148,835 |
|  |  |
| $\mathbf{8}$ | 144,995 |


$\left.\begin{array}{llllllll|}6 & \text { Distributions included on line } 5 \text { that are not subject to the additional tax (see instructions) } & . & . & . & . \\ 7 & \text { Amount subject to additional tax. Subtract line } 6 \text { from line } 5 . & . & . & . & . & . & .\end{array}\right)$.
9 Enter your excess contributions from line 16 of your 2018 Form 5329. See instructions. If zero, go to line 15
10 If your traditional IRA contributions for 2019 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0-
112019 traditional IRA distributions included in income (see instructions)
122019 distributions of prior year excess contributions (see instructions)
13 Add lines 10, 11, and 12

|  |  |
| :--- | :--- |
| 10 |  |
| 11 |  |
| 12 |  |


| 9 |  |
| :---: | :---: |
|  |  |
| 13 |  |
|  |  |
| 15 |  |
| 16 | 37,685 |
| 17 | 27,514 |

Part IV Additional Tax on Excess Contributions to Roth IRAs. Complete this part if you contributed more to your Roth IRAs for 2019 than is allowable or you had an amount on line 25 of your 2018 Form 5329.

| 18 | Enter your excess contributions from line 24 of your 2018 Form 5329. See instructions. If zero, go to line 23 |  |  | 18 | 54,240 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 19 | If your Roth IRA contributions for 2019 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0- | 19 |  |  |  |
| 20 | 2019 distributions from your Roth IRAs (see instructions) | 20 | 6,608 |  |  |
| 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 2019 (see instructions) |  |  | 23 | 57,020 |
| 24 | Total excess contributions. Add lines 22 and 23 . . . . . . . . . . . . . . . . . . |  |  | 24 | 88,849 |
| 25 | Additional tax. Enter 6\% (0.06) of the smaller of line 24 or the value of your Roth IRAs on December 31, 2019 (including 2019 contributions made in 2020). Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57 |  |  | 25 | 81,661 |
|  |  |  |  |  | Form 5329 |

If you only owe the additional $10 \%$ tax on early distributions, you may be able to report this tax directly on Schedule 2 (Form 1040 or 1040-SR), line 6 , or Form 1040-NR, line 57, without filing Form 5329. See the instructions for Schedule 2 (Form 1040 or 1040-SR), line 6 , or for Form 1040-NR, line 57.
Part I Additional Tax on Early Distributions. Complete this part if you took a taxable distribution before you reached age $591 / 2$ from a qualified retirement plan (including an IRA) or modified endowment contract (unless you are reporting this tax directly on Form 1040, 1040-SR, or 1040-NR-see above). You also may have to complete this part to indicate that you qualify for an exception to the additional tax on early distributions or for certain Roth IRA distributions. See instructions.
1 Early distributions included in income. For Roth IRA distributions, see instructions .

| $\mathbf{1}$ | $26,119,515$ |
| :---: | :---: |
| $\mathbf{2}$ | $9,741,192$ |
| $\mathbf{3}$ | $16,378,322$ |
| $\mathbf{4}$ | $1,664,419$ |

Caution: If any part of the amount on line 3 was a distribution from a SIMPLE IRA, you may have to include $25 \%$ of that amount on line 4 instead of $10 \%$. See instructions.
Part II Additional Tax on Certain Distributions From Education Accounts and ABLE Accounts. Complete this part if you included an amount in income, on Schedule 1 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 21, 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

| $\mathbf{5}$ | 601,278 |
| :---: | :---: | :---: |
| $\mathbf{6}$ |  |
| $\mathbf{7}$ | 379,415 |
|  |  |
| $\mathbf{8}$ | 37,959 |

## Part III

 Distributions included on line 5 that are not subject to the additional tax (see instructions)7 Amount subject to additional tax. Subtract line 6 from line 5
8 Additional tax. Enter 10\% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040 or 1040SR), line 6, or Form 1040-NR, line 57

37,959 traditional IRAs for 2019 than is allowable or you had an amount on line 17 of your 2018 Form 5329.
9 Enter your excess contributions from line 16 of your 2018 Form 5329. See instructions. If zero, go to line 15 10 If your traditional IRA contributions for 2019 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0-
112019 traditional IRA distributions included in income (see instructions).
12 2019 distributions of prior year excess contributions (see instructions) Add lines 10, 11, and 12
$\square$

| 9 |  |
| :---: | :---: |
|  |  |
|  |  |
| 13 |  |
| 14 |  |
| 15 |  |
| 16 | 232,863 |
| 17 | 10,715 |

Part IV Additional Tax on Excess Contributions to Roth IRAs. Complete this part if you contributed more to your Roth IRAs for 2019 than is allowable or you had an amount on line 25 of your 2018 Form 5329.

18
Enter your excess contributions from line 24 of your 2018 Form 5329. See instructions. If zero, go to line 23
19 If your Roth IRA contributions for 2019 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0-
202019 distributions from your Roth IRAs (see instructions)
21 Add lines 19 and 20
22 Prior year excess contributions. Subtract line 21 from line 18 . If zero or less, enter $-0-$.
23 Excess contributions for 2019 (see instructions)
24 Total excess contributions. Add lines 22 and 23

| 18 | 280,767 |
| :---: | :---: |
|  |  |
| $\mathbf{2 1}$ |  |
| $\mathbf{2 2}$ |  |
| $\mathbf{2 3}$ | 182,702 |
| $\mathbf{2 4}$ | 377,401 |
| 25 | 19,756 |
| Form 5329 (2019) |  |

Part V Additional Tax on Excess Contributions to Coverdell ESAs. Complete this part if the contributions to your Coverdell ESAs for 2019 were more than is allowable or you had an amount on line 33 of your 2018 Form 5329.
26 Enter the excess contributions from line 32 of your 2018 Form 5329. See instructions. If zero, go to line 31
27 If the contributions to your Coverdell ESAs for 2019 were less than the maximum allowable contribution, see instructions. Otherwise, enter -0-
282019 distributions from your Coverdell ESAs (see instructions)

| 27 |  |
| :---: | :---: |
| 28 |  |

29 Add lines 27 and 28

| 26 |  |
| :---: | :---: |
|  |  |
| 29 |  |
|  |  |
| 31 |  |
| 32 | $*$ |
|  |  |
| 33 | $*$ |

Part VI Additional Tax on Excess Contributions to Archer MSAs. Complete this part if you or your employer contributed more to your Archer MSAs for 2019 than is allowable or you had an amount on line 41 of your 2018 Form 5329.
34 Enter the excess contributions from line 40 of your 2018 Form 5329. See instructions. If zero, go to line 39 34
35 If the contributions to your Archer MSAs for 2019 are less than the maximum allowable contribution, see instructions. Otherwise, enter -0-
362019 distributions from your Archer MSAs from Form 8853, line 8
Add lines 35 and 36
37
38 Prior year excess contributions. Subtract line 37 from line 34. If zero or less, enter $-0-$.
39 Excess contributions for 2019 (see instructions)
40 Total excess contributions. Add lines 38 and 39
41 Additional tax. Enter $6 \%(0.06)$ of the smaller of line 40 or the value of your Archer MSAs on December 31, 2019 (including 2019 contributions made in 2020). Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6 , or Form 1040-NR, line 57 . . . . . . . . . . . . . . . 41 5,733
Part VII Additional Tax on Excess Contributions to Health Savings Accounts (HSAs). Complete this part if you, someone on your behalf, or your employer contributed more to your HSAs for 2019 than is allowable or you had an amount on line 49 of your 2018 Form 5329.
42 Enter the excess contributions from line 48 of your 2018 Form 5329. If zero, go to line 47

| 42 |  |
| :---: | :---: |
|  |  |
| $\mathbf{4 5}$ |  |
| 46 |  |
| 47 |  |
| 48 | 406,688 |
| 49 | 314,315 |

43 If the contributions to your HSAs for 2019 are less than the maximum allowable contribution, see instructions. Otherwise, enter -0-
442019 distributions from your HSAs from Form 8889, line 16
45 Add lines 43 and 44


46 Prior year excess contributions. Subtract line 45 from line 42. If zero or less, enter -0- .
47 Excess contributions for 2019 (see instructions)
48 Total excess contributions. Add lines 46 and 47
49 Additional tax. Enter 6\% (0.06) of the smaller of line 48 or the value of your HSAs on December 31, 2019 (including 2019 contributions made in 2020). Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57

| 34 |  |
| :---: | :---: |
|  |  |
| 37 |  |
| 38 |  |
| 39 |  |
| 40 | 8,669 |
|  |  |
| $\mathbf{4 1}$ | 5,733 |

## Part VIII

Additional Tax on Excess Contributions to an ABLE Account. Complete this part if contributions to your ABLE account for 2019 were more than is allowable.
50 Excess contributions for 2019 (see instructions)
51 Additional tax. Enter $6 \%(0.06)$ of the smaller of line 50 or the value of your ABLE account on December 31, 2019. Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57

| 50 | $*$ |
| :---: | :---: |
| 51 | $*$ |

Part IX Additional Tax on Excess Accumulation in Qualified Retirement Plans (Including IRAs). Complete this part if you did not receive the minimum required distribution from your qualified retirement plan.

| $\mathbf{5 2}$ | Minimum required distribution for 2019 (see instructions) | . | . | . | . | . | . | . | . | . | . | . | . | . | . | . | $\mathbf{5 2}$ |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| $\mathbf{5 3}$ | Amount actually distributed to you in 2019 | . | . | . | . | . | . | . | . | . | . | . | . | . | . | . | . | . | . |


| Sign Here Only if You Are Filing This Form by Itself and Not With Your Tax Return |  | Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. <br> Your signature |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Paid Preparer Use Only | Print/Type preparer's name |  | Preparer's signature | Check $\square$ if self-employed | PTIN |
|  | Firm's name |  |  | Firm's EIN - |  |
|  | Firm's address - |  |  | Phone no. |  |
|  |  |  |  |  | Form 5329 (2019) |

Additional Tax on Excess Contributions to Coverdell ESAs. Complete this part if the contributions to your Coverdell ESAs for 2019 were more than is allowable or you had an amount on line 33 of your 2018 Form 5329.
26 Enter the excess contributions from line 32 of your 2018 Form 5329. See instructions. If zero, go to line $31 / 26$
27 If the contributions to your Coverdell ESAs for 2019 were less than the maximum allowable contribution, see instructions. Otherwise, enter -0-
282019 distributions from your Coverdell ESAs (see instructions)
29 Add lines 27 and 28
30 Prior year excess contributions. Subtract line 29 from line 26. If zero or less, enter $-0-$
31 Excess contributions for 2019 (see instructions)
32 Total excess contributions. Add lines 30 and 31
33 Additional tax. Enter 6\% (0.06) of the smaller of line 32 or the value of your Coverdell ESAs on December 31, 2019 (including 2019 contributions made in 2020). Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57

| 26 |  |
| :---: | :---: |
|  |  |
| 29 |  |
|  |  |
| 31 |  |
| 32 | $*$ |
|  |  |
| 33 | $*$ |

Part VI Additional Tax on Excess Contributions to Archer MSAs. Complete this part if you or your employer contributed more to your Archer MSAs for 2019 than is allowable or you had an amount on line 41 of your 2018 Form 5329.
34 Enter the excess contributions from line 40 of your 2018 Form 5329. See instructions. If zero, go to line 39
35 If the contributions to your Archer MSAs for 2019 are less than the maximum allowable contribution, see instructions. Otherwise, enter -0-
362019 distributions from your Archer MSAs from Form 8853, line 8


37 Add lines 35 and 36

| 34 |  |
| :---: | :---: |
|  |  |
|  |  |
| 37 |  |
| 38 |  |
| 39 |  |
| 40 | 23,690 |
|  |  |
| 41 | 705 |

Part VII Additional Tax on Excess Contributions to Health Savings Accounts (HSAs). Complete this part if you, someone on your behalf, or your employer contributed more to your HSAs for 2019 than is allowable or you had an amount on line 49 of your 2018 Form 5329.
42 Enter the excess contributions from line 48 of your 2018 Form 5329. If zero, go to line 47
43 If the contributions to your HSAs for 2019 are less than the maximum allowable contribution, see instructions. Otherwise, enter -0-
442019 distributions from your HSAs from Form 8889, line 16
45 Add lines 43 and 44
46 Prior year excess contributions. Subtract line 45 from line 42. If zero or less, enter -0 -
47 Excess contributions for 2019 (see instructions)
48 Total excess contributions. Add lines 46 and 47
49 Additional tax. Enter 6\% (0.06) of the smaller of line 48 or the value of your HSAs on December 31, 2019 (including 2019 contributions made in 2020). Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57

| 42 |  |
| :---: | :---: |
|  |  |
| 45 |  |
| 46 |  |
| 47 |  |
| 48 | 884,342 |
| 49 | 32,050 |

Part VIII Additional Tax on Excess Contributions to an ABLE Account. Complete this part if contributions to your ABLE account for 2019 were more than is allowable.
50 Excess contributions for 2019 (see instructions)
51 Additional tax. Enter $6 \%$ (0.06) of the smaller of line 50 or the value of your ABLE account on December 31, 2019. Include this amount on Schedule 2 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 57

| 50 | $*$ |
| :---: | :---: |
| 51 | $*$ |

Part IX Additional Tax on Excess Accumulation in Qualified Retirement Plans (Including IRAs). Complete this part if you did not receive the minimum required distribution from your qualified retirement plan.

| $\mathbf{5 2}$ | Minimum required distribution for 2019 (see instructions) | . | . | . | . | . | . | . | . | . | . | . | . | . | . | . | $\mathbf{5 2}$ |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| $\mathbf{5 3}$ | Amount actually distributed to you in 2019 | . | . | . | . | . | . | . | . | . | . | . | . | . | . | . | . | . | . | . |


| Sign Here Only if You Are Filing This Form by Itself and Not With Your Tax Return |  | Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Paid <br> Preparer <br> Use Only | Print/Type pr | arer's name | Preparer's signature | Check $\square$ if self-employed | PTIN |
|  | Firm's name | - |  | Firm's EIN |  |
|  | Firm's addres | - |  | Phone no. |  |
|  |  |  |  |  |  |

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



## 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 | Selling price of home, insurance proceeds, or gross condemnation award | 9 | 14,618 |
| :---: | :---: | :---: | :---: |
| 10 | Selling expenses (including commissions, advertising and legal fees, and seller-paid loan charges) or expenses in getting the condemnation award . | 10 | 8,960 |
| 11 | Subtract line 10 from line 9. This is the amount realized on the sale of the home | 11 | 14,618 |
| 12 | Adjusted basis of home sold (see instructions) | 12 | 13,614 |
| 13 | Enter the first-time homebuyer credit claimed on Form 5405 minus the amount of the credit you repaid with your tax returns for the years 2010 through 2018 | 13 | 13,616 |
| 14 | Subtract line 13 from line 12. This is the adjusted basis for purposes of repaying the credit | 14 | 14,618 |
| 15 | Subtract line 14 from line 11 | 15 | 15,622 |
|  | - If line 15 is more than $-0-$, you have a gain. Check the box on line 3 a and complete Part II. However, check the box on line $3 f$ (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 2017. |  |  |
|  | - 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 3 g instead. You don't have to repay the credit. |  |  |

(Rev. November 2019)
Department of the Treasury
Internal Revenue Service
Name shown on return

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.

Attachment
Sequence No. 58

## Part I 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).
2 If you meet the following conditions, check here
I (or my spouse if married) am, or was, a member of the uniformed services or Foreign Service, or an employee of the intelligence community. I sold the home, or it ceased to be my main home, in connection with Government orders for qualified official extended duty service. No repayment of the credit is required (see instructions). Stop here.
3 Check the box below that applies to you. See the instructions for the definition of "related person."
a $\square$ 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
$\square$ 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.
c
$\square$ 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.
d
$\square$ 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 below.
e $\square$ 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.
f $\square$ My home was destroyed, condemned, or sold under threat of condemnation and I had a gain (see instructions). $g$My home was destroyed, condemned, or sold under threat of condemnation and I didn't have a gain (see instructions).
hThe taxpayer who claimed the credit died in 2019. No repayment of the credit is required of the deceased taxpayer. If you are filing a joint return for 2019 with the deceased taxpayer, see instructions. Otherwise, stop here.

## 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 $3 f$ or 3 g
5 Enter the amount of the credit you repaid with your tax returns for the years 2010 through 2018
6 Subtract line 5 from line 4. If you checked the box on line $3 f$ or 3 g , see instructions. If you checked the box on line 3a, go to line 7. Otherwise, skip line 7 and go to line 8
7 Enter the gain on the disposition of your main home (from line 15 below)
8 Amount of the credit to be repaid. See instructions

|  |  |
| :---: | :---: |
| $\mathbf{4}$ | 366,952 |
| $\mathbf{5}$ | 221,749 |
| $\mathbf{6}$ | 145,203 |
| $\mathbf{7}$ | 574,055 |
| $\mathbf{8}$ | 58,796 |
|  |  |

## 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 | Selling price of home, insurance proceeds, or gross condemnation award | 9 | 3,217,719 |
| :---: | :---: | :---: | :---: |
| 10 | Selling expenses (including commissions, advertising and legal fees, and seller-paid loan charges) or expenses in getting the condemnation award . | 10 | 326,615 |
| 11 | Subtract line 10 from line 9. This is the amount realized on the sale of the home | 11 | 2,891,105 |
| 12 | Adjusted basis of home sold (see instructions) | 12 | 2,397,232 |
| 13 | Enter the first-time homebuyer credit claimed on Form 5405 minus the amount of the credit you repaid with your tax returns for the years 2010 through 2018. | 13 | 40,213 |
| 14 | Subtract line 13 from line 12. This is the adjusted basis for purposes of repaying the credit | 14 | 2,357,019 |
| 15 |  | 15 | 534,085 |
|  | - If line 15 is more than $-0-$, you have a gain. Check the box on line 3 a and complete Part II. However, check the box on line $3 f$ (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 2017. |  |  |
|  | - If line 15 is -0 - or less, check the box on line 3 b . However, if your home was destroyed or you sold the home through condemnation or under threat of condemnation, check the box on line 3 g instead. You don't have to repay the credit. |  |  |
|  | structions. Cat. No. 11880 | Form 5405 (Rev. 11-2019) |  |


|  | Residential Energy Credits <br> Go to www.irs.gov/Form5695 for instructions and the latest information. <br> Attach to Form 1040, 1040-SR, or 1040-NR. |  |  | OMB No. 1545-0074 |
| :---: | :---: | :---: | :---: | :---: |
| Department of the Treasury Internal Revenue Service |  |  |  |  |
| Name(s) shown on return | Total Forms Filed = | 2,079,940 | Your s | cial 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 2018.


| - | Residential Energy Credits <br> Go to www.irs.gov/Form5695 for instructions and the latest information. <br> Attach to Form 1040, 1040-SR, or 1040-NR. |  |  | OMB No. 1545-0074 |
| :---: | :---: | :---: | :---: | :---: |
| Form <br> Department of the Treasury Internal Revenue Service |  |  |  |  |
| Name(s) shown on return | Total Forms Filed $=$ 2,079,940 |  | 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 2018.


## Part 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)
Caution: If you checked the "No" box, you cannot claim the nonbusiness energy property credit. Do not complete Part II.
b Print the complete address of the main home where you made the qualifying improvements. Caution: You can only have one main home at a time.
Number and street Unit No

## City, State, and ZIP code

c Were any of these improvements related to the construction of this main home?
Caution: If you checked the "Yes" box, you can only claim the 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)
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).
a Insulation material or system specifically and primarily designed to reduce heat loss or gain of your home that meets the prescriptive criteria established by the 2009 IECC
b Exterior doors that meet or exceed the version 6.0 Energy Star program requirements
c Metal or asphalt roof that meets or exceeds the Energy Star program requirements and has appropriate pigmented coatings or cooling granules which are specifically and primarily designed to reduce the heat gain of your home
d Exterior windows and skylights that meet or exceed the version 6.0 Energy Star program requirements

|  |  |
| :---: | :---: |
| 19 d | 400,395 |
| 19 e | $\$ 2,000$ |
|  |  |
| 19 f | 73,859 |
| 19 g | $1,535,013$ |


| 17c | $\square$ Yes $\square$ No |
| :---: | :---: |
|  |  |
| 18 | 153,104 |
|  |  |
| $19 a$ | 332,822 |
| $19 b$ | 289,803 |
|  |  |
| 19 c | 164,462 |

e Maximum amount of cost on which the credit can be figured
f If you claimed window expenses on your Form 5695 prior to 2019, enter the amount from the Window Expense Worksheet (see instructions); otherwise enter -0-
g Subtract line 19 f from line 19e. If zero or less, enter -0-
h Enter the smaller of line 19d or line 19g
391,238
20 Add lines 19a, 19b, 19c, and 19h
840,541
21 Multiply line 20 by 10\% (0.10)
840,541
22 Residential energy property costs (must be placed in service by you; include labor costs for onsite preparation, assembly, and original installation) (see instructions).
a Energy-efficient building property. Do not enter more than \$300
273,545
b Qualified natural gas, propane, or oil furnace or hot water boiler. Do not enter more than \$150
c Advanced main air circulating fan used in a natural gas, propane, or oil furnace. Do not enter more than \$50

348,020

23 Add lines 22a through 22c
24 Add lines 21 and 23
25 Maximum credit amount. (If you jointly occupied the home, see instructions).
26 Enter the amount, if any, from line 18
27 Subtract line 26 from line 25. If zero or less, stop; you cannot take the nonbusiness energy property credit
28 Enter the smaller of line 24 or line 27

| 28 | $1,250,682$ |
| :--- | :--- |
| 29 |  |

30 Nonbusiness energy property credit. Enter the smaller of line 28 or line 29. Also include this amount on Schedule 3 (Form 1040 or 1040-SR), line 5; or Form 1040-NR, line 50

1,241,227

## Part 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)
Caution: If you checked the "No" box, you cannot claim the nonbusiness energy property credit. Do not complete Part II.
b Print the complete address of the main home where you made the qualifying improvements. Caution: You can only have one main home at a time.
Number and street
$\overline{\text { City, State, and ZIP code }}$
c Were any of these improvements related to the construction of this main home?
Caution: If you checked the "Yes" box, you can only claim the 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) .
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).
a Insulation material or system specifically and primarily designed to reduce heat loss or gain of your home that meets the prescriptive criteria established by the 2009 IECC
b Exterior doors that meet or exceed the version 6.0 Energy Star program requirements
c Metal or asphalt roof that meets or exceeds the Energy Star program requirements and has appropriate pigmented coatings or cooling granules which are specifically and primarily designed to reduce the heat gain of your home
d Exterior windows and skylights that meet or exceed the version 6.0 Energy Star program requirements

|  |  |
| :---: | ---: |
| 19 d | $2,442,170$ |

e Maximum amount of cost on which the credit can be figured .
f If you claimed window expenses on your Form 5695 prior to 2019, enter the amount from the Window Expense Worksheet (see instructions); otherwise enter -0-

| 19 e | $\$ 2,000$ |
| :---: | :---: |
|  |  |
| 19 f | 488,818 |
| 19 g | $3,062,478$ |

g Subtract line 19 f from line 19e. If zero or less, enter -0-

| 19 g | $3,062,478$ |
| :--- | :--- |

h Enter the smaller of line 19d or line 19 g
645,376
20 Add lines 19a, 19b, 19c, and 19h
3,519,126
21 Multiply line 20 by $10 \%$ (0.10)
351,939
22 Residential energy property costs (must be placed in service by you; include labor costs for onsite preparation, assembly, and original installation) (see instructions).
a Energy-efficient building property. Do not enter more than \$300

| 22 a | 80,701 |
| :---: | :---: |
| 22b | 51,677 |
| 22 c | 4,894 |
| 23 | 137,272 |
| 24 | 489,211 |
| 25 | $\$ 500$ |
| 20 |  |

26 Enter the amount, if any, from line 18.
27 Subtract line 26 from line 25. If zero or less, stop; you cannot take the nonbusiness energy property credit
26
b Qualified natural gas, propane, or oil furnace or hot water boiler. Do not enter more than \$150.
c Advanced main air circulating fan used in a natural gas, propane, or oil furnace. Do not enter more than \$50
23 Add lines 22a through 22c
137,272
24 Add lines 21 and 23
$\$ 500$

28 Enter the smaller of line 24 or line 27

| 27 | 675,507 |
| :---: | :---: |
| 28 | 337,000 |
| 29 |  |
|  |  |

30 Nonbusiness energy property credit. Enter the smaller of line 28 or line 29. Also include this amount on Schedule 3 (Form 1040 or 1040-SR), line 5; or Form 1040-NR, line 50

331,157

Form
5884
(Rev. December 2016) Department of the Treasury Internal Revenue Service

## Work Opportunity Credit

- Attach to your tax return.

Information about Form 5884 and its separate instructions is at www.irs.gov/form5884.

Total Forms Filed $=\mathbf{6 , 5 8 2}$
1 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 you at least 120 hours but fewer than 400 hours . \$ $\qquad$ $\times 25 \%(0.25)$
b Qualified first-year wages of employees who worked for you at least 400 hours \$ $\qquad$ $\times 40 \%(0.40)$
c Qualified second-year wages of employees certified as long-term family assistance recipients . . . . . . \$ $\qquad$ $\times 50 \%(0.50)$

2 Add lines 1a, 1b, and 1c. See instructions for the adjustment you must make to salaries and wages

|  |  |  |
| :---: | :---: | :---: |
|  |  |  |
| $\mathbf{1 a}$ | 620 |  |
|  |  |  |
| $\mathbf{1 b}$ | 959 |  |
|  |  |  |
| $\mathbf{1 c}$ | 1,060 |  |
|  |  |  |
| $\mathbf{2}$ | 2,021 |  |
| $\mathbf{3}$ | 4,728 |  |
|  |  |  |
| $\mathbf{4}$ | 6,582 |  |
| $\mathbf{5}$ |  |  |
| $\mathbf{6}$ |  |  |

Form
5884
(Rev. December 2016) Department of the Treasury
Internal Revenue Service
Name(s) shown on return

1 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 you at least 120 hours but fewer than 400 hours . \$

## Work Opportunity Credit

- Attach to your tax return.

Information about Form 5884 and its separate instructions is at www.irs.gov/form5884.

## Total Forms Filed $=6,582$

b Qualified first-year wages of employees who worked for you at least 400 hours . . . . . . . . . . \$

$$
\$
$$

$$
\times 40 \%(0.40)
$$

c Qualified second-year wages of employees certified as long-term family assistance recipients . . . . . . \$ $\qquad$ $\times 50 \%(0.50)$

2 Add lines 1a, 1b, and 1c. See instructions for the adjustment you must make to salaries and wages

3 Work opportunity credit from partnerships, S corporations, cooperatives, estates, and trusts (see instructions)

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 report this amount on Form 3800, Part III, line 4b

5 Amount allocated to patrons of the cooperative or beneficiaries of the estate or trust (see instructions).

6 Cooperatives, estates, and trusts, subtract line 5 from line 4. Report this amount on Form 3800, Part III, line 4b

| 1a | 4,339 |  |
| :---: | :---: | :---: |
| 1b | 12,153 |  |
| 1 c | 3,220 |  |
| 2 | 19,712 |  |
| 3 | 44,387 |  |
| 4 | 64,099 |  |
| 5 |  |  |
| 6 |  |  |



## Part II Alternative Minimum Tax (AMT)

5 Exemption. (If you were under age 24 at the end of 2019, see instructions.)

| IF your filing status is | AND line 4 is not over. | THEN enter on line 5 |
| :---: | :---: | :---: |
| Single or head of household. | \$ 510,300 | \$ 71,700 |
| Married filing jointly or qualifying widow(er) | 1,020,600 | 111,700 |
|  | 510,300 | 55,8 |

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 6; 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 or 1040-SR) (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 $\$ 194,800$ or less ( $\$ 97,400$ or less if married filing separately), multiply line 6 by $26 \%$ ( 0.26 ). Otherwise, multiply line 6 by $28 \% ~(0.28)$ and subtract $\$ 3,896$ ( $\$ 1,948$ 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 12a (minus any tax from Form 4972), and Schedule 2 (Form 1040 or 1040-SR), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040 or 1040-SR), line 1. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 12a, 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 or 1040-SR), line 1

|  |  |
| :--- | :--- |
| $\mathbf{5}$ | $5,633,907$ |
|  |  |
| $\mathbf{6}$ | $2,980,387$ |
|  |  |
| $\mathbf{7}$ | $2,924,722$ |
|  |  |
| $\mathbf{8}$ | $1,360,889$ |
| $\mathbf{9}$ | $2,867,678$ |
|  |  |
| $\mathbf{1 0}$ | $4,993,416$ |
| $\mathbf{1 1}$ | 170,478 |
| Form $6251(2019)$ |  |

[^10]
## Alternative Minimum Tax—Individuals

## Part I Alternative Minimum Taxable Income (See instructions for how to complete each line.)

1 Enter the amount from Form 1040 or 1040-SR, line 11b, if more than zero. If Form 1040 or 1040-SR, line 11b, is zero, subtract lines 9 and 10 of Form 1040 or $1040-$ SR from line 8b 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 or 1040-SR), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040 or 1040-SR, line 9.
b Tax refund from Schedule 1 (Form 1040 or 1040-SR), line 1 or line 8.
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 or 1040-SR), line 8. Enter as a positive amount .
f Alternative tax net operating loss deduction

| 1 | 1,542,233,551 |
| :---: | :---: |
| 2a | 95,994,867 |
| 2b | 971,591 |
| 2c | 850,714 |
| 2d | 222,105 |
| 2 e | 86,795,454 |
| $2 f$ | ( 18,210,144 |
| 2 g | 987,373 |
| 2h | 269,874 |
| 2i | 2,780,258 |
| 2j | 448,041 |
| 2k | -2,647,095 |
| 21 | -1,099,372 |
| 2m | 876,422 |
| 2n | 809,962 |
| 20 | 989,623 |
| 2p | 151,379 |
| 2q | 100,988 |
| 2 r | -164,705 |
| 2s | ( * |
| 2t | 451,282 |
| 3 | -848,006 |
| 4 | 1,710,640,262 |

g Interest from specified private activity bonds exempt from the regular tax
h Qualified small business stock, see instructions
i Exercise of incentive stock options (excess of AMT income over regular tax income).
j Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)
k Disposition of property (difference between AMT and regular tax gain or loss)
I Depreciation on assets placed in service after 1986 (difference between regular tax and AMT).
m Passive activities (difference between AMT and regular tax income or loss)
n Loss limitations (difference between AMT and regular tax income or loss)
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).
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
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 $\$ 733,700$, see instructions.)

## Part II Alternative Minimum Tax (AMT)

5 Exemption. (If you were under age 24 at the end of 2019, see instructions.)

| IF your filing status is | AND line 4 is not over... | THEN enter on line 5. |
| :---: | :---: | :---: |
| Single or head of household | \$ 510,300 | \$ 71,700 |
| Married filing jointly or qualifying widow(er) | 1,020,600 | 111,700 |
| Married filing separately | 510,300 | 55,850 |

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 6; 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 or 1040-SR) (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 $\$ 194,800$ or less ( $\$ 97,400$ or less if married filing separately), multiply line 6 by $26 \%$ ( 0.26 ). Otherwise, multiply line 6 by $28 \%$ ( 0.28 ) and subtract $\$ 3,896$ ( $\$ 1,948$ 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 $1040-S R$, line 12a (minus any tax from Form 4972), and Schedule 2 (Form 1040 or $1040-\mathrm{SR}$ ), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040 or 1040-SR), line 1. If you used Schedule $J$ to figure your tax on Form 1040 or 1040-SR, line 12a, 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 or 1040-SR), line 1

|  |  |
| :---: | :---: |
| $\mathbf{5}$ | $523,852,579$ |
| $\mathbf{6}$ | $1,350,711,153$ |
|  |  |
| $\mathbf{7}$ | $324,818,168$ |
|  |  |
| $\mathbf{8}$ | $19,475,179$ |
| $\mathbf{9}$ | $305,486,980$ |
|  |  |
| $\mathbf{1 0}$ | $369,341,041$ |
| $\mathbf{1 1}$ | $2,792,555$ |

Part III Tax Computation Using Maximum Capital Gains Rates
Complete Part III only if you are required to do so by line 7 or by the Foreign Earned Income Tax Worksheet in the instructions.
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

13 Enter the amount from line 6 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 or 1040-SR), whichever applies (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555, see instructions for the amount to enter
14 Enter the amount from Schedule D (Form 1040 or 1040-SR), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555, see instructions for the amount to enter

15 If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see instructions for the amount to enter
16 Enter the smaller of line 12 or line 15
17 Subtract line 16 from line 12
18 If line 17 is $\$ 194,800$ or less ( $\$ 97,400$ or less if married filing separately), multiply line 17 by $26 \%$ ( 0.26 ). Otherwise, multiply line 17 by $28 \%$ ( 0.28 ) and subtract $\$ 3,896$ ( $\$ 1,948$ if married filing separately) from the result
Enter:

- $\$ 78,750$ if married filing jointly or qualifying widow(er),
- $\$ 39,375$ if single or married filing separately, or
- \$52,750 if head of household.

20 Enter the amount from line 7 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 11b; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter
21 Subtract line 20 from line 19. If zero or less, enter -0-
22 Enter the smaller of line 12 or line 13
23 Enter the smaller of line 21 or line 22. This amount is taxed at $0 \%$
24 Subtract line 23 from line 22
25 Enter:

- \$434,550 if single
- $\$ 244,425$ if married filing separately
- $\$ 488,850$ if married filing jointly or qualifying widow(er)
- \$461,700 if head of household

26 Enter the amount from line 21
27 Enter the amount from line 7 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 11b; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter
28 Add line 26 and line 27
29 Subtract line 28 from line 25 . If zero or less, enter -0-
30 Enter the smaller of line 24 or line 29
31 Multiply line 30 by $15 \%$ ( 0.15 ).
32 Add lines 23 and 30 .
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
34 Multiply line 33 by 20\% (0.20)


If line 14 is zero or blank, skip lines 35 through 37 and go to line 38 . Otherwise, go to line 35 .
36 Subtract line 35 from line 12
37 Multiply line 36 by 25\% (0.25)
38 Add lines 18, 31, 34, and 37 .
39 If line 12 is $\$ 194,800$ or less ( $\$ 97,400$ or less if married filing separately), multiply line 12 by $26 \%$ ( 0.26 ). Otherwise, multiply line 12 by $28 \%(0.28)$ and subtract $\$ 3,896$ ( $\$ 1,948$ if married filing separately) from the result
40 Enter the smaller of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7

| 12 |  |
| :---: | :---: |
| 13 | 2,346,482 |
| 14 | 311,642 |
| 15 | 2,337,207 |
| 16 |  |
| 17 |  |
| 18 | 1,705,865 |
| 19 |  |
| 20 |  |
| 21 |  |
| 22 |  |
| 23 |  |
| 24 |  |
| 25 |  |
| 26 |  |
| 27 |  |
| 28 |  |
| 29 |  |
| 30 |  |
| 31 | 1,574,586 |
| 32 |  |
| 33 |  |
| 34 | 505,638 |
| 35 |  |
| 36 |  |
| 37 | 206,992 |
| 38 |  |
| 39 | 1,990,483 |
| 40 |  |

## Part III Tax Computation Using Maximum Capital Gains Rates

Complete Part III only if you are required to do so by line 7 or by the Foreign Earned Income Tax Worksheet in the instructions.
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

13 Enter the amount from line 6 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 or 1040-SR), whichever applies (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555, see instructions for the amount to enter
14 Enter the amount from Schedule D (Form 1040 or 1040-SR), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555, see instructions for the amount to enter

15 If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see instructions for the amount to enter
16 Enter the smaller of line 12 or line 15
17 Subtract line 16 from line 12
18 If line 17 is $\$ 194,800$ or less ( $\$ 97,400$ or less if married filing separately), multiply line 17 by $26 \%$ ( 0.26 ). Otherwise, multiply line 17 by $28 \%$ ( 0.28 ) and subtract $\$ 3,896$ ( $\$ 1,948$ if married filing separately) from the result
Enter:

- $\$ 78,750$ if married filing jointly or qualifying widow(er),
- $\$ 39,375$ if single or married filing separately, or
- \$52,750 if head of household.

20 Enter the amount from line 7 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 11b; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter
21 Subtract line 20 from line 19. If zero or less, enter -0-
22 Enter the smaller of line 12 or line 13
23 Enter the smaller of line 21 or line 22. This amount is taxed at $0 \%$
24 Subtract line 23 from line 22
25 Enter:

- $\$ 434,550$ if single
- $\$ 244,425$ if married filing separately
- $\$ 488,850$ if married filing jointly or qualifying widow(er)
- $\$ 461,700$ if head of household

26 Enter the amount from line 21
27 Enter the amount from line 7 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 11b; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter
28 Add line 26 and line 27
29 Subtract line 28 from line 25 . If zero or less, enter -0-
30 Enter the smaller of line 24 or line 29
31 Multiply line 30 by $15 \%$ ( 0.15 ).
32 Add lines 23 and 30 .
If lines $\mathbf{3 2}$ and 12 are the same, skip lines 33 through 37 and go to line $\mathbf{3 8}$. Otherwise, go to line 33.
33 Subtract line 32 from line 22
34 Multiply line 33 by 20\% (0.20)
If line 14 is zero or blank, skip lines 35 through 37 and go to line 38 . Otherwise, go to line 35 .
Add lines 17, 32, and 33
Subtract line 35 from line 12
Multiply line 36 by $25 \%$ ( 0.25 )
2,928,990

39 If line 12 is $\$ 194,800$ or less ( $\$ 97,400$ or less if married filing separately), multiply line 12 by $26 \%$ (0.26). Otherwise, multiply line 12 by $28 \%(0.28)$ and subtract $\$ 3,896$ ( $\$ 1,948$ if married filing separately) from the result
40 Enter the smaller of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7

| 12 |  |
| :---: | :---: |
| 13 | 579,700,011 |
| 14 | 17,235,861 |
| 15 | 596,688,207 |
| 16 |  |
| 17 |  |
| 18 | 185,793,137 |
| 19 |  |
| 20 |  |
| 21 |  |
| 22 |  |
| 23 |  |
| 24 |  |
| 25 |  |
| 26 |  |
| 27 |  |
| 28 |  |
| 29 |  |
| 30 |  |
| 31 | 12,326,340 |
| 32 |  |
| 33 |  |
| 34 | 88,029,351 |
| 35 |  |
| 36 |  |
| 37 | 2,928,990 |
| 38 |  |
| 39 | 336,038,534 |
| 40 |  |

## 1 Description of property

2a Date acquired (mm/dd/yyyy) $\qquad$ b Date sold (mm/dd/yyyy)
3 Was the property sold to a related party (see instructions) after May 14, 1980? If "No," skip line 4.
. . . $\square$ Yes $\square \mathrm{No}$
If "No,"
. . . $\square \mathrm{Yes} \quad \square \mathrm{No}$

4 Was the property you sold to a related party a marketable security? If "Yes," complete Part III. If "No," complete Part III for the year of sale and the 2 years after the year of sale

## Part I Gross Profit and Contract Price. Complete this part for all years of the installment agreement.

| 5 | Selling price including mortgages and other debts. Don't include interest, whether stated or unstated |  |  | 5 | 402,019 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 6 | Mortgages, debts, and other liabilities the buyer assumed or took the property subject to (see instructions) | 6 |  |  |  |
| 7 | Subtract line 6 from line 5 | 7 |  |  |  |
| 8 | Cost or other basis of property sold | 8 |  |  |  |
| 9 | Depreciation allowed or allowable | 9 |  |  |  |
| 10 | Adjusted basis. Subtract line 9 from line 8 | 10 |  |  |  |
| 1 | Commissions and other expenses of sale | 11 |  |  |  |
| 2 | Income recapture from Form 4797, Part III (see instructions) | 12 |  |  |  |
| 3 | Add lines 10, 11, and 12 |  |  | 13 | 338,301 |
| 4 | Subtract line 13 from line 5. If zero or less, don't complete the rest of this form | e in | instructions) | 14 | 400,483 |
| 5 | If the property described on line 1 above was your main home, enter the am gain (see instructions). Otherwise, enter -0- |  | of your excluded | 15 | 2,913 |
| 16 | Gross profit. Subtract line 15 from line 14 |  |  | 16 | 398,396 |
| 7 | Subtract line 13 from line 6. If zero or less, enter -0- |  |  | 17 | 5,899 |
| 18 | Contract price. Add line 7 and line 17 |  |  | 18 | 399,225 |

18 Contract price. Add line 7 and line 17
399,225
Part II Installment Sale Income. Complete this part for all years of the installment agreement.
19 Gross profit percentage (expressed as a decimal amount). Divide line 16 by line 18. (For years after the year of sale, see instructions)
20 If this is the year of sale, enter the amount from line 17. Otherwise, enter -0-
21 Payments received during year (see instructions). Don't include interest, whether stated or unstated .
22 Add lines 20 and 21

|  |  |
| :---: | :---: |
| $\mathbf{1 9}$ |  |
| 20 |  |
| 21 | 428,484 |
| 22 | 431,467 |
|  |  |
|  |  |
| 24 | 426,973 |
| 25 | 1,266 |
| 26 | 426,961 |

25 Enter the part of line 24 that is ordinary income under the recapture rules (see instructions) . . . . 25 2 2,266
26 Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797 (see instructions) . . . $26.326,426,961$
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

29 If the answer to question 28 is "Yes," complete lines 30 through 37 below unless one of the following conditions is met. Check the box that applies.The second disposition was more than 2 years after the first disposition (other than dispositions of marketable securities). If this box is checked, enter the date of disposition ( $\mathrm{mm} / \mathrm{dd} / \mathrm{yyyy}$ ) .
$\square$ The first disposition was a sale or exchange of stock to the issuing corporation.The second disposition was an involuntary conversion and the threat of conversion occurred after the first disposition.
$\square$ The second disposition occurred after the death of the original seller or buyer.
$\square$ 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).
Selling price of property sold by related party (see instructions)
31
32
33 Total payments received by the end of your 2019 tax year (see instructions)
34 Subtract line 33 from line 32. If zero or less, enter -0-
35 Multiply line 34 by the gross profit percentage on line 19 for year of first sale
36
37

Enter the part of line 35 that is ordinary income under the recapture rules (see instructions).
Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797 (see instructions)

| 30 | $*$ |
| :---: | :---: |
| 31 | $*$ |
| 32 | $*$ |
| 33 | $*$ |
| 34 | ${ }^{*}$ |
| 35 | $*$ |
| 36 | 0 |
| 37 | ${ }^{*}$ |
| Form $\mathbf{6 2 5 2}(2019)$ |  |

[^11]

28 Did the related party resell or dispose of the property ("second disposition") during this tax year? Yes No
29 If the answer to question 28 is "Yes," complete lines 30 through 37 below unless one of the following conditions is met. Check the box that applies.
a $\square$ The second disposition was more than 2 years after the first disposition (other than dispositions of marketable securities). If this box is checked, enter the date of disposition (mm/dd/yyyy)
The first disposition was a sale or exchange of stock to the issuing corporation.
The second disposition was an involuntary conversion and the threat of conversion occurred after the first disposition.
The second disposition occurred after the death of the original seller or buyer.
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)
31 Enter contract price from line 18 for year of first sale
32 Enter the smaller of line 30 or line 31
33 Total payments received by the end of your 2019 tax year (see instructions)
34 Subtract line 33 from line 32. If zero or less, enter -0-
35 Multiply line 34 by the gross profit percentage on line 19 for year of first sale
36 Enter the part of line 35 that is ordinary income under the recapture rules (see instructions)
37 Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797 (see instructions)

| 30 | $*$ |
| :---: | :---: |
| 31 | $*$ |
| 32 | $*$ |
| 33 | $*$ |
| 34 | ${ }^{*}$ |
| 35 | ${ }^{*}$ |
| 36 | 0 |
| 37 | ${ }^{*} 6$ |
| Form $\mathbf{6 2 5 2}(2019)$ |  |

For Paperwork Reduction Act Notice, see page 4.

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


Section B-Alternative Simplified Credit. Skip this section if you are completing Section A.

| 18 | Certain amounts paid or incurred to energy consortia (see the line 1 instructions) . . . . . . . 18 |  |  |  | 0 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 19 | Basic research payments to qualified organizations (see the line 2 instructions) | 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- <br> Add lines 18 and 21 <br> Multiply line 22 by 20\% (0.20) <br> Wages for qualified services (do not include wages used in figuring the work opportunity credit) | $24$ |  | 21 | * |
| 22 |  |  |  | 22 | * |
| 23 |  |  |  | 23 | * |
| 24 |  |  |  |  |  |
| 25 | Cost of supplies <br> Rental or lease costs of computers (see the line 7 instructions) Enter the applicable percentage of contract research expenses. See the line 8 instructions | 25 |  |  |  |
| 26 |  | 26 |  |  |  |
| 27 |  | 27 |  |  |  |
| 28 | Total qualified research expenses. Add lines 24 through 27 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 | 28 |  |  |  |
| 29 |  | 29 |  |  |  |
| 30 | Divide line 29 by 6.0 <br> Subtract line 30 from line 28. If zero or less, enter -0- | 30 |  |  |  |
| 31 |  | 31 |  |  |  |
| 32 | Multiply line 31 by $14 \%$ (0.14). If you skipped lines 30 and 31 , multiply line 28 by $6 \%(0.06)$ Add lines 23 and 32 <br> Are you electing the reduced credit under section 280C? $\quad$ Yes $\square$ No $\square$ <br> If "Yes," multiply line 33 by $79 \%$ ( 0.79 ). If "No," enter the amount from line 33 and see the line 17 instructions for the statement that must be attached. Members of controlled groups or businesses under common control, see instructions for the statement that must be attached |  |  | 32 | 1,442 |
| 33 |  |  |  | 33 | 1,443 |
| 34 |  |  |  | 34 | 1,443 |

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


Section B-Alternative Simplified Credit. Skip this section if you are completing Section A.
18 Certain amounts paid or incurred to energy consortia (see the line 1 instructions) 19 Basic research payments to qualified organizations (see the line 2 instructions)
20 Qualified organization base period amount (see the line 3 instructions).
21 Subtract line 20 from line 19. If zero or less, enter -0-
22 Add lines 18 and 21
23 Multiply line 22 by 20\% (0.20)
24 Wages for qualified services (do not include wages used in figuring the work opportunity credit)
25 Cost of supplies
26 Rental or lease costs of computers (see the line 7 instructions)
27 Enter the applicable percentage of contract research expenses. See the line 8 instructions
28 Total qualified research expenses. Add lines 24 through 27
29 Enter your total qualified research expenses for the prior 3 tax years. If you had no qualified research expenses in any one of those years, skip lines 30 and 31
30 Divide line 29 by 6.0
31 Subtract line 30 from line 28. If zero or less, enter -0-
32 Multiply line 31 by $14 \%$ ( 0.14 ). If you skipped lines 30 and 31 , multiply line 28 by $6 \%(0.06)$.
33 Add lines 23 and 32


## Section 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)
36 Subtract line 35 from line 17 or line 34 (whichever applies). If zero or less, enter -0-

| 35 | $*$ |
| :---: | :---: |
| 36 | 3,369 |
| 37 | 10,071 |
| 38 | 12,725 |
|  |  |
| 39 |  |
| 40 |  |

Section D-Qualified Small Business Payroll Tax Election and Payroll Tax Credit. Skip this section if the payroll tax election does not apply. 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 |

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


## Section 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).
36 Subtract line 35 from line 17 or line 34 (whichever applies). If zero or less, enter $-0-\quad . \quad$. . . .
37 Credit for increasing research activities from partnerships, S corporations, estates, and trusts . . .
38 Add lines 36 and 37

| 35 | $*$ |
| :---: | :---: |
| 36 | 37,951 |
| 37 | 202,529 |
| 38 | 240,480 |

- Estates and trusts, go to line 39.
- Partnerships and S corporations not electing the payroll tax credit, stop here and report this amount on Schedule K.
- Partnerships and S corporations electing the payroll tax credit, complete Section D and report on Schedule $K$ the amount on this line reduced by the amount on line 44.
- Eligible small businesses, stop here and report the credit on Form 3800, Part III, line 4i. See instructions for the definition of eligible small business.
- Filers other than eligible small businesses, stop here and report the credit on Form 3800, Part III, line 1c.

Note: Qualified small business filers, other than partnerships and S corporations, electing the payroll tax credit must complete Form 3800 before completing Section D.
39 Amount allocated to beneficiaries of the estate or trust (see instructions)
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
Section D-Qualified Small Business Payroll Tax Election and Payroll Tax Credit. Skip this section if the payroll tax election does not apply. 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
43 General business credit carryforward from the current year (see instructions). Partnerships and S corporations, skip this line and go to line 44

|  |  |
| :---: | :---: |
| 42 | $*$ |
| 43 | $*$ |

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

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


Part II Gains and Losses From Straddles. Attach a separate statement listing each straddle and its components. Section A-Losses From Straddles

|  | (a) Description of property | (b) Date entered into or acquired | (c) Date closed out or sold | (d) Gross sales price | (e) Cost or other basis plus expense of sale | (f) Loss. <br> If column (e) is more than (d), enter difference. Otherwise, enter -0- | (g) <br> Unrecogniz gain on offsetting position |  | (h) Recognized loss. If column (f) is more than (g), enter difference. <br> Otherwise, enter -0-. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 10 |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| 11a | Enter the short-term portion of losses from line 10, column (h), here and include on line 4 of Schedule D or on Form 8949. See instructions . <br> Enter the long-term portion of losses from line 10, column (h), here and include on line 11 of Schedule D or on Form 8949. See instructions . |  |  |  |  |  |  | 11a | 2,947 ) |
| b |  |  |  |  |  |  |  | 11b | 212 ) |

## Section B-Gains From Straddles

|  | (a) Description of property | (b) Date entered into or acquired | (c) Date closed out or sold | (d) Gross sales price | (e) Cost or other basis plus expense of sale |  | (f) Gain. If column <br> (d) is more than (e), enter difference. <br> Otherwise, enter -0-. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 12 |  |  |  |  |  |  |  |
| 13a | Enter the short-term portion of gains from line 12, column (f), here and include on line 4 of Schedule D or on Form 8949. See instructions |  |  |  |  | 13a | 1,710 |
|  | Enter the long-term portion of gains from line 12, column (f), here and include on line 11 of Schedule D or on Form |  |  |  |  | 13b | 241 |

Part III Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo Entry Only (see instructions)

| (a) Description of property | (e) Unrecognized <br> (b) Date <br> acquired | (c) Fair market value column (c) is <br> on last business day <br> of tax year | (d) Cost or other <br> masis <br> as adjusted <br> difference. Otherwise, <br> enter -0-. |
| :--- | :--- | :--- | :--- |
| 14 |  |  |  |
|  |  |  |  |
| For Paperwork Reduction Act Notice, see instructions. |  |  |  |

## Part I

## Section 1256 Contracts Marked to Market

(a) Identification of account
(b) (Loss)
(c) Gain 1

Part II Gains and Losses From Straddles. Attach a separate statement listing each straddle and its components.

## Section A-Losses From Straddles

|  | (a) Description of property | (b) Date entered into or acquired | (c) Date closed out or sold | (d) Gross sales price | (e) Cost or other basis plus expense of sale | (f) Loss. <br> If column (e) is more than (d), enter difference. Otherwise, enter -0-. | (g) <br> Unrecogniz gain on offsettin positio |  | (h) Recognized loss. <br> If column (f) is more than (g), enter difference. <br> Otherwise, enter -0-. |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 10 |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| 11a <br> b | Enter the short-term portion of losses from line 10, column (h), here and include on line 4 of Schedule D or on Form 8949. See instructions . <br> Enter the long-term portion of losses from line 10, column (h), here and include on line 11 of Schedule D or on Form 8949. See instructions . |  |  |  |  |  |  | 11a | ( 49,225 ) |
|  |  |  |  |  |  |  |  | 11b | $(\quad 95,394$ |

## Section B-Gains From Straddles



Part III Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo Entry Only (see instructions)

| (a) Description of property | (e) Unrecognized <br> gain. If column (c) is <br> more than (d), enter <br> difference. Otherwise, <br> enter -0-. |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
| 14 |  | (b) Date <br> acquired | (c) Fair market value <br> on last business day <br> of tax year | (d) Cost or other <br> basis <br> as adjusted |
|  |  |  |  |  |
| For Paperwork Reduction Act Notice, see instructions. |  |  |  |  |

${ }_{\text {rom }} 8283$
(Rev. December 2014) Department of the Treasury Internal Revenue Service

- Attach to your tax return if you claimed a total deduction of over $\$ 500$ for all contributed property.

Name(s) shown on your income tax return

## Total Forms Filed $=3,931,839$

Note. Figure the amount of your contribution deduction before completing this form. See your tax return instructions.
Section A. Donated Property of $\$ 5,000$ or Less and Publicly Traded Securities-List in this section only items (or groups of similar items) for which you claimed a deduction of $\$ 5,000$ or less. Also list publicly traded securities even if the deduction is more than $\$ 5,000$ (see instructions).
Part I Information on Donated Property-If you need more space, attach a statement.

| 1 | (a) Name and address of the donee 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 of donated property <br> (For a vehicle, enter the year, make, model, and mileage. For securities, enter the company name and the number of shares.) |
| :---: | :---: | :---: | :---: |
| A |  | $\square$ |  |
| B |  |  |  |
| C |  | $\square$ |  |
| D |  |  |  |
| E |  | $\square$ |  |

Note. If the amount you claimed as a deduction for an item is $\$ 500$ or less, you do not have to complete columns (e), (f), and (g).

|  | (d) Date of the <br> contribution | (e) Date acquired <br> by donor (mo., yr.) | (f) How acquired <br> by donor | (g) Donor's cost <br> or adjusted basis |  | (h) Fair market value <br> (see instructions) | (i) Method used to determine <br> the fair market value |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| A |  |  |  | $2,479,045$ |  | $3,843,229$ |  |
| B |  |  |  |  |  |  |  |
| C |  |  |  |  |  |  |  |
| D |  |  |  |  |  |  |  |
| E |  |  |  |  |  |  |  |

Part II Partial Interests and Restricted Use Property-Complete lines 2a through $2 e$ if you gave less than an entire interest in a property listed in Part I. Complete lines 3a through 3c if conditions were placed on a contribution listed in Part I; also attach the required statement (see instructions).
2a Enter the letter from Part I that identifies the property for which you gave less than an entire interest
If Part II applies to more than one property, attach a separate statement.
b Total amount claimed as a deduction for the property listed in Part I: (1) For this tax year
(2) For any prior tax years
c Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization above):
Name of charitable organization (donee)

Address (number, street, and room or suite no.)

City or town, state, and ZIP code
d For tangible property, enter the place where the property is located or kept
e Name of any person, other than the donee organization, having actual possession of the property

3a Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property?
b Did you give to anyone (other than the donee organization or another organization participating with the donee organization in cooperative fundraising) the right to the income from the donated property or to the possession of the property, including the right to vote donated securities, to acquire the property by purchase or otherwise, or to designate the person having such income, possession, or right to acquire?
c Is there a restriction limiting the donated property for a particular use?
(Rev. December 2014) Department of the Treasury Internal Revenue Service
Name(s) shown on your income tax return

- Attach to your tax return if you claimed a total deduction of over $\$ 500$ for all contributed property.

Total Forms Filed = 3,931,839

Attachment
Sequence No.
155
Identifying number

Note. Figure the amount of your contribution deduction before completing this form. See your tax return instructions.
Section A. Donated Property of $\$ 5,000$ or Less and Publicly Traded Securities-List in this section only items (or groups of similar items) for which you claimed a deduction of $\$ 5,000$ or less. Also list publicly traded securities even if the deduction is more than $\$ 5,000$ (see instructions). Information on Donated Property-If you need more space, attach a statement.

| 1 (a) Name and address of the |
| :--- | :--- | :--- | :--- | :--- |
| donee organization |$\quad$| (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 of donated property |
| :---: |
| (For a vehicle, enter the year, make, model, and |
| mileage. For securities, enter the company name and |
| the number of shares.) |

Note. If the amount you claimed as a deduction for an item is $\$ 500$ or less, you do not have to complete columns (e), (f), and (g).

|  | (d) Date of the contribution | (e) Date acquired by donor (mo., yr.) | (f) How acquired by donor | (g) Donor's or adjusted ba | (h) Fair mark (see instruct | (i) Method used to determine the fair market value |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| A |  |  |  | 32,242,318 | 55,818,167 |  |
| B |  |  |  |  |  |  |
| C |  |  |  |  |  |  |
| D |  |  |  |  |  |  |
| E |  |  |  |  |  |  |

## Part II

Partial Interests and Restricted Use Property-Complete lines 2a through 2 e if you gave less than an entire interest in a property listed in Part I. Complete lines 3a through 3c if conditions were placed on a contribution listed in Part I; also attach the required statement (see instructions).

## 2a Enter the letter from Part I that identifies the property for which you gave less than an entire interest <br> If Part II applies to more than one property, attach a separate statement. <br> b Total amount claimed as a deduction for the property listed in Part I: (1) For this tax year <br> (2) For any prior tax years <br> c Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization above): <br> Name of charitable organization (donee)

Address (number, street, and room or suite no.)

City or town, state, and ZIP code
d For tangible property, enter the place where the property is located or kept
e Name of any person, other than the donee organization, having actual possession of the property

3a Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property?
b Did you give to anyone (other than the donee organization or another organization participating with the donee organization in cooperative fundraising) the right to the income from the donated property or to the possession of the property, including the right to vote donated securities, to acquire the property by purchase or otherwise, or to designate the person having such income, possession, or right to acquire?
c Is there a restriction limiting the donated property for a particular use?

Section B. Donated Property Over \$5,000 (Except Publicly Traded Securities) -Complete this section for one item (or one group of similar items) for which you claimed a deduction of more than $\$ 5,000$ per item or group (except contributions of publicly traded securities reported in Section A). Provide a separate form for each property donated unless it is part of a group of similar items. An appraisal is generally required for property listed in Section B. See instructions.
Part I Information on Donated Property-To be completed by the taxpayer and/or the appraiser.
4 Check the box that describes the type of property donated:
a $\square$ Art ${ }^{\star}$ (contribution of \$20,000 or more)
d $\square$ Art $^{\star}$ (contribution of less than $\$ 20,000$ )
b $\square$ Qualified Conservation Contribution e $\square$ Other Real Estate
cEquipment
f $\square$
Securities
$\mathbf{g} \square$
Collectibles**
j $\square$ Other
h $\square$ Intellectual Property
i $\square$ Vehicles
*Art includes paintings, sculptures, watercolors, prints, drawings, ceramics, antiques, decorative arts, textiles, carpets, silver, rare manuscripts, historical memorabilia, and other similar objects.
${ }^{* *}$ Collectibles include coins, stamps, books, gems, jewelry, sports memorabilia, dolls, etc., but not art as defined above.
Note. In certain cases, you must attach a qualified appraisal of the property. See instructions.


Part II Taxpayer (Donor) Statement-List each item included in Part I above that the appraisal identifies as having a value of $\$ 500$ or less. See instructions.
I declare that the following item(s) included in Part I above has to the best of my knowledge and belief an appraised value of not more than $\$ 500$ (per item). Enter identifying letter from Part I and describe the specific item. See instructions. $\qquad$
Signature of taxpayer (donor) Date
Part III Declaration of Appraiser
I declare that I am not the donor, the donee, a party to the transaction in which the donor acquired the property, employed by, or related to any of the foregoing persons, or married to any person who is related to any of the foregoing persons. And, if regularly used by the donor, donee, or party to the transaction, I performed the majority of my appraisals during my tax year for other persons.
Also, I declare that I perform appraisals on a regular basis; and that because of my qualifications as described in the appraisal, I am qualified to make appraisals of the type of property being valued. I certify that the appraisal fees were not based on a percentage of the appraised property value. Furthermore, I understand that a false or fraudulent overstatement of the property value as described in the qualified appraisal or this Form 8283 may subject me to the penalty under section 6701(a) (aiding and abetting the understatement of tax liability). In addition, I understand that I may be subject to a penalty under section 6695A if I know, or reasonably should know, that my appraisal is to be used in connection with a return or claim for refund and a substantial or gross valuation misstatement results from my appraisal. I affirm that I have not been barred from presenting evidence or testimony by the Office of Professional Responsibility.

## Sign

Here Signature Title Date
Business address (including room or suite no.)

Identifying number

City or town, state, and ZIP code

## Part IV Donee Acknowledgment-To be completed by the charitable organization.

This charitable organization acknowledges that it is a qualified organization under section 170(c) and that it received the donated property as described in Section B, Part I, above on the following date

Furthermore, this organization affirms that in the event it sells, exchanges, or otherwise disposes of the property described in Section B, Part I (or any portion thereof) within 3 years after the date of receipt, it will file Form 8282, Donee Information Return, with the IRS and give the donor a copy of that form. This acknowledgment does not represent agreement with the claimed fair market value.
Does the organization intend to use the property for an unrelated use? Name of charitable organization (donee)

Address (number, street, and room or suite no.)

| City or town, state, and ZIP code |  |
| :--- | :--- |
| Title | Date |

Section B. Donated Property Over \$5,000 (Except Publicly Traded Securities) - Complete this section for one item (or one group of similar items) for which you claimed a deduction of more than $\$ 5,000$ per item or group (except contributions of publicly traded securities reported in Section A). Provide a separate form for each property donated unless it is part of a group of similar items. An appraisal is generally required for property listed in Section B. See instructions.
Part I Information on Donated Property-To be completed by the taxpayer and/or the appraiser.
4 Check the box that describes the type of property donated:
a $\square$
Art* (contribution of $\$ 20,000$ or more)
d $\square \operatorname{Art}^{\star}$ (contribution of less than $\$ 20,000$ )
b $\square$ Qualified Conservation Contribution
e $\square$ Other Real Estate
$\mathbf{g} \square$ Collectibles**
j $\square$ other
c Equipment
f $\square$
Securities
h $\square$ Intellectual Property
i $\square$ Vehicles
*Art includes paintings, sculptures, watercolors, prints, drawings, ceramics, antiques, decorative arts, textiles, carpets, silver, rare manuscripts, historical memorabilia, and other similar objects.
${ }^{* *}$ Collectibles include coins, stamps, books, gems, jewelry, sports memorabilia, dolls, etc., but not art as defined above.
Note. In certain cases, you must attach a qualified appraisal of the property. See instructions.

| 5 | (a) Description of donated property (if you need more space, attach a separate statement) |  | (b) If tangible property was donated, give a brief summary of the overall physical condition of the property at the time of the gift |  |  | (c) Appraised fair market value |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| A |  |  |  |  |  | 42,462,580 |
| B |  |  |  |  |  |  |
| C |  |  |  |  |  |  |
| D |  |  |  |  |  |  |
|  | (d) Date acquired | (e) How acquired by donor | (f) Donor's co | (g) For bargain sa |  | tions |
|  | by donor (mo., yr.) |  | adjusted bas |  | (h) Amount claim $\begin{gathered}\text { deduction }\end{gathered}$ | (i) Date of contribution |
| A |  |  | 9,089,745 | 684,884 | 8,539,747 |  |
| B |  |  |  |  |  |  |
| C |  |  |  |  |  |  |
| D |  |  |  |  |  |  |

## Part II Taxpayer (Donor) Statement—List each item included in Part I above that the appraisal identifies as having a value of $\$ 500$ or less. See instructions.

I declare that the following item(s) included in Part I above has to the best of my knowledge and belief an appraised value of not more than $\$ 500$ (per item). Enter identifying letter from Part I and describe the specific item. See instructions.

Signature of taxpayer (donor) Date

## Part III Declaration of Appraiser

I declare that I am not the donor, the donee, a party to the transaction in which the donor acquired the property, employed by, or related to any of the foregoing persons, or married to any person who is related to any of the foregoing persons. And, if regularly used by the donor, donee, or party to the transaction, I performed the majority of my appraisals during my tax year for other persons.
Also, I declare that I perform appraisals on a regular basis; and that because of my qualifications as described in the appraisal, I am qualified to make appraisals of the type of property being valued. I certify that the appraisal fees were not based on a percentage of the appraised property value. Furthermore, I understand that a false or fraudulent overstatement of the property value as described in the qualified appraisal or this Form 8283 may subject me to the penalty under section 6701(a) (aiding and abetting the understatement of tax liability). In addition, I understand that I may be subject to a penalty under section 6695A if I know, or reasonably should know, that my appraisal is to be used in connection with a return or claim for refund and a substantial or gross valuation misstatement results from my appraisal. I affirm that I have not been barred from presenting evidence or testimony by the Office of Professional Responsibility.
Sign
Here $\quad$ Signature $>$ Title Date
Business address (including room or suite no.)

City or town, state, and ZIP code

## Part IV Donee Acknowledgment-To be completed by the charitable organization.

This charitable organization acknowledges that it is a qualified organization under section 170(c) and that it received the donated property as described in Section B, Part I, above on the following date

Furthermore, this organization affirms that in the event it sells, exchanges, or otherwise disposes of the property described in Section B, Part I (or any portion thereof) within 3 years after the date of receipt, it will file Form 8282, Donee Information Return, with the IRS and give the donor a copy of that form. This acknowledgment does not represent agreement with the claimed fair market value.
Does the organization intend to use the property for an unrelated use?

| Employer identification number |
| :--- |
| City or town, state, and ZIP code |
| Title |

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

- Go to www.irs.gov/Form8396 for the latest information.

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


Attachment Sequence No. 138

Name(s) shown on your tax return

| Total Forms Filed $=101,853$ | Your social security number |
| :--- | :--- |

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

| Name of Issuer of Mortgage Credit Certificate | Mortgage Credit Certificate Number | Issue date |
| :--- | :--- | :--- | :--- |

Before you begin Part I, figure the amounts of any of the following credits you are claiming: credit for the elderly or the disabled, alternative motor vehicle credit, and qualified plug-in electric drive motor vehicle credit.

## Part I Current Year Mortgage Interest Credit

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

2 Enter the certificate credit rate shown on your Mortgage Credit Certificate. Do not enter the interest rate on your home mortgage

3 If line 2 is $20 \%$ or less, multiply line 1 by line 2 . If line 2 is more than $20 \%$, or you refinanced your mortgage and received a reissued certificate, see the instructions for the amount to enter
You must reduce your deduction for home mortgage interest on Schedule A (Form 1040 or 1040-SR) by the amount on line 3.

4 Enter any 2016 credit carryforward from line 16 of your 2018 Form 8396

| $\mathbf{1}$ |  |
| :---: | :---: |
| $\mathbf{2}$ |  |
|  |  |
| $\mathbf{3}$ | 97,344 |
|  |  |
| $\mathbf{4}$ | 8,639 |
| $\mathbf{5}$ | 9,643 |
| $\mathbf{6}$ | 13,240 |
| $\mathbf{7}$ | 99,553 |
| $\mathbf{8}$ | 95,058 |
|  |  |
| $\mathbf{9}$ | 92,758 |

## Part II Mortgage Interest Credit Carryforward to 2020 (Complete only if line 9 is less than line 7.)

Add lines 3 and 4
Enter the amount from line 7.

12 Enter the larger of line 9 or line 10

13 Subtract line 12 from line 11.

142018 credit carryforward to 2020. Enter the smaller of line 6 or line 13

15 Subtract line 14 from line 13

162017 credit carryforward to 2020. Enter the smaller of line 5 or line 15

172019 credit carryforward to 2020. Subtract line 9 from line 3. If zero or less, enter -0-

| 10 |  |
| :---: | :--- |
| 11 |  |
| 12 |  |
| 13 |  |
| 14 |  |
| 15 |  |
| 16 |  |
| 17 |  |
| Form 8396 (2019) |  |

## Mortgage Interest Credit

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

- Go to www.irs.gov/Form8396 for the latest information.
- Attach to Form 1040, 1040-SR, or 1040-NR.
Mortgage Interest Credit
(For Holders of Qualified Mortgage Credit Certificates Issued by
State or Local Governmental Units or Agencies)
$>$ Go to www.irs.gov/Form8396 for the latest information.
$>$ Attach to Form 1040, 1040-SR, or 1040-NR.

Attachment Sequence No

138
Name(s) shown on your tax return

| Total Forms Filed $=101,853$ | Your social security number |
| :--- | :--- |

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

| Name of Issuer of Mortgage Credit Certificate | Mortgage Credit Certificate Number | Issue date |
| :--- | :--- | :--- |

Before you begin Part I, figure the amounts of any of the following credits you are claiming: credit for the elderly or the disabled, alternative motor vehicle credit, and qualified plug-in electric drive motor vehicle credit.

## Part I Current Year Mortgage Interest Credit

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

2 Enter the certificate credit rate shown on your Mortgage Credit Certificate. Do not enter the interest rate on your home mortgage

3 If line 2 is $20 \%$ or less, multiply line 1 by line 2 . If line 2 is more than $20 \%$, or you refinanced your mortgage and received a reissued certificate, see the instructions for the amount to enter

You must reduce your deduction for home mortgage interest on Schedule A (Form 1040 or 1040-SR) by the amount on line 3.

4 Enter any 2016 credit carryforward from line 16 of your 2018 Form 8396

|  |  |
| :---: | :---: |
| $\mathbf{1}$ |  |
| $\mathbf{2}$ |  |
|  |  |
| $\mathbf{3}$ | 154,058 |
|  |  |
| $\mathbf{4}$ | 16,862 |
| $\mathbf{5}$ | 47,189 |
| $\mathbf{6}$ | 19,355 |
| $\mathbf{7}$ | 237,464 |
| $\mathbf{8}$ | 604,010 |
|  |  |
| $\mathbf{9}$ | 142,747 |

5 Enter any 2017 credit carryforward from line 14 of your 2018 Form 8396

6 Enter any 2018 credit carryforward from line 17 of your 2018 Form 8396

7 Add lines 3 through 6
8 Limitation based on tax liability. Enter the amount from the Credit Limit Worksheet. See instructions .

9 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 or 1040-SR), line 6, or Form 1040-NR, line 51. Check box c on that line and enter " 8396 " in the space next to that box .

## Part II Mortgage Interest Credit Carryforward to 2020 (Complete only if line 9 is less than line 7.)

Add lines 3 and 4

| 10 |  |
| :---: | :--- |
| 11 |  |
| 12 |  |
| 13 |  |
| 14 |  |
| 15 |  |
| 16 |  |
| 17 |  |
|  |  |



If line 4 is a loss and: - Line 1 d 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 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.


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 <br> 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

| 11 | $*$ |
| :---: | :---: |
| 12 |  |
| 13 | 27 |
| 14 | $*$ |

14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13

## 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 2019. Add lines 10, 14, and 15. See instructions to find out how to report the losses on your tax return

[^12]${ }_{\text {Fom }} 8582$
Department of the Treasury Internal Revenue Service (99)

## Passive Activity Loss Limitations

## - See separate instructions.

- Attach to Form 1040, Form 1040-SR, or Form 1041.
- Go to www.irs.gov/Form8582 for instructions and the latest information.

Total Forms Filed $=7,892,207$

## Part I

## 2019 Passive Activity Loss

Caution: Complete Worksheets 1, 2, and 3 before completing Part I.


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 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

| 6 | $414,088,750$ |
| :---: | :---: |
| 7 | $845,548,610$ |
|  |  |
| 8 | $84,238,609$ |

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

| 5 | $108,011,503$ |
| :---: | :---: |
|  |  |
|  |  |
| 9 | $26,181,557$ |
| 10 | $13,466,092$ |

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
11 *

14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13 Part IV Total Losses Allowed
15 Add the income, if any, on lines 1a and 3a and enter the total.

| 15 | $33,583,116$ |
| :---: | :---: |
|  |  |
| 16 | $82,475,197$ |
| Form $8582(2019)$ |  |

[^13] Information about Form 8586 and its instructions is at www.irs.gov/form8586.

## Name(s) shown on return

| Total Forms Filed $=4,264$ | Identifying number |
| :--- | :--- |

## Part I Buildings Placed in Service Before 2008

1 Number of Forms 8609-A attached for buildings placed in service before 2008
2 Has there been a decrease in the qualified basis of any buildings accounted for on line 1 since the close of the preceding tax year? $\square$ Yes $\square$ No 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)
(ii)
(iii)
(iv)

3 Current year credit from attached Form(s) 8609-A for buildings placed in service before 2008 (see instructions)
4 Low-income housing credit for buildings placed in service before 2008 from partnerships, S corporations, estates, and trusts
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 Form 3800, Part III, line 1d, column (c)

6 Amount allocated to beneficiaries of the estate or trust (see instructions)
7 Estates and trusts, subtract line 6 from line 5. Report this amount on Form 3800, Part III, line 1d, column (c)

|  |  |  |
| :---: | :---: | :---: |
|  |  |  |
|  |  |  |
| 3 |  |  |
| 4 | 403 |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
|  |  |  |

## Part II Buildings Placed in Service After 2007

8 Number of Forms 8609-A attached for buildings placed in service after 2007
9 Has there been a decrease in the qualified basis of any buildings accounted for on line 8 since the close of the preceding tax year? $\square$ Yes $\square$ No 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)
(ii)
(iii)
(iv)
-------------------------
10 Current year credit from attached Form(s) 8609-A for buildings placed in service after 2007 (see instructions)
11 Low-income housing credit for buildings placed in service after 2007 from partnerships, S corporations, estates, and trusts.

12 Add lines 10 and 11. Estates and trusts, go to line 13. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, stop here and report this amount on Form 3800, Part III, line 4d, column (c)

13 Amount allocated to beneficiaries of the estate or trust (see instructions)
14 Estates and trusts, subtract line 13 from line 12. Report this amount on Form 3800, Part III, line 4d, column (c)
For Paperwork Reduction Act Notice, see General Instructions.
Cat. No. 63987

|  |  |  |
| :---: | :---: | :---: |
|  |  |  |
|  |  |  |
| 10 | $*$ |  |
| 11 | 528 |  |
| 12 | 529 |  |
| 13 |  |  |
| 14 |  |  |
| Form 8586 (Rev. 12-2016) |  |  |

[^14]

| Home address (number and street, or P.O. box if mail is not delivered to your home) | Apt. no. |  |
| :--- | :--- | :--- | :--- | :--- |
| City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instruction |  |  |
| Foreign country name | Foreign province/state/county | Foreign postal code |

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

- You made nondeductible contributions to a traditional IRA for 2019.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2019 and you made nondeductible contributions to a traditional IRA in 2019 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2019 Forms 8915-C and 8915-D)), 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 2019 and you made nondeductible contributions to a traditional IRA in 2019 or an earlier year.
1 Enter your nondeductible contributions to traditional IRAs for 2019, including those made for 2019 from January 1, 2020, through April 15, 2020. See instructions

c Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on 2019 Form 1040 or $1040-S R$, line 4b; or 2019 Form 1040-NR, line 16b
15c 496,637

Note: You may be subject to an additional 10\% tax on the amount on line 15c if you were under age $591 / 2$ at the time of the distribution. See instructions.

Nondeductible IRAs

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

Department of the Treasury Internal Revenue Service (99)

- Attach to 2019 Form 1040, 1040-SR, or 1040-NR.

Name. If married, file a separate form for each spouse required to file 2019 Form 8606 . See instructions.
Total Forms Filed $=2,710,268$


Attachment
Sequence No. 48
Your social security number


Home address (number and street, or P.O. box if mail is not delivered to your home)
Apt. no.

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

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 2019.
- You took distributions from a traditional, SEP, or SIMPLE IRA in 2019 and you made nondeductible contributions to a traditional IRA in 2019 or an earlier year. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2019 Forms 8915-C and 8915-D)), 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 2019 and you made nondeductible contributions to a traditional IRA in 2019 or an earlier year.
1 Enter your nondeductible contributions to traditional IRAs for 2019, including those made for 2019 from January 1, 2020, through April 15, 2020. See instructions
2 Enter your total basis in traditional IRAs. See instructions
3 Add lines 1 and 2
In 2019, did you take a distribution $\quad$ No $\longrightarrow$ Enter the amount from line 3 on line 14. from traditional, SEP, or SIMPLE IRAs, or make a Roth IRA conversion? $\quad$ Yes $\longrightarrow$ Go to line 4.
4 Enter those contributions included on line 1 that were made from January 1, 2020, through April 15, 2020
5 Subtract line 4 from line 3
6 Enter the value of all your traditional, SEP, and SIMPLE IRAs as of December 31, 2019, plus any outstanding rollovers. Subtract any repayments of qualified disaster distributions (see 2019 Forms 8915-C and 8915-D)
7 Enter your distributions from traditional, SEP, and SIMPLE IRAs in 2019. Do not include rollovers (other than repayments of qualified disaster distributions (see 2019 Forms 8915-C and 8915-D)), 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)
8 Enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2019. Also enter this amount on line 16
9 Add lines 6, 7, and 8
9318,315,411
10 Divide line 5 by line 9 . Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter " 1.000 "
11 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
12 Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth IRA
13 Add lines 11 and 12. This is the nontaxable portion of all your distributions
14 Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2019 and earlier years
15a Subtract line 12 from line 7
b Enter the amount on line 15a attributable to qualified disaster distributions from 2019 Forms 8915-C and 8915-D (see instructions). Also, enter this amount on 2019 Form 8915-C, line 22, or 2019 Form 8915-D, line 13, as applicable
15b 119,112
c Taxable amount. Subtract line 15b from line 15a. If more than zero, also include this amount on 2019 Form 1040 or $1040-S R$, line 4b; or 2019 Form 1040-NR, line 16b

15c $16,150,126$
Note: You may be subject to an additional $10 \%$ tax on the amount on line 15 c if you were under age $591 / 2$ at the time of the distribution. See instructions.

## Part II 2019 Conversions From Traditional, SEP, or SIMPLE IRAs to Roth IRAs

Complete this part if you converted part or all of your traditional, SEP, and SIMPLE IRAs to a Roth IRA in 2019.
16 If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2019
17 If you completed Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on line 16 (see instructions)
18 Taxable amount. Subtract line 17 from line 16. If more than zero, also include this amount on 2019 Form 1040 or 1040-SR, line 4b; or 2019 Form 1040-NR, line 16b

| 16 | 396,695 |
| :---: | :---: |
| 17 | 239,652 |
| 18 | 265,064 |

## Part III Distributions From Roth IRAs

Complete this part only if you took a distribution from a Roth IRA in 2019. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2019 Forms 8915-C and 8915-D)), qualified charitable distribution, one-time distribution to fund an HSA, recharacterization, or return of certain contributions (see instructions).
19 Enter your total nonqualified distributions from Roth IRAs in 2019, including any qualified first-time homebuyer distributions, and any qualified disaster distributions (see instructions). Also see 2019 Forms 8915-C and 8915-D

|  |  |
| :---: | :---: |
| $\mathbf{1 9}$ | 413,491 |
| $\mathbf{2 0}$ | 5,490 |
| $\mathbf{2 1}$ | 409,750 |
| $\mathbf{2 2}$ | 251,616 |
| $\mathbf{2 3}$ | 227,429 |
| $\mathbf{2 4}$ | 24,303 |
| $\mathbf{2 5 a}$ | 208,528 |
|  |  |
| $\mathbf{2 5 b}$ | $*$ |
| $\mathbf{2 5 c}$ | 207,516 |


| Sign Here Only if You Are Filing This Form by Itself and Not With Your Tax Return |  | Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Paid | Print/Type preparer's name |  | Preparer's signature | Check $\square$ $\square$ if self-employed | PTIN |
| er | Firm's name |  |  | Firm's EIN - |  |
|  | Firm's address - |  |  | Phone no. |  |

[^15]
## Part II 2019 Conversions From Traditional, SEP, or SIMPLE IRAs to Roth IRAs

Complete this part if you converted part or all of your traditional, SEP, and SIMPLE IRAs to a Roth IRA in 2019.
16 If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, SEP, and SIMPLE IRAs to Roth IRAs in 2019

| 16 | $9,978,209$ |
| :---: | :---: |
| 17 | $2,687,636$ |
| 18 | $7,290,573$ |

## Part III Distributions From Roth IRAs

Complete this part only if you took a distribution from a Roth IRA in 2019. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution (see 2019 Forms 8915-C and 8915-D)), qualified charitable distribution, one-time distribution to fund an HSA, recharacterization, or return of certain contributions (see instructions).
19 Enter your total nonqualified distributions from Roth IRAs in 2019, including any qualified first-time homebuyer distributions, and any qualified disaster distributions (see instructions). Also see 2019 Forms 8915-C and 8915-D

|  |  |
| :---: | :---: |
| $\mathbf{1 9}$ | $3,739,148$ |
| $\mathbf{2 0}$ | 32,427 |
| $\mathbf{2 1}$ | $3,707,690$ |
| $\mathbf{2 2}$ | $4,422,580$ |
| $\mathbf{2 3}$ | $1,388,369$ |
| $\mathbf{2 4}$ | 908,919 |
| $\mathbf{2 5 a}$ | $1,095,922$ |
|  |  |
| $\mathbf{2 5 b}$ | $*$ |
| $\mathbf{2 5 c}$ | $1,092,491$ | may be subject to an additional tax (see instructions)

24 Enter your basis in conversions from traditional, SEP, and SIMPLE IRAs and rollovers from qualified retirement plans to a Roth IRA. See instructions
25a Subtract line 24 from line 23. If zero or less, enter -0- and skip lines 25b and 25c
b Enter the amount on line 25a attributable to qualified disaster distributions from 2019 Forms 8915-C and 8915-D (see instructions). Also, enter this amount on 2019 Form 8915-C, line 23, or 2019 Form 8915-D, line 14, as applicable

| Sign Here Only if You Are Filing This Form by Itself and Not With Your Tax Return |  | Under penalties of perjury, I declare that I have examined this form, including accompanying attachments, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.$\qquad$$\qquad$ |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Paid Preparer Use Only | Print/Type preparer's name |  | Preparer's signature | Check $\square$ if self-employed | PTIN |
|  | Firm's name |  |  | Firm's EIN |  |
|  | Firm's address - |  |  | Phone no. |  |

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

Tax for Certain Children Who Have Unearned Income
Department of the Treasury Internal Revenue Service (99)

# - Attach to your Form 1040 or Form 1040-NR. 

 Name shown on return - Go to www.irs.gov/Form8615 for instructions and the latest information.
## Total Forms Filed $=359,546$

Before you begin: If you must use the Schedule D Tax Worksheet or have income from farming or fishing, see the instructions. Also see Pub. 929, Tax Rules for Children and Dependents. It explains how to figure your tax using the Schedule D Tax Worksheet or Schedule J (Form 1040 or 1040-SR).

| A Parent's name (first, initial, and last). Caution: See the instructions before completing. |  | B Parent's social security number |  |
| :---: | :---: | :---: | :---: |
| Part I | 1 Net Unearned Income |  |  |
| 1 | Enter your unearned income. See the instructions | 1 | 359,546 |
| $2$ | If you did not itemize deductions on Schedule A (Form 1040 or Form 1040-NR), enter \$2,200. Otherwise, see the instructions . | 2 | 359,546 |
| $3$ | Subtract line 2 from line 1. If zero or less, stop; do not complete the rest of this form but do attach it to your return | 3 | 359,546 |
| $4$ | Enter your taxable income from Form 1040, line 11b; or Form 1040-NR, line 41. If you file Form 2555, see the instructions | 4 | 319,810 |
| $5$ | Enter the smaller of line 3 or line 4. If zero, stop; do not complete the rest of this form but do attach it to your return | 5 | 319,810 |

## Part II Tax

6 Subtract line 5 from line 4
 274,178

7 Enter the tax on the amount on line 4. See the instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040 or 1040-SR) is used to figure the tax, check here. If applicable, include this amount on your Form 1040, line 12a; or Form 1040-NR, line 42. See the instructions. If you file Form 2555, see the instructions

|  | $\qquad$ <br> Tax for Certain Children Who Have Unearned Income <br> Attach to your Form 1040 or Form 1040-NR. <br> Go to www.irs.gov/Form8615 for instructions and the latest information. |  |  |  |  | OMB No. 1545-0074 |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |
| Department of the Treasury Internal Revenue Service (99) |  |  |  |  |  |  | achment uence No. 33 |
| Name shown on return | Total Forms Filed $=359,546$ |  |  |  | Your social security number |  |  |
| Before you begin: If you must use the Schedule D Tax Worksheet or have income from farming or fishing, see the instructions. Also see Pub. 929, Tax Rules for Children and Dependents. It explains how to figure your tax using the Schedule D Tax Worksheet or Schedule J (Form 1040 or 1040-SR). |  |  |  |  | see the instructions. Also see g the Schedule D Tax |  |  |
| A Parent's name (first, initial, and last). Caution: See the instructions before completing. |  |  |  |  | B Parent's social security number |  |  |
| Part I Net Unearned Income |  |  |  |  |  |  |  |
| Enter your unearned income. See the instructions <br> If you did not itemize deductions on Schedule A (Form 1040 or Form 1040-NR), enter \$2,200. Otherwise, see the instructions . |  |  |  |  |  | 1 | 5,732,666 |
|  |  |  |  |  |  | 2 | 793,023 |
| Subtract line 2 from line 1. If zero or less, stop; do not complete the rest of this form but do attach it to your return |  |  |  |  |  | 3 | 4,939,643 |
| Enter your taxable income from Form 1040, line 11b; or Form 1040-NR, line 41. If you file Form 2555, see the instructions |  |  |  |  |  | 4 | 5,063.913 |
| Enter the smaller of line 3 or line 4. If zero, stop; do not complete the rest of this form but do attach it to your return |  |  |  |  |  | 5 | 4,533,054 |
| Part II Tax |  |  |  |  |  |  |  |
| 6 Subtract line 5 | 4 | . | 6 |  |  |  |  |
| 7 Enter the tax on the amount on line 4. See the instructions. If the Qualified Dividends and Capital Gain Tax Worksheet, Schedule D Tax Worksheet, or Schedule J (Form 1040 or 1040-SR) is used to figure the tax, check here. If applicable, include this amount on your Form 1040, line 12a; or Form 1040-NR, line 42. See the instructions. If you file Form 2555, see the instructions |  |  |  |  |  | 7 | 937,092 |
| For Paperwork Reduction Act Notice, see your tax return instructions. |  |  | Cat. No. 64113 U |  |  |  | Form 8615 (2019) |



## Part I Net Minimum Tax on Exclusion Items

1 Combine lines 1 and 2e of your 2018 Form 6251. Estates and trusts, see instructions .

2 Enter adjustments and preferences treated as exclusion items (see instructions)
3 Minimum tax credit net operating loss deduction (see instructions)

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 $\$ 718,800$ and you were married filing separately for 2018, see instructions

| $\mathbf{1}$ | 377,050 |
| :---: | :---: |
| $\mathbf{2}$ | 372,619 |
| $\mathbf{3}$ | $\left(\begin{array}{l}10,111 \\ \hline\end{array}\right.$ |
| $\mathbf{4}$ | 350,937 |
|  |  |
| $\mathbf{5}$ | 441,466 |
| $\mathbf{6}$ | 441,466 |
| $\mathbf{7}$ | 61,020 |
| $\mathbf{8}$ | 61,020 |
| $\mathbf{9}$ | 414,222 |
| $\mathbf{1 5}$ | 52,983 |
| $\mathbf{1 0}$ | 262,626 |
| $\mathbf{1 4}$ |  |
| $\mathbf{1 1}$ | 267,238 |
|  | 256,702 |
|  |  |
|  |  |
|  |  |
|  |  |

## 8801

## Credit for Prior Year Minimum TaxIndividuals, Estates, and Trusts

## Part I Net Minimum Tax on Exclusion Items

1 Combine lines 1 and $2 e$ of your 2018 Form 6251. Estates and trusts, see instructions .
2 Enter adjustments and preferences treated as exclusion items (see instructions)
3 Minimum tax credit net operating loss deduction (see instructions)
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 $\$ 718,800$ and you were married filing separately for 2018, see instructions

5 Enter: $\$ 109,400$ if married filing jointly or qualifying widow(er) for 2018; $\$ 70,300$ if single or head of household for 2018; or $\$ 54,700$ if married filing separately for 2018. Estates and trusts, enter $\$ 24,600$

6 Enter: $\$ 1,000,000$ if married filing jointly or qualifying widow(er) for 2018; $\$ 500,000$ if single, head of household, or married filing separately for 2018. Estates and trusts, enter $\$ 81,900$

7 Subtract line 6 from line 4. If zero or less, enter -0 - here and on line 8 and go to line 9 .
8 Multiply line 7 by $25 \%$ (0.25).
9 Subtract line 8 from line 5 . If zero or less, enter - 0 -. If under age 24 at the end of 2018 , see instructions
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.

| $\mathbf{1}$ | $203,768,606$ |
| :--- | :---: |
| $\mathbf{2}$ | $7,559,805$ |
| $\mathbf{3}$ | $(3,038,800$ |
| $\mathbf{4}$ | $213,774,387$ |
| $\mathbf{5}$ | $42,089,655$ |
| $\mathbf{6}$ | $351,180,969$ |
| $\mathbf{7}$ | $110,932,417$ |
| $\mathbf{8}$ | $27,733,112$ |
| $\mathbf{9}$ | $38,251,104$ |
|  |  |
| $\mathbf{1 0}$ | $188,246,391$ |
|  |  |
| $\mathbf{1 2}$ | $1,488,980$ |
| $\mathbf{1 3}$ | $39,509,375$ |
| $\mathbf{1 4}$ | $41,066,707$ |
| $\mathbf{1 5}$ | $1,392,902$ |
|  | $40,966,959$ |
|  |  |
|  |  |

## Part II Minimum Tax Credit and Carryforward to 2020

16 Enter the amount from your 2018 Form 6251, line 11, or 2018 Form 1041, Schedule I, line 56

17 Enter the amount from line 15
18 Subtract line 17 from line 16. If less than zero, enter as a negative amount

192018 credit carryforward. Enter the amount from your 2018 Form 8801, line 26

20 Enter your 2018 unallowed qualified electric vehicle credit (see instructions)

21 Combine lines 18 through 20. If zero or less, stop here and see the instructions

22 Enter your 2019 regular income tax liability minus allowable credits (see instructions)

2
Enter the amount from your 2019 Form 6251, line 9, or 2019 Form 1041, Schedule I, line 52.

24 Subtract line 23 from line 22. If zero or less, enter -0-

25 Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2019 Schedule 3 (Form 1040 or 1040-SR), line 6 (check box b); Form 1040-NR, line 51 (check box b); or Form 1041, Schedule G, line 2c.

26 Credit carryforward to 2020. Subtract line 25 from line 21. Keep a record of this amount because you may use it in future years

213,918 Form 8801 (2019)

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

| Form 8801 (2019) |  | Page 2 |  |
| :---: | :---: | :---: | :---: |
| Part II | II Minimum Tax Credit and Carryforward to 2020 |  |  |
| 16 E | Enter the amount from your 2018 Form 6251, line 11, or 2018 Form 1041, Schedule I, line 56 | 16 | 2,196,012 |
| 17 E | Enter the amount from line 15 | 17 |  |
| 18 S | Subtract line 17 from line 16. If less than zero, enter as a negative amount | 18 | 803,110 |
| 192 | 2018 credit carryforward. Enter the amount from your 2018 Form 8801, line 26 | 19 | 7,575,884 |
| 20 E | Enter your 2018 unallowed qualified electric vehicle credit (see instructions) | 20 | * |
| 21 C | Combine lines 18 through 20. If zero or less, stop here and see the instructions . | 21 | 8,856,923 |
| 22 E | Enter your 2019 regular income tax liability minus allowable credits (see instructions) . . . . . | 22 | 37,615,613 |
| 23 E | Enter the amount from your 2019 Form 6251, line 9, or 2019 Form 1041, Schedule I, line 52. | 23 | 35,519,095 |
| 24 S | Subtract line 23 from line 22. If zero or less, enter -0- | 24 | 3,469,258 |
| $25 \quad \begin{array}{r}\text { M } \\ \\ \\ \\ \text { F }\end{array}$ | Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2019 Schedule 3 (Form 1040 or 1040-SR), line 6 (check box b); Form 1040-NR, line 51 (check box b); or Form 1041, Schedule G, line 2c. | 25 | 1,549,063 |
| 26 C | Credit carryforward to 2020. Subtract line 25 from line 21. Keep a record of this amount because you may use it in future years | 26 | 7,307,860 |

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


## Part III Tax Computation Using Maximum Capital Gains Rates

Complete Part III only if you are required to do so by line 11 or by the Foreign Earned Income Tax Worksheet in the instructions.
Caution: If you didn't complete the 2018 Qualified Dividends and Capital Gain Tax Worksheet, the 2018 Schedule D Tax Worksheet, or Part V of the 2018 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 or $2555-E Z$ for 2018, enter the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions
Caution: If for 2018 you filed Form 1040-NR, 1041, 2555, or 2555-EZ, see the instructions before completing lines 28, 29, and 30.
28 Enter the amount from line 6 of your 2018 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2018 Schedule D Tax Worksheet, or the amount from line 26 of the 2018 Schedule D (Form 1041), whichever applies*
If you figured your 2018 tax using the 2018 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 2018 Schedule D (Form 1040), or line 18b, column (2), of the 2018 Schedule D (Form 1041)

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41 Enter the amount from line 36
42 Form 1040 filers, enter the amount from line 7 of your 2018 Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 19 of your 2018 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 2018 Schedule D (Form 1041) or line 18 of your 2018 Schedule D Tax Worksheet, whichever applies. If you didn't complete either the worksheet or Part V of the 2018 Schedule D (Form 1041), enter the amount from your 2018 Form 1041, line 22; if zero or less, enter -0-. Form 1040-NR filers, see instructions

42

[^16] for Schedule D (Form 1040) (or the 2018 Instructions for Schedule D (Form 1041)).

## Part III Tax Computation Using Maximum Capital Gains Rates

Complete Part III only if you are required to do so by line 11 or by the Foreign Earned Income Tax Worksheet in the instructions.
Caution: If you didn't complete the 2018 Qualified Dividends and Capital Gain Tax Worksheet, the 2018 Schedule D Tax Worksheet, or Part V of the 2018 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 or $2555-E Z$ for 2018, enter the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions
Caution: If for 2018 you filed Form 1040-NR, 1041, 2555, or 2555-EZ, see the instructions before completing lines 28,29 , and 30.
28 Enter the amount from line 6 of your 2018 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2018 Schedule D Tax Worksheet, or the amount from line 26 of the 2018 Schedule D (Form 1041), whichever applies*
If you figured your 2018 tax using the 2018 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 2018 Schedule D (Form 1040), or line 18b, column (2), of the 2018 Schedule D (Form 1041)
30 Add lines 28 and 29, and enter the smaller of that result or the amount from line 10 of your 2018 Schedule D Tax Worksheet
31 Enter the smaller of line 27 or line 30

| 27 |  |
| :---: | :---: |
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32 Subtract line 31 from line 27
33 If line 32 is $\$ 191,100$ or less ( $\$ 95,550$ or less if married filing separately for 2018), multiply line 32 by $26 \%$ ( 0.26 ). Otherwise, multiply line 32 by $28 \%$ ( 0.28 ) and subtract $\$ 3,822$ ( $\$ 1,911$ if married filing separately for 2018 from the result. Form 1040-NR filers, see instructions

34 Enter:

- \$77,200 if married filing jointly or qualifying widow(er) for 2018,
- \$38,600 if single or married filing separately for 2018,
- \$51,700 if head of household for 2018, or
- \$2,600 for an estate or trust.

Form 1040-NR filers, see instructions.


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| :---: | :---: |
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| 42 |  |

Enter the amount from line 7 of your 2018 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2018 Schedule D Tax Worksheet, or the amount from line 27 of the 2018 Schedule D (Form 1041), whichever applies. If you didn't complete either worksheet or Part V of the 2018 Schedule D (Form 1041), enter the amount from your 2018 Form 1040, line 10, or 2018 Form 1041, line 22, whichever applies; if zero or less, enter -0-. Form 1040-NR filers, see instructions
36 Subtract line 35 from line 34. If zero or less, enter -0-
37 Enter the smaller of line 27 or line 28
38 Enter the smaller of line 36 or line 37
39 Subtract line 38 from line 37
40 Enter:

- \$425,800 if single for 2018,
- $\$ 239,500$ if married filing separately for 2018,
- \$479,000 if married filing jointly or qualifying widow(er) for 2018,
- \$452,400 if head of household for 2018, or
- \$12,700 for an estate or trust.

Form 1040-NR filers, see instructions.
Enter the amount from line 36
42 Form 1040 filers, enter the amount from line 7 of your 2018 Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 19 of your 2018 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 2018 Schedule D (Form 1041) or line 18 of your 2018 Schedule D Tax Worksheet, whichever applies. If you didn't complete either the worksheet or Part V of the 2018 Schedule D (Form 1041), enter the amount from your 2018 Form 1041, line 22; if zero or less, enter -0-. Form 1040-NR filers, see instructions

[^17] for Schedule D (Form 1040) (or the 2018 Instructions for Schedule D (Form 1041)).


## Part II Tax on the First \$2,200 of Child's Interest and Dividends

13 Amount not taxed. Enter 1,100.
14 Subtract line 13 from line 4. If the result is zero or less, enter $-0-$

| . | $\cdot$ | $\cdot$ | $\cdot$ | $\cdot$ | $\mathbf{1 3}$ |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | $\cdot$ | $\cdot$ | $\cdot$ | $\cdot$ | $\cdot$ | $\mathbf{1 4}$ | 60,221 |
|  |  |  |  |  |  |  |  |
|  |  | $\cdot$ | $\cdot$ | $\cdot$ | $\cdot$ | 15 | 60,221 |
|  |  |  |  |  |  |  |  |No. Enter $\$ 110$ here and see the Note below.

Yes. Multiply line 14 by $10 \%$ ( 0.10 ). Enter the result here and see the Note below.
15
15 Tax. Is the amount on line 14 less than $\$ 1,100$ ?
Note: If you checked the box on line C above, see the instructions. Otherwise, include the amount from line 15 in the tax you enter on Form 1040 or 1040-SR, line 12a, or Form 1040-NR, line 42. Be sure to check box 1 on Form 1040 or 1040-SR, line 12a, or check box a on Form 1040-NR, line 42.
For Paperwork Reduction Act Notice, see your tax return instructions.


## Part II Tax on the First \$2,200 of Child's Interest and Dividends



Note: If you checked the box on line C above, see the instructions. Otherwise, include the amount from line 15 in the tax you enter on Form 1040 or 1040-SR, line 12a, or Form 1040-NR, line 42. Be sure to check box 1 on Form 1040 or 1040-SR, line 12a, or check box a on Form 1040-NR, line 42.
For Paperwork Reduction Act Notice, see your tax return instructions.


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

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.
Total Forms Filed $=56,674$

## Part I Information on the Like-Kind Exchange

Note: Generally, only real property should be described on line 1 or 2 . However, you may describe personal and/or real property on line 1 or 2 if you are filing this form to report the disposition of property exchanged in a previously reported related party like-kind exchange. If the property described on line 1 or line 2 is real or personal property located outside the United States, indicate the country.

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)
4 Date you actually transferred your property to the other party (month, day, year)

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.

6 Date you actually received the like-kind property from other party (month, day, year). See instructions


7 Was the exchange of the property given up or received made with a related party, either directly or indirectly (such as through an intermediary)? See instructions. If "Yes," complete Part II. If "No," go to Part IIIYes No

Note: Do not file this form if a related party sold property into the exchange, directly or indirectly (such as through an intermediary); that property became your replacement property; and none of the exceptions in line 11 applies to the exchange. Instead, report the disposition of the property as if the exchange had been a sale. If one of the exceptions on line 11 applies to the exchange, complete Part II.

## Part II Related Party Exchange Information

| 8 | Name of related party | Relationship to you | Related party's identifying number |
| :--- | :--- | :--- | :--- |

Address (no., street, and apt., room, or suite no., city or town, state, and ZIP code)

9 During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did the related party sell or dispose of any part of the like-kind property received from you (or an intermediary) in the exchange?$\square$ Yes No

10 During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did you sell or dispose of any part of the like-kind property you received? $\square$ 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 are "No" and this is not the year of the exchange, stop here. If either line 9 or line 10 is "Yes," complete Part III and report on this year's tax return the deferred gain or (loss) from line 24 unless one of the exceptions on line 11 applies.

11 If one of the exceptions below applies to the disposition, check the applicable box.
aThe disposition was after the death of either of the related parties.
bThe disposition was an involuntary conversion, and the threat of conversion occurred after the exchange.
cYou can establish to the satisfaction of the IRS that neither the exchange nor the disposition had tax avoidance as one of its principal purposes. If this box is checked, attach an explanation. See instructions.


## Part I Information on the Like-Kind Exchange

Note: Generally, only real property should be described on line 1 or 2 . However, you may describe personal and/or real property on line 1 or 2 if you are filing this form to report the disposition of property exchanged in a previously reported related party like-kind exchange. If the property described on line 1 or line 2 is real or personal property located outside the United States, indicate the country.

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)
4 Date you actually transferred your property to the other party (month, day, year)

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.

6 Date you actually received the like-kind property from other party (month, day, year). See instructions
$\left[\begin{array}{c|c}\mathbf{3} & \text { MM/DD/YYYY } \\ \hline \mathbf{4} & M M / D D / Y Y Y Y \\ \hline & \\ \mathbf{5} & M M / D D / Y Y Y Y \\ \hline \mathbf{6} & M M / D D / Y Y Y Y \\ \hline\end{array}\right.$

7 Was the exchange of the property given up or received made with a related party, either directly or indirectly (such as through an intermediary)? See instructions. If "Yes," complete Part II. If "No," go to Part IIIYes No

Note: Do not file this form if a related party sold property into the exchange, directly or indirectly (such as through an intermediary); that property became your replacement property; and none of the exceptions in line 11 applies to the exchange. Instead, report the disposition of the property as if the exchange had been a sale. If one of the exceptions on line 11 applies to the exchange, complete Part II.

## Part II Related Party Exchange Information

|  | Name of related party | Relationship to you | Related party's identifying number |
| :--- | :--- | :--- | :--- |

Address (no., street, and apt., room, or suite no., city or town, state, and ZIP code)

9 During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did the related party sell or dispose of any part of the like-kind property received from you (or an intermediary) in the exchange?Yes No

10 During this tax year (and before the date that is 2 years after the last transfer of property that was part of the exchange), did you sell or dispose of any part of the like-kind property you received? $\square \mathrm{Ye}$ 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 are "No" and this is not the year of the exchange, stop here. If either line 9 or line 10 is "Yes," complete Part III and report on this year's tax return the deferred gain or (loss) from line 24 unless one of the exceptions on line 11 applies.

11 If one of the exceptions below applies to the disposition, check the applicable box.
aThe disposition was after the death of either of the related parties.
bThe disposition was an involuntary conversion, and the threat of conversion occurred after the exchange.
cYou can establish to the satisfaction of the IRS that neither the exchange nor the disposition had tax avoidance as one of its principal purposes. If this box is checked, attach an explanation. See instructions.

## Part III Realized Gain or (Loss), Recognized Gain, and Basis of Like-Kind Property Received

Caution: If you transferred and received (a) more than one group of like-kind properties or (b) cash or other (not like-kind) property, see Reporting of multi-asset exchanges in the instructions.
Note: Complete lines 12 through 14 only if you gave up property that was not like-kind. Otherwise, go to line 15.
12 Fair market value (FMV) of other property given up
13 Adjusted basis of other property given up

| $\mathbf{1 2}$ | 5.136 |
| :--- | :--- |
| $\mathbf{1 3}$ | 3.158 |

14 Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain or (loss) in the same manner as if the exchange had been a sale
Caution: If the property given up was used previously or partly as a home, see Property used as home in the instructions.
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
16 FMV of like-kind property you received
17 Add lines 15 and 16
18 Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange expenses not used on line 15. See instructions
19 Realized gain or (loss). Subtract line 18 from line 17


20 Enter the smaller of line 15 or line 19, but not less than zero
21 Ordinary income under recapture rules. Enter here and on Form 4797, line 16. See instructions
22 Subtract line 21 from line 20. If zero or less, enter -0-. If more than zero, enter here and on Schedule D or Form 4797, unless the installment method applies. See instructions.
23 Recognized gain. Add lines 21 and 22
24 Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions
25 Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23 .
$25 \quad 55.171$

## Part IV 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.

26 Enter the number from the upper right corner of your certificate of divestiture. (Do not attach a copy of your certificate. Keep the certificate with your records.)

27 Description of divested property

28 Description of replacement property

29 Date divested property was sold (month, day, year)


36 Subtract line 35 from line 34. If zero or less, enter -0-. If more than zero, enter here and on Schedule D or Form 4797. See instructions

| 36 |  |
| :---: | :---: |
| 37 |  |
| 38 |  |

## Part III Realized Gain or (Loss), Recognized Gain, and Basis of Like-Kind Property Received

Caution: If you transferred and received (a) more than one group of like-kind properties or (b) cash or other (not like-kind) property, see Reporting of multi-asset exchanges in the instructions.
Note: Complete lines 12 through 14 only if you gave up property that was not like-kind. Otherwise, go to line 15.
12 Fair market value (FMV) of other property given up
13 Adjusted basis of other property given up

| 12 | $1,935,128$ |
| :---: | :---: |
| 13 | 792,705 |

14 Gain or (loss) recognized on other property given up. Subtract line 13 from line 12. Report the gain or (loss) in the same manner as if the exchange had been a sale

14 1,142.424
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 (but not below zero) by any exchange expenses you incurred. See instructions
16 FMV of like-kind property you received

|  |  |
| :---: | :---: |
|  | $1,142,424$ |
|  |  |
| 15 | $5,110,553$ |
| 16 | $54,325,250$ |
| 17 | $59,435,803$ |
| 18 | $31,315,981$ |
| 19 | $28,119,823$ |
| 20 | $3,345,570$ |
| 21 | 88,584 |
| 22 | $3,275,040$ |
| 23 | $3,363,624$ |
| 24 | $24,764,821$ |
| 25 | $29,569,051$ |

17 Add lines 15 and 16
18 Adjusted basis of like-kind property you gave up, net amounts paid to other party, plus any exchange expenses not used on line 15 . See instructions
19 Realized gain or (loss). Subtract line 18 from line 17
20 Enter the smaller of line 15 or line 19, but not less than zero
21 Ordinary income under recapture rules. Enter here and on Form 4797, line 16. See instructions
22 Subtract line 21 from line 20. If zero or less, enter -0-. If more than zero, enter here and on Schedule D or Form 4797, unless the installment method applies. See instructions.
23 Recognized gain. Add lines 21 and 22 .
24 Deferred gain or (loss). Subtract line 23 from line 19. If a related party exchange, see instructions .
25 Basis of like-kind property received. Subtract line 15 from the sum of lines 18 and 23 .

## Part IV 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.

26 Enter the number from the upper right corner of your certificate of divestiture. (Do not attach a copy of your certificate. Keep the certificate with your records.)

27 Description of divested property

28 Description of replacement property

29 Date divested property was sold (month, day, year)

Sales price of divested property. See instructions

Basis of divested property
Realized gain. Subtract line 31 from line 30

33
Cost of replacement property purchased within 60 days after date of sale
34 Subtract line 33 from line 30. If zero or less, enter -0-
35 Ordinary income under recapture rules. Enter here and on Form 4797, line 10. See instructions

36 Subtract line 35 from line 34. If zero or less, enter -0-. If more than zero, enter here and on Schedule D or Form 4797. See instructions

37 Deferred gain. Subtract the sum of lines 35 and 36 from line 32.

## Part I Part of Your Home Used for Business

1 Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory or product samples (see instructions)
2 Total area of home.
3 Divide line 1 by line 2. Enter the result as a percentage
For daycare facilities not used exclusively for business, go to line 4. All others, go to line 7.
4 Multiply days used for daycare during year by hours used per day
5 If you started or stopped using your home for daycare during the year, see instructions; otherwise, enter 8,760
6 Divide line 4 by line 5. Enter the result as a decimal amount

| 4 |  | hr. |
| :---: | :---: | :---: |
| 5 |  | hr. |
| 6 | . |  |

7 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

8 Enter the amount from Schedule C, line 29, plus any gain derived from the business use of your home, 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. $\quad$ (a) Direct expenses
9 Casualty losses (see instructions).
10 Deductible mortgage interest (see instructions)
11 Real estate taxes (see instructions)
12 Add lines 9, 10, and 11

18 Insurance
19 Rent
20 Repairs and maintenance
21 Utilities
22 Other expenses (see instructions).
23 Add lines 16 through 22
24 Multiply line 23, column (b), by line 7
25 Carryover of prior year operating expenses (see instructions) .
26 Add line 23, column (a), line 24, and line 25.
27 Allowable operating expenses. Enter the smaller of line 15 or line 26

| 8 | $2,943,893$ |
| :--- | :--- |

Limit on excess casualty losses and depreciation. Subtract line 27 from line 15 .

| $\mathbf{2 9}$ | 3,506 |
| :---: | :---: |
| $\mathbf{3 0}$ | $1,201,567$ |
| $\mathbf{3 1}$ | 345,181 |

30 Depreciation of your home from line 42 below .
31 Carryover of prior year excess casualty losses and depreciation (see instructions)
32 Add lines 29 through 31
33 Allowable excess casualty losses and depreciation. Enter the smaller of line 28 or line 32
34 Add lines 14, 27, and 33 .
35 Casualty loss portion, if any, from lines 14 and 33. Carry amount to Form 4684 (see instructions).
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

| 32 | $1,230,757$ |
| :---: | :---: |
| 33 | 787,387 |
| 34 | $2,371,503$ |
| 35 | 9,683 |
|  |  |
| 36 | $2,370,031$ |

Part III Depreciation of Your Home
37 Enter the smaller of your home's adjusted basis or its fair market value (see instructions)
38 Value of land included on line 37
39 Basis of building. Subtract line 38 from line 37
40 Business basis of building. Multiply line 39 by line 7
41 Depreciation percentage (see instructions)
42 Depreciation allowable (see instructions). Multiply line 40 by line 41. Enter here and on line 30 above

| $\mathbf{3 7}$ | $1,167,803$ |  |
| :---: | :---: | :--- |
| $\mathbf{3 8}$ | 680,701 |  |
| $\mathbf{3 9}$ | $1,159,346$ |  |
| $\mathbf{4 0}$ | $1,154,870$ |  |
| $\mathbf{4 1}$ | 2,029 | $\%$ |
| $\mathbf{4 2}$ | $1,201,567$ |  |

## Part IV Carryover of Unallowed Expenses to 2020



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

Department of the Treasury Internal Revenue Service (99)
Name(s) of proprietor(s)

## Expenses for Business Use of Your Home

- File only with Schedule C (Form 1040 or 1040-SR). 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.


## Total Forms Filed $=3,126,581$

Part I Part of Your Home Used for Business
1 Area used regularly and exclusively for business, regularly for daycare, or for storage of inventory or product samples (see instructions)

1,082,201
2 Total area of home
3 Divide line 1 by line 2. Enter the result as a percentage
For daycare facilities not used exclusively for business, go to line 4. All others, go to line 7.

4 Multiply days used for daycare during year by hours used per day
5 If you started or stopped using your home for daycare during the year, see instructions; otherwise, enter 8,760
6 Divide line 4 by line 5. Enter the result as a decimal amount

| 4 |  |
| ---: | ---: |
| 5 |  |
| 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

8 Enter the amount from Schedule C, line 29, plus any gain derived from the business use of your home, 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 line 9 Casualty losses (see instructions)
10 Deductible mortgage interest (see instructions)
11 Real estate taxes (see instructions)
12 Add lines 9, 10, and 11
13 Multiply line 12, column (b), by line 7
14 Add line 12, column (a), and line 13
15 Subtract line 14 from line 8 . If zero or less, enter -0-
16 Excess mortgage interest (see instructions)
17 Excess real estate taxes (see instructions)
18 Insurance
19 Rent
20 Repairs and maintenance
21 Utilities
22 Other expenses (see instructions)
23 Add lines 16 through 22
24 Multiply line 23, column (b), by line 7
25 Carryover of prior year operating expenses (see instructions).
26 Add line 23, column (a), line 24, and line 25
27 Allowable operating expenses. Enter the smaller of line 15 or line 26
28 Limit on excess casualty losses and depreciation. Subtract line 27 from line 15
1,664,773
6,192,755

29 Excess casualty losses (see instructions)
30 Depreciation of your home from line 42 below
31 Carryover of prior year excess casualty losses and depreciation (see instructions)
32 Add lines 29 through 31
33 Allowable excess casualty losses and depreciation. Enter the smaller of line 28 or line 32
34 Add lines 14, 27, and 33
35 Casualty loss portion, if any, from lines 14 and 33. Carry amount to Form 4684 (see instructions) .
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

|  |  |  |
| :---: | :---: | :---: |
|  |  |  |

Part III Depreciation of Your Home
37 Enter the smaller of your home's adjusted basis or its fair market value (see instructions)
38 Value of land included on line 37
39 Basis of building. Subtract line 38 from line 37
40 Business basis of building. Multiply line 39 by line 7
41 Depreciation percentage (see instructions)
42 Depreciation allowable (see instructions). Multiply line 40 by line 41. Enter here and on line 30 above

| $\mathbf{3 7}$ | $376,989,785$ |  |
| :---: | :---: | :--- |
| $\mathbf{3 8}$ | $64,123,088$ |  |
| $\mathbf{3 9}$ | $312,866,698$ |  |
| $\mathbf{4 0}$ | $44,919,822$ |  |
| $\mathbf{4 1}$ | 42,306 | $\%$ |
|  | $\mathbf{4 2}$ | $1,184,172$ |

Part IV Carryover of Unallowed Expenses to 2020
43 Operating expenses. Subtract line 27 from line 26. If less than zero, enter -0-

| 43 | $5,472,018$ |
| :--- | :--- |
| 44 | 1,642304 |

44 Excess casualty losses and depreciation. Subtract line 33 from line 32. If less than zero, enter -0-
44
1,642,304


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

2 Maximum adoption credit per child. Enter \$14,080 (see instructions)
3 Did you file Form 8839 for a prior year for the same child?No. Enter -0-.Yes. See instructions for the amount to $\}$ enter.

4 Subtract line 3 from line 2

5 Qualified adoption expenses (see instructions) Caution: Your qualified adoption expenses may not be equal to the adoption expenses you paid in 2019.
6 Enter the smaller of line 4 or line 5
7 Enter modified adjusted gross income (see instructions)
8 Is line 7 more than \$211,160?
$\square$ No. Skip lines 8 and 9 , and enter -0 - on line 10 .Yes. Subtract \$211,160 from line 7

|  | Child 1 | Child 2 | Child 3 |
| :---: | :---: | :---: | :---: |
| 2 |  |  |  |
| 3 | 45,194 | 23,637 | 10,026 |
| 4 |  |  |  |
| 5 | 38,413 | 11,219 | 3,047 |
| 6 | 38,405 | 11,219 | 3,047 |
|  | - . . | 7 |  |
|  | . . | 8 |  |

9 Divide line 8 by $\$ 40,000$. Enter the result as a decimal (rounded to at least three places). Do not enter more than 1.000
10 Multiply each amount on line 6 by line 9 .
11 Subtract line 10 from line 6

| $\mathbf{1 0}$ |  |  |  |
| :---: | :---: | :---: | :---: |
| $\mathbf{1 1}$ | 37,161 | 11,215 | 3,045 |

12 Add the amounts on line 11 . . . . . . . . . . . . . . . . . . . . . . . . .
13 Credit carryforward, if any, from prior years. See your Adoption Credit Carryforward Worksheet in the 2018 Form 8839 instructions

| 12 | 38,169 |
| :---: | :---: |
| $\mathbf{1 3}$ | 72,877 |
| $\mathbf{1 4}$ | 94,958 |
| $\mathbf{1 5}$ | 63,531 |
|  |  |
|  |  |
| $\mathbf{1 6}$ | 63,531 |

For Paperwork Reduction Act Notice, see your tax return instructions.
Cat. No. 22843L

Department of the Treasury
Internal Revenue Service (99)
Qualified Adoption Expenses

Name(s) shown on return


Attachment
Sequence No. 38

Go to www.irs.gov/Form8839 for instructions and the latest information.
Your social security number
Total Forms Filed $=100,030$

## Part I

Information About Your Eligible Child or Children-You must complete this part. See instructions for details, including what to do if you need more space.

| 1 | (a) <br> Child's name |  | (b) <br> Child's year of birth | Check if child was- |  |  | (f) <br> Child's <br> identifying number | (g) <br> Check if adoption became final in 2019 or earlier |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | (c) born before | (d) a child | (e) <br> a |  |  |
| Child $1$ |  |  |  |  | $\square$ | $\square$ | $\square$ |  | $\square$ |
| $\begin{gathered} \text { Child } \\ 2 \end{gathered}$ |  |  |  |  |  |  |  |  |
| $\begin{gathered} \text { Child } \\ 3 \end{gathered}$ |  |  |  | $\square$ | $\square$ | $\square$ |  | $\square$ |

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

2 Maximum adoption credit per child. Enter \$14,080 (see instructions)
3 Did you file Form 8839 for a prior year for the same child?No. Enter -0-.Yes. See instructions for the amount to $\}$ enter.

4 Subtract line 3 from line 2
5 Qualified adoption expenses (see instructions) Caution: Your qualified adoption expenses may not be equal to the adoption expenses you paid in 2019.
6 Enter the smaller of line 4 or line 5
7 Enter modified adjusted gross income (see instructions)
8 Is line 7 more than $\$ 211,160$ ?No. Skip lines 8 and 9 , and enter -0- on line 10.Yes. Subtract \$211,160 from line 7


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
10 Multiply each amount on line 6 by line 9 .
11 Subtract line 10 from line 6

| $\mathbf{1 0}$ |  |  |  |
| :---: | :---: | :---: | :---: |
| $\mathbf{1 1}$ | 322,296 | 104,655 | 16,840 |

12 Add the amounts on line 11

| 9 | $\times$ |
| :---: | :---: |
| 12 |  |
| 13 | 444,566 |
| 14 | $1,653,367$ |
| 15 | 309,893 |
|  |  |
| 16 | 303,894 |

For Paperwork Reduction Act Notice, see your tax return instructions.
Cat. No. 22843L
Form 8839 (2019)

Part III Employer-Provided Adoption Benefits
17 Maximum exclusion per child. Enter \$14,080 (see instructions)
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.

19 Subtract line 18 from line 17
20 Employer-provided adoption benefits you received in 2019. This amount should be shown in box 12 of your 2019 Form(s) W-2 with code $\mathbf{T}$


21 Add the amounts on line 20 .


23 Enter modified adjusted gross income (from the worksheet in the instructions).
24 Is line 23 more than \$211,160?
No. Skip lines 24 and 25, and enter -0- on line 26.
$\square$ Yes. Subtract \$211,160 from line 23 .
25 Divide line 24 by \$40,000. Enter the result as a decimal (rounded to at least three places). Do not enter more than 1.000


26 Multiply each amount on line 22 by line 25 . . . .
27 Excluded benefits. Subtract line 26 from line 22 . .

| 26 |  |  |  |
| :--- | :--- | :--- | :--- |
| 27 |  |  |  |

28 Add the amounts on line 27

29 Taxable benefits. Is line 28 more than line 21?
$\square$ 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 8 of Form 1040-NR. On the dotted line next to line 1 of Form 1040 or 1040-SR or line 8 of Form 1040-NR, enter "AB."Yes. Subtract line 21 from line 28. Enter the result as a negative number. Reduce the total you would enter on line 1 of Form 1040 or $1040-$ SR or line 8 of Form 1040-NR by the amount on Form 8839, line 29. Enter the result on line 1 of Form 1040 or $1040-$ SR or line 8 of Form 1040-NR. Enter "SNE" on the dotted line next to the entry line.
You may be able to claim the adoption credit in Part II on the front of this form if any of the following apply.

- You paid adoption expenses in 2018, those expenses were not fully reimbursed by your employer or otherwise, and the adoption was not final by the end of 2018.
- The total adoption expenses you paid in 2019 were not fully reimbursed by your employer or otherwise, and the adoption became final in 2019 or earlier.
- You adopted a child with special needs and the adoption became final in 2019.
* Data not shown because of the small number of sample returns on which they are based.


## Part III Employer-Provided Adoption Benefits

17 Maximum exclusion per child. Enter \$14,080 (see instructions) .
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.

19 Subtract line 18 from line 17
20 Employer-provided adoption benefits you received in 2019. This amount should be shown in box 12 of your 2019 Form(s) W-2 with code T

|  | Child 1 | Child 2 | Child 3 |
| :---: | :--- | :--- | :--- |
| 17 |  |  |  |
|  |  |  |  |
| 18 |  |  |  |
| 19 |  |  |  |
| 20 |  |  |  |

21 Add the amounts on line 20 .


26 Multiply each amount on line 22 by line 25 . . . .
27 Excluded benefits. Subtract line 26 from line 22 . .

| 26 |  |  |  |
| :--- | :--- | :--- | :--- |
| 27 |  |  |  |

28 Add the amounts on line 27

29 Taxable benefits. Is line 28 more than line 21?
$\square$ 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 8 of Form 1040-NR. On the dotted line next to line 1 of Form 1040 or 1040-SR or line 8 of Form 1040-NR, enter "AB."Yes. Subtract line 21 from line 28. Enter the result as a negative number. Reduce the total you would enter on line 1 of Form 1040 or $1040-$ SR or line 8 of Form 1040-NR by the amount on Form 8839, line 29. Enter the result on line 1 of Form 1040 or $1040-$ SR or line 8 of Form 1040-NR. Enter "SNE" on the dotted line next to the entry line.
You may be able to claim the adoption credit in Part II on the front of this form if any of the following apply.

- You paid adoption expenses in 2018, those expenses were not fully reimbursed by your employer or otherwise, and the adoption was not final by the end of 2018.
- The total adoption expenses you paid in 2019 were not fully reimbursed by your employer or otherwise, and the adoption became final in 2019 or earlier.
- You adopted a child with special needs and the adoption became final in 2019.
* Data not shown because of the small number of sample returns on which they are based.

| $88 / 5$ | Credit for Employer Social Security and Medicare Taxes <br> Paid on Certain Employee Tips <br> - Attach to your tax return. <br> Go to www.irs.gov/Form8846 for the latest information. |  |  | OMB No. 1545-0123 |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |
| Department of the Treasury Internal Revenue Service |  |  |  | Attachment Sequence No. 98 |
| $\overline{\text { Name(s) shown on return }}$ | Total Forms Filed $=$ | 24,693 | Identifying number |  |

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

2 Tips not subject to the credit provisions (see instructions)
3 Creditable tips. Subtract line 2 from line 1

| $\mathbf{1}$ | 12,168 |
| :---: | :---: |
| $\mathbf{2}$ | 2,556 |
| $\mathbf{3}$ | 12,168 |
|  |  |
| $\mathbf{4}$ | 12.168 |
|  |  |
| $\mathbf{5}$ | 13,484 |

6 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


Note: Claim this credit only for employer social security and Medicare taxes paid by a food or beverage establishment where tipping is customary for providing food or beverages. See the instructions for line 1.


| 1 | Total employer contributions to your Archer MSA(s) for 2019 . . . . . . 1 7,000 |  |  |
| :---: | :---: | :---: | :---: |
| 2 | Archer MSA contributions you made for 2019, including those made from January 1, 2020, through April 15, 2020, that were for 2019. Don't include rollovers. See instructions | 2 | 10,426 |
| 3 | Limitation from the Line 3 Limitation Chart and Worksheet in the instructions | 3 | 6,450 |
| 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 | 5,791 |
| 5 | Archer MSA deduction. Enter the smallest of line 2, 3, or 4 here. Also include this amount on Schedule 1 (Form 1040 or 1040-SR), line 22, or Form 1040-NR, line 34. On the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22, or Form 1040-NR, line 34, enter "MSA" and the amount | 5 | * | Caution: If line 2 is more than line 5, you may have to pay an additional tax. See instructions.

## Part II Archer MSA Distributions

6a Total distributions you and your spouse received in 2019 from all Archer MSAs (see instructions) .
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 .
c Subtract line 6b from line 6a
7 Unreimbursed qualified medical expenses (see instructions)
8 Taxable Archer MSA distributions. Subtract line 7 from line 6c. If zero or less, enter -0 -. Also include this amount in the total on Schedule 1 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 21. On the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 8, enter "MSA" and the amount
9a If any of the distributions included on line 8 meet any of the Exceptions to the Additional 20\% Tax (see instructions), check here
b Additional $\mathbf{2 0 \%}$ 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 or $1040-S R$ ), line 8, or Form 1040-NR, line 60. Check box c on Schedule 2 (Form 1040 or 1040-SR), line 8, or box b on Form 1040-NR, line 60. Enter "MSA" and the amount on the line next to the box

| $\mathbf{6 a}$ | 8,126 |
| :---: | :---: |
| $\mathbf{6 b}$ |  |
| $\mathbf{6 c}$ | 7,982 |
| $\mathbf{7}$ | 6,935 |
|  |  |
| $\mathbf{8}$ | $*$ |
|  |  |
|  |  |
| $\mathbf{9 b}$ | $*$ |

Section B. Medicare Advantage MSA Distributions. If you are filing jointly and both you and your spouse received distributions in 2019 from a Medicare Advantage MSA, complete a separate Section B for each spouse. See instructions.

| 10 | Total distributions you received in 2019 from all Medicare Advantage MSAs (see instructions) | 10 | 4,531 |
| :---: | :---: | :---: | :---: |
| 11 | Unreimbursed qualified medical expenses (see instructions) | 11 | 5,236 |
| 12 | Taxable Medicare Advantage MSA distributions. Subtract line 11 from line 10. If zero or less, enter -0-. Also include this amount in the total on Schedule 1 (Form 1040 or 1040-SR), line 8, or Form $1040-N R$, line 21. On the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 8, enter "Med MSA" and the amount | 12 | * |
| 13a | If any of the distributions included on line 12 meet any of the Exceptions to the Additional 50\% Tax (see instructions), check here |  |  |
| b | Additional $\mathbf{5 0 \%}$ 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 2018. Also include this amount in the total on Schedule 2 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 60. Check box c on Schedule 2 (Form 1040 or 1040-SR), line 8, or box b on Form 1040-NR, line 60. Enter "Med MSA" and the amount on the line next to the box . | 13b | 0 |
| For Paperwork Reduction Act Notice, see your tax return instructions. |  |  | orm 885 |

[^18]Department of the Treasury Internal Revenue Service (99)
Name(s) shown on return

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.

| Part I | Archer MSA Contributions and Deductions. See instructions before completing this part. If you are filing jointly and both you and your spouse have high deductible health plans with self-only coverage, complete a separate Part I for each spouse. |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| T | Total employer contributions to your Archer MSA(s) for 2019 | 19,381 |  |  |
|  | Archer MSA contributions you made for 2019, including those made from January 1, 2020, through |  | 2 | 18,621 |
| 3 L | Limitation from the Line 3 Limitation Chart and Worksheet in the instructions 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.) |  | 3 | 16,651 |
|  |  |  | 4 | 480,03 |
|  | Archer MSA deduction. Enter the smallest of line 2, 3, or 4 here. Also include this amount on Schedule 1 (Form 1040 or 1040-SR), line 22, or Form 1040-NR, line 34. On the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22, or Form 1040-NR, line 34, enter "MSA" and the amount |  | 5 |  |

## Part II Archer MSA Distributions

6a Total distributions you and your spouse received in 2019 from all Archer MSAs (see instructions) .
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 .
c Subtract line 6b from line 6a
7 Unreimbursed qualified medical expenses (see instructions)
8 Taxable Archer MSA distributions. Subtract line 7 from line 6c. If zero or less, enter -0 -. Also include this amount in the total on Schedule 1 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 21. On the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 8, enter "MSA" and the amount
9a If any of the distributions included on line 8 meet any of the Exceptions to the Additional 20\% Tax (see instructions), check here
b Additional 20\% tax (see instructions). Enter 20\% (0.20) of the distributions included on line 8 that are subject to the additional 20\% tax. Also include this amount in the total on Schedule 2 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 60. Check box c on Schedule 2 (Form 1040 or 1040-SR), line 8, or box b on Form 1040-NR, line 60. Enter "MSA" and the amount on the line next to the box

| $\mathbf{6 a}$ | 25,249 |
| :---: | :---: |
| $\mathbf{6 b}$ |  |
| $\mathbf{6 c}$ | 25,187 |
| $\mathbf{7}$ | 23,917 |
|  |  |
| $\mathbf{8}$ | $*$ |
|  |  |
|  |  |
| $\mathbf{9 b}$ | $*$ |

Section B. Medicare Advantage MSA Distributions. If you are filing jointly and both you and your spouse received distributions in 2019 from a Medicare Advantage MSA, complete a separate Section B for each spouse. See instructions.


| 10 | 21,628 |
| :---: | :---: |
| 11 | 23,702 |
|  |  |
| 12 | $*$ |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| $13 b$ | 0 |

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


| Form 8853 (2019) |  |  |  | Attachment Sequ | nce |  | Page 2 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Name of policyholder (as shown on return) ${ }^{\text {Soc }}$ |  |  | Social security number of policyholder |  |  |  |  |
| Section C. Long-Term Care (LTC) Insurance Contracts. See Filing Requirements for Section C in the instructions before completing this section. |  |  |  |  |  |  |  |
| If more than one Section C is attached, check here . . . . . . . . . . . . . . . . . . . . . . $\square$ |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| 15 In 2019, did anyone other than you receive payments on a per diem or other periodic basis under a qualified LTC insurance contract covering the insured or receive accelerated death benefits under a life insurance policy covering the insured? |  |  |  |  |  |  |  |
| 16 | Note: If "Yes" and the only payments you received in 2019 were accelerated death benefits that were paid to you because the insured was terminally ill, skip lines 17 through 25 and enter $-0-$ on line 26. |  |  |  |  |  |  |
| 17 | Gross LTC payments received on a per diem or other periodic basis. Enter the total of the amounts from box 1 of all Forms 1099-LTC you received with respect to the insured on which the "Per diem" box in box 3 is checked |  |  |  |  |  |  |
|  | Caution: Don't use lines 18 through 26 to figure the taxable amount of benefits paid under an LTC insurance contract that isn't a qualified LTC insurance contract. Instead, if the benefits aren't excludable from your income (for example, if the benefits aren't paid for personal injuries or sickness through accident or health insurance), report the amount not excludable as income on Schedule 1 (Form 1040 or 1040-SR), line 8. |  |  |  |  |  |  |
|  | Enter the part of the amount on line 17 that is from qualified LTC insurance contracts |  |  |  |  |  |  |
|  | Accelerated death benefits received on a per diem or other periodic basis. Don't include any amounts you received because the insured was terminally ill. See instructions |  |  |  | 19 |  |  |
| 20 | Add lines 18 and 19 |  |  |  | 20 |  |  |
|  | Note: If you checked "Yes" on line 15 above, see Multiple Payees in the instructions before completing lines 21 through 25. |  |  |  |  |  |  |
|  | Multiply $\$ 370$ by the number of days in the LTC period Costs incurred for qualified LTC services provided for the insured during the LTC period (see instructions) |  | 21 | 7,110,026 |  |  |  |
|  |  |  | 22 | 3,911,509 |  |  |  |
| $\begin{aligned} & 23 \\ & 24 \end{aligned}$ | Enter the larger of line 21 or line 22 <br> Reimbursements for qualified LTC services provided for the insured during the |  | 23 | 8,837,482 |  |  |  |
|  |  |  | 24 | 2,163,908 |  |  |  |
|  | Caution: If you received any reimbursements from LTC contracts issued before August 1, 1996, see instructions. |  |  |  |  |  |  |
| 25 | Per diem limitation. Subtract line 24 from line 23 . . . . . . . . . . |  |  |  | 25 | 7,232,433 |  |
| 26 | Taxable payments. Subtract line 25 from line 20. If zero or less, enter -0 - Also include this amount in the total on Schedule 1 (Form 1040 or 1040-SR), line 8. On the dotted line next to Schedule 1 (Form |  |  |  | 26 |  |  |
| * Data not shown because of the small number of sample returns on which they are based. $\quad$ Form 8853 (2019) |  |  |  |  |  |  |  |




## Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

## Part III Student and Educational Institution Information. See instructions.

20 Student name (as shown on page 1 of your tax return)

21 Student social security number (as shown on page 1 of your tax return)

22 Educational institution information (see instructions)
a. Name of first educational institution
(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
(2) Did the student receive Form 1098-T from this institution for 2019?
(3) Did the student receive Form 1098-T from this institution for 2018 with box $\square$
$\square$ 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.
b. Name of second educational institution (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.
(2) Did the student receive Form 1098-T from this institution for 2019?
(3) Did the student receive Form 1098-T from this institution for 2018 with box $\square$ Yes $\square$ No 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.
$\qquad$
23 Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2019?
__ -

24 Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2019 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or leading towards a postsecondary degree, certificate, or
other recognized postsecondary educational credential? See instructions.

25 Did the student complete the first 4 years of postsecondary education before 2019? See instructions.

26 Was the student convicted, before the end of 2019, of a felony for possession or distribution of a controlled substance?

## Yes - Stop!

Go to line 31 for this student. $\square$ No - Go to line 24 .

Yes - Stop!
Go to line 31 for this $\quad \square$ No - Go to line 26. student.

Yes - Stop!
Go to line 31 for this student.

Yes - Go to line $25 . \quad \square \begin{aligned} & \text { No - Stop! Go } \\ & \text { for this student. }\end{aligned}$

No - Stop! Go to line 31

You can't take the American opportunity credit and the lifetime learning credit for the same student in the same year. If you complete lines 27 through 30 for this student, don't complete line 31.

## American Opportunity Credit

27 Adjusted qualified education expenses (see instructions). Don't enter more than \$4,000 .
28 Subtract \$2,000 from line 27. If zero or less, enter -0-.
29 Multiply line 28 by $25 \%$ ( 0.25 )
30 If line 28 is zero, enter the amount from line 27. Otherwise, add $\$ 2,000$ to the amount on line 29 and enter the result. Skip line 31. Include the total of all amounts from all Parts III, line 30, on Part I, line 1.

| $7,017,605$ |  |  |
| :---: | :---: | :---: |
| $\mathbf{2 7}$ | 504,018 | 27,256 |
| $\mathbf{2 8}$ |  |  |
| $\mathbf{2 9}$ |  |  |
| $7,017,605$ |  | 27,256 |
|  | $\mathbf{3 0}$ | 504,018 |
|  | $*$ |  |

## Lifetime Learning Credit

31 Adjusted qualified education expenses (see instructions). Include the total of all amounts from all Parts III, line 31, on Part II, line 10

|  | $2,294,603$ | $*$ |  |
| :---: | :---: | :---: | :---: |
| 31 | 39,686 | 0 |  |
| Form $\mathbf{8 8 6 3}(2019)$ |  |  |  |

[^19]
## Complete Part III for each student for whom you're claiming either the American opportunity credit or lifetime learning credit. Use additional copies of page 2 as needed for each student.

## Part III

Student and Educational Institution Information. See instructions.
20 Student name (as shown on page 1 of your tax return)
21 Student social security number (as shown on page 1 of your tax return)

22 Educational institution information (see instructions)
a. Name of first educational institution
(1) Address. Number and street (or P.O. box). City, town or post office, state, and ZIP code. If a foreign address, see instructions.
(2) Did the student receive Form 1098-T from this institution for 2019?
(3) Did the student receive Form 1098-T from this institution for 2018 with box $\square$ Yes $\square$ No 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.

23 Has the Hope Scholarship Credit or American opportunity credit been claimed for this student for any 4 tax years before 2019?
24 Was the student enrolled at least half-time for at least one academic period that began or is treated as having begun in 2019 at an eligible educational institution in a program leading towards a postsecondary degree, certificate, or other recognized postsecondary educational credential? See instructions.

25 Did the student complete the first 4 years of postsecondary education before 2019? See instructions.
b. Name of second educational institution (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.
(2) Did the student receive Form 1098-T from this institution for 2019?
(3) Did the student receive Form 1098-T from this institution for 2018 with box $\square$ Yes $\square$ No 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.
$\qquad$

Yes - Stop!
Go to line 31 for this student. $\square$ No - Go to line 24.

26 Was the student convicted, before the end of 2019, of a felony for possession or distribution of a controlled substance?

Yes - Stop!
Go to line 31 for this $\quad \square$ No - Go to line 26. student.

No - Stop! Go to line 31 for this student.

You can't take the American opportunity credit and the lifetime learning credit for the same student in the same year. If you complete lines 27 through 30 for this student, don't complete line 31.

Yes - Stop!
Go to line 31 for this student.

No - Complete lines 27 through 30 for this student.

## American Opportunity Credit

27 Adjusted qualified education expenses (see instructions). Don't enter more than \$4,000 .
28 Subtract \$2,000 from line 27. If zero or less, enter -0-.
29 Multiply line 28 by 25\% (0.25)
30 If line 28 is zero, enter the amount from line 27. Otherwise, add $\$ 2,000$ to the amount on line 29 and enter the result. Skip line 31. Include the total of all amounts from all Parts III, line 30, on Part I, line 1.

| 21,476,356 |  | 80,837 |
| :---: | :---: | :---: |
| 27 | 1,634,640 | * |
| 28 |  |  |
| 29 |  |  |
|  | 4,651,528 | 58,412 |
|  | 1,102,139 |  |

## Lifetime Learning Credit

31 Adjusted qualified education expenses (see instructions). Include the total of all amounts from all Parts III, line 31, on Part II, line 10

| 17,628,511 |  |  |
| :---: | :---: | :---: |
| 31 | 152,003 | 0 |
| Form 8863 (2019) |  |  |

[^20]| 8880 | Credit for Qualified Retirement Savings Contributions <br> Attach to Form 1040, 1040-SR, or 1040-NR. <br> Go to www.irs.gov/Form8880 for the latest information. |  | OMB No. 1545-0074 |
| :---: | :---: | :---: | :---: |
| Form 0080 <br> Department of the Treasury Internal Revenue Service |  |  |  |
| Name(s) shown on return | Total Forms Filed $=$ | 9,708,336 | al security number |

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

- The amount on Form 1040 or 1040-SR, line 8b; or Form 1040-NR, line 35, is more than $\$ 32,000$ ( $\$ 48,000$ if head of household; \$64,000 if married filing jointly).
- The person(s) who made the qualified contribution or elective deferral (a) was born after January 1, 2002; (b) is claimed as a dependent on someone else's 2019 tax return; or (c) was a student (see instructions).

1 Traditional and Roth IRA contributions, and ABLE account contributions by the designated beneficiary for 2019. Do not include rollover contributions
2 Elective deferrals to a 401(k) or other qualified employer plan, voluntary employee contributions, and 501(c)(18)(D) plan contributions for 2019 (see instructions)
3 Add lines 1 and 2
4 Certain distributions received after 2016 and before the due date (including extensions) of your 2019 tax return (see instructions). If married filing jointly, include both spouses' amounts in both columns. See instructions for an exception .
5 Subtract line 4 from line 3. If zero or less, enter -0-
6 In each column, enter the smaller of line 5 or \$2,000

| (a) You |  |  | (b) Your spouse |
| :---: | :---: | :---: | :---: |
| 1 | 694,421 |  | 195,321 |
| 2 | 8,502,802 |  | 1,073,575 |
| 3 | 8,901,829 |  | 1,216,893 |
| 4 | 341,796 |  | 143,400 |
| 5 | 8,880,449 |  | 1,204,835 |
| 6 | 8,898,955 |  | 1,208,783 |
| $9,690,686$ |  | 7 | 9,690,686 |
|  |  |  |  |

9 Enter the applicable decimal amount from the table below.

| If line 8 is- |  | And your filing status is- |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Over- | But not <br> over- | Married <br> filing jointly <br> Enter on line 9- | Head of <br> household | Single, Married filing <br> separately, or <br> Qualifying widow(er) |
| --- | $\$ 19,250$ | 0.5 | 0.5 | 0.5 |
| $\$ 19,250$ | $\$ 20,750$ | 0.5 | 0.5 | 0.2 |
| $\$ 20,750$ | $\$ 28,875$ | 0.5 | 0.5 | 0.1 |
| $\$ 28,875$ | $\$ 31,125$ | 0.5 | 0.2 | 0.1 |
| $\$ 31,125$ | $\$ 32,000$ | 0.5 | 0.1 | 0.1 |
| $\$ 32,000$ | $\$ 38,500$ | 0.5 | 0.1 | 0.0 |
| $\$ 38,500$ | $\$ 41,500$ | 0.2 | 0.1 | 0.0 |
| $\$ 41,500$ | $\$ 48,000$ | 0.1 | 0.1 | 0.0 |
| $\$ 48,000$ | $\$ 64,000$ | 0.1 | 0.0 | 0.0 |
| $\$ 64,000$ | --- | 0.0 | 0.0 | 0.0 |

Note: If line 9 is zero, stop; you can't take this credit. Multiply line 7 by line 9
Limitation based on tax liability. Enter the amount from the Credit Limit Worksheet in the instructions Credit for qualified retirement savings contributions. Enter the smaller of line 10 or line 11 here and on Schedule 3 (Form 1040 or 1040-SR), line 4; or Form 1040-NR, line 48

| 10 | $9,669,687$ |
| :---: | :---: |
| $\mathbf{1 1}$ | $9,650,284$ |
| $\mathbf{1 2}$ | $9,629,285$ |

* 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.


1 Traditional and Roth IRA contributions, and ABLE account contributions by the designated beneficiary for 2019. Do not include rollover contributions
2 Elective deferrals to a 401(k) or other qualified employer plan, voluntary employee contributions, and 501(c)(18)(D) plan contributions for 2019 (see instructions)
3 Add lines 1 and 2
4 Certain distributions received after 2016 and before the due date (including extensions) of your 2019 tax return (see instructions). If married filing jointly, include both spouses' amounts in both columns. See instructions for an exception .
5 Subtract line 4 from line 3 . If zero or less, enter -0-
6 In each column, enter the smaller of line 5 or \$2,000

|  | (a) You | (b) Your spouse |
| :---: | :---: | :---: |
| $\mathbf{1}$ | $2,383,400$ | 778,656 |
| $\mathbf{2}$ | $14,778,177$ | $2,268,428$ |
| $\mathbf{3}$ | $17,161,577$ | $3,047,084$ |
|  |  |  |
| $\mathbf{4}$ | 685,630 | 390,868 |
| $\mathbf{5}$ | $16,829,617$ | $2,905,923$ |
| $\mathbf{6}$ | $10,520,859$ | $1,580,007$ |

7 Add the amounts on line 6. If zero, stop; you can't take this credit
8 Enter the amount from Form 1040 or 1040-SR, line 8b;* or Form 1040-NR, line 35


9 Enter the applicable decimal amount from the table below.

| If line 8 is- |  | And your filing status is- |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Over- | But not <br> over- | Married <br> filing jointly <br> Enter on line 9- | Head of <br> household | Single, Married filing <br> separately, or <br> Qualifying widow(er) |
| --- | $\$ 19,250$ | 0.5 | 0.5 | 0.5 |
| $\$ 19,250$ | $\$ 20,750$ | 0.5 | 0.5 | 0.2 |
| $\$ 20,750$ | $\$ 28,875$ | 0.5 | 0.5 | 0.1 |
| $\$ 28,875$ | $\$ 31,125$ | 0.5 | 0.2 | 0.1 |
| $\$ 31,125$ | $\$ 32,000$ | 0.5 | 0.1 | 0.1 |
| $\$ 32,000$ | $\$ 38,500$ | 0.5 | 0.1 | 0.0 |
| $\$ 38,500$ | $\$ 41,500$ | 0.2 | 0.1 | 0.0 |
| $\$ 41,500$ | $\$ 48,000$ | 0.1 | 0.1 | 0.0 |
| $\$ 48,000$ | $\$ 64,000$ | --- | 0.1 | 0.0 |
| $\$ 64,000$ | -2 | 0.0 | 0.0 |  |

Note: If line 9 is zero, stop; you can't take this credit.
10 Multiply line 7 by line 9

| $\mathbf{1 0}$ | $2,166,576$ |
| :---: | :---: |
| $\mathbf{1 1}$ | $16,247,275$ |
| $\mathbf{1 2}$ | $1,836,811$ |

* 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.

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

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

Total Forms Filed $=\quad 14,414,454$ | Social security number of HSA |
| :--- |
| beneficiary. If both spouses have |
| HSAs see instructions |

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.
Part I HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse.

1 Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2019 (see instructions)

| $\square$ Self-only $\square$ Family |
| :--- |
|  |
| 2 |

3 If you were under age 55 at the end of 2019 and, on the first day of every month during 2019, you were, or were considered, an eligible individual with the same coverage, enter \$3,500 (\$7,000 for family coverage). All others, see the instructions for the amount to enter
4 Enter the amount you and your employer contributed to your Archer MSAs for 2019 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2019, also include any amount contributed to your spouse's Archer MSAs
5 Subtract line 4 from line 3. If zero or less, enter -0-
. . . . . . . . . . . . .
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 2019, see the instructions for the amount to enter
7 If you were age 55 or older at the end of 2019, married, and you or your spouse had family coverage under an HDHP at any time during 2019, enter your additional contribution amount (see instructions)
8 Add lines 6 and 7
9 Employer contributions made to your HSAs for 2019
10 Qualified HSA funding distributions
11 Add lines 9 and 10
Subtract line 11 from line 8 . If zero or less, enter -0- . . . . . . . . . . . . . . . . .
13 HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040 or 1040-SR), line 12, or Form 1040-NR, line 25
Caution: If line 2 is more than line 13, you may have to pay an additional tax (see instructions).
Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.
14a Total distributions you received in 2019 from all HSAs (see instructions)
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)
c Subtract line 14b from line 14a.
15 Qualified medical expenses paid using HSA distributions (see instructions)
16 Taxable HSA distributions. Subtract line 15 from line 14 c . If zero or less, enter $-0-$. Also, include this amount in the total on Schedule 1 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 21. Enter "HSA" and the amount on the line next to the box
17a If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20\% Tax (see instructions), check here
b Additional 20\% tax (see instructions). Enter 20\% (0.20) of the distributions included on line 16 that are subject to the additional 20\% tax. Also include this amount in the total on Schedule 2 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 60. Check box c on Schedule 2 (Form 1040 or 1040-SR), line 8, or box b on Form 1040-NR, line 60. Enter "HSA" and the amount on the line next to the box
For Paperwork Reduction Act Notice, see your tax return instructions.
Cat. No. 37621P

| $\mathbf{1 4 a}$ | $8,641,719$ |
| :---: | :---: |
| $\mathbf{1 4 b}$ | 89,351 |
| $\mathbf{1 4 c}$ | $8,605,990$ |
| $\mathbf{1 5}$ | $8,345,055$ |
|  |  |
| 16 | 382,169 |
|  |  |
|  |  |
| $\mathbf{1 7 b}$ | 251,964 |

Form 8889 (2019)


Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.
14a Total distributions you received in 2019 from all HSAs (see instructions)
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)
c Subtract line 14b from line 14a.
15 Qualified medical expenses paid using HSA distributions (see instructions)
16 Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter $-0-$. Also, include this amount in the total on Schedule 1 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 21. Enter "HSA" and the amount on the line next to the box

| 14a | $21,599,116$ |
| :---: | :---: |
|  |  |
| $\mathbf{1 4 b}$ | 227,455 |
| $\mathbf{1 4 c}$ | $21,371,662$ |
| 15 | $20,852,869$ |
|  |  |
| 16 | 518,792 |
|  |  |
|  |  |
| $17 b$ | 71,640 |

For Paperwork Reduction Act Notice, see your tax return instructions.
Cat. No. 37621P

Part III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse.

| 18 | Last-month rule | 18 | 7,914 |
| :---: | :---: | :---: | :---: |
| 19 | Qualified HSA funding distribution . | 19 | * |
| 20 | Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 21. On the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 21, enter "HSA" and the amount | 20 | 10,230 |
| 21 | Additional tax. Multiply line 20 by $10 \%$ ( 0.10 ). Include this amount in the total on Schedule 2 (Form 1040 or $1040-\mathrm{SR}$ ), line 8 , or Form 1040-NR, line 60 . Check box c on Schedule 2 (Form 1040 or $1040-\mathrm{SR}$ ), line 8 , or box b on Form 1040-NR, line 60. Enter "HDHP" and the amount on the line next to the box . | 21 | 10,230 |

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

Part III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse.

| 18 | Last-month rule | 18 | 4,201 |
| :---: | :---: | :---: | :---: |
| 19 | Qualified HSA funding distribution | 19 | * |
| 20 | Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 21. On the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 8, or Form 1040-NR, line 21, enter "HSA" and the amount | 20 | 6,867 |
| 21 | Additional tax. Multiply line 20 by $10 \%$ ( 0.10 ). Include this amount in the total on Schedule 2 (Form 1040 or $1040-\mathrm{SR}$ ), line 8 , or Form 1040-NR, line 60 . Check box c on Schedule 2 (Form 1040 or 1040-SR), line 8, or box b on Form 1040-NR, line 60. Enter "HDHP" and the amount on the line next to the box | 21 | 688 |
| * Da | not shown because of the small number of sample returns on which they are based. |  | Form 888 |

- Attach to your tax return.

Go to www.irs.gov/Form8903 for instructions and the latest information.
Attachment Sequence No. 143

58,311
dentifying number
(b) production activities. Enter amounts for all activities in column (b), including oil-related production activities.
1 Domestic production gross receipts (DPGR)
2 Allocable cost of goods sold. If you are using the small business simplified overall method, skip lines 2 and 3
3 Enter deductions and losses allocable to DPGR (see instructions)
4 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.
5 Add lines 2 through 4
6 Subtract line 5 from line 1
7 Qualified production activities income from estates, trusts, and certain partnerships and S corporations (see instructions)
8 Add lines 6 and 7. Estates and trusts, go to line 9. All others, skip line 9 and go to line 10
9 Amount allocated to beneficiaries of the estate or trust (see instructions)
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 .
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
11 Income limitation (see instructions):

- Individuals, estates, and trusts. Enter your adjusted gross income figured without the domestic production activities deduction
- All others. Enter your taxable income figured without the domestic production activities deduction (tax-exempt organizations, see instructions)
12 Enter the smaller of line 10 b or line 11. If zero or less, enter -0 - here; skip lines 13 through 21, and enter -0- on line 22
13 Enter $9 \%$ of line 12
14a Enter the smaller of line 10a or line 12
b Reduction for oil-related qualified production activities income. Multiply line 14a by 3\%
15 Subtract line 14b from line 13
16 Form W-2 wages (see instructions)
17 Form W-2 wages from estates, trusts, and certain partnerships and $S$ corporations (see instructions)
18 Add lines 16 and 17. Estates and trusts, go to line 19. All others, skip line 19 and go to line 20
19 Amount allocated to beneficiaries of the estate or trust (see instructions)
20 Estates and trusts, subtract line 19 from line 18. All others, enter amount from line 18
21 Form W-2 wage limitation. Enter 50\% of line 20.
22 Enter the smaller of line 15 or line 21.
23 Domestic production activities deduction from cooperatives. Enter deduction from Form 1099-PATR, box 6
24 Expanded affiliated group allocation (see instructions).
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).
For Paperwork Reduction Act Notice, see separate instructions.
Cat. No. 37712F

All activities

8903
(Rev. December 2018) Department of the Treasury Internal Revenue Service
Name(s) as shown on return

Note: Do not complete column (a), unless you have oil-related production activities. Enter amounts for all activities in column (b), including oil-related production activities.
1 Domestic production gross receipts (DPGR)
2 Allocable cost of goods sold. If you are using the small business simplified overall method, skip lines 2 and 3
3 Enter deductions and losses allocable to DPGR (see instructions)
4 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.
5 Add lines 2 through 4
6 Subtract line 5 from line 1
7 Qualified production activities income from estates, trusts, and certain partnerships and S corporations (see instructions)
8 Add lines 6 and 7. Estates and trusts, go to line 9. All others, skip line 9 and go to line 10
9 Amount allocated to beneficiaries of the estate or trust (see instructions)
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 .
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
11 Income limitation (see instructions):

- Individuals, estates, and trusts. Enter your adjusted gross income figured without the domestic production activities deduction
- All others. Enter your taxable income figured without the domestic production activities deduction (tax-exempt organizations, see instructions)
12 Enter the smaller of line 10b or line 11. If zero or less, enter -0 - here; skip lines 13 through 21, and enter -0 - on line 22
13 Enter $9 \%$ of line 12
14a Enter the smaller of line 10a or line 12
b Reduction for oil-related qualified production activities income. Multiply line 14a by 3\%
15 Subtract line 14b from line 13.
16 Form W-2 wages (see instructions)
17 Form W-2 wages from estates, trusts, and certain partnerships and S corporations (see instructions)
18 Add lines 16 and 17. Estates and trusts, go to line 19. All others, skip line 19 and go to line 20
19 Amount allocated to beneficiaries of the estate or trust (see instructions)
20 Estates and trusts, subtract line 19 from line 18. All others, enter amount from line 18
21 Form W -2 wage limitation. Enter $50 \%$ of line 20.
22 Enter the smaller of line 15 or line 21.
23 Domestic production activities deduction from cooperatives. Enter deduction from Form 1099-PATR, box 6
24 Expanded affiliated group allocation (see instructions).
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).

| (a) | (b) |
| :---: | :---: |
| Oil-related production activities | All activities |

Oil-related production activities

| $\mathbf{1}$ | 33,690 |  | $2,285,415$ |  |
| :---: | :---: | :---: | :---: | :---: |
| $\mathbf{2}$ | 7,937 |  | $1,265,946$ |  |
| $\mathbf{3}$ | 13,373 |  | 311,001 |  |
|  |  |  |  |  |
| $\mathbf{4}$ | $*$ |  | $*$ |  |
| $\mathbf{5}$ | 21,907 |  | $1,757,984$ |  |
| $\mathbf{6}$ | 11,783 |  | 527,432 |  |
| $\mathbf{7}$ | $*$ |  | 276,832 |  |
| $\mathbf{8}$ |  |  |  |  |
| $\mathbf{9}$ |  |  |  |  |
|  |  |  |  |  |
| $\mathbf{1 0 a}$ | 11,877 |  |  |  |
|  |  |  |  |  |
| $\mathbf{1 0 b}$ |  |  |  |  |

- Attach to your tax return.
- Go to www.irs.gov/Form8910 for instructions and the latest information.
Total Forms Filed $=17,950$

Identifying number

## Note:

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


## Part I Tentative Credit

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

|  |  |  |
| :---: | :---: | :---: |
|  |  |  |
| $\mathbf{1}$ |  |  |
| $\mathbf{2}$ |  |  |
| $\mathbf{3}$ |  |  |
| $\mathbf{4}$ | 17,949 | $*$ |

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

## Part I| Credit for Business/Investment Use Part of Vehicle



## Part III Credit for Personal Use Part of Vehicle

10 If you skipped Part II, enter the amount from line 4. If you completed Part II, subtract line 6 from line 4
10

11 Add columns (a) and (b) on line 10
12 Enter the amount from Form 1040 or 1040-SR, line 12b (or Form 1040-NR, line 45)
13 Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)
14 Subtract line 13 from line 12. If zero or less, enter -0- and stop here. You cannot claim the personal use part of the credit
15 Personal use part of credit. Enter the smaller of line 11 or line 14 here and on Schedule 3 (Form 1040 or $1040-S R$ ), line 6 (or Form 1040-NR, line 51). Check box con that line and enter " 8910 " in the space next to that box. If line 14 is smaller than line 11, see instructions

|  |  |  |
| :--- | :--- | :--- |
| $\mathbf{1 1}$ | 16,899 |  |
| $\mathbf{1 2}$ |  |  |
| $\mathbf{1 3}$ | 6,775 |  |
| $\mathbf{1 4}$ | 17,942 |  |
|  |  |  |
|  | 15 | 16,898 |

For Paperwork Reduction Act Notice, see separate instructions.
Cat. No. 37720F
Form 8910 (2019)

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

Fem 8910
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.

Total Forms Filed $=17,950$
Identifying number

## Note:

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


## Part I Tentative Credit

Use a separate column for each vehicle. If you need more columns, use additional Forms 8910 and include the totals on lines 7 and 11.

1 Year, make, and model of vehicle
2 Vehicle identification number (see instructions)
3 Enter date vehicle was placed in service (MM/DD/YYYY)
4 Tentative credit (see instructions for amount to enter)

|  |  |  |
| :--- | :--- | :--- | :--- |
| $\mathbf{1}$ |  |  |
| $\mathbf{2}$ |  |  |
| $\mathbf{3}$ |  |  |
| $\mathbf{4}$ | 53,597 |  |

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

## Part I| Credit for Business/Investment Use Part of Vehicle

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

| 5 |  | \% |  | \% |
| :---: | :---: | :---: | :---: | :---: |
| 6 |  |  |  |  |
| ions (see instructions) nerships and S corporations, this amount on Form 3800, |  | 7 | 1,849 |  |
|  |  | 8 | * |  |
|  |  | 9 | 1,870 |  |

Part III Credit for Personal Use Part of Vehicle
10 If you skipped Part II, enter the amount from line 4. If you completed Part II, subtract line 6 from line 4 $\qquad$
11 Add columns (a) and (b) on line 10
12 Enter the amount from Form 1040 or 1040-SR, line 12b (or Form 1040-NR, line 45)
13 Personal credits from Form 1040, 1040-SR, or 1040-NR (see instructions)
14 Subtract line 13 from line 12. If zero or less, enter -0- and stop here. You cannot claim the personal use part of the credit
10

15 Personal use part of credit. Enter the smaller of line 11 or line 14 here and on Schedule 3 (Form 1040 or $1040-S R$ ), line 6 (or Form 1040-NR, line 51). Check box con that line and enter " 8910 " in the space next to that box. If line 14 is smaller than line 11 , see instructions

| 11 | 51,834 |
| :--- | :--- |
| $\mathbf{1 2}$ |  |
| $\mathbf{1 3}$ | 9,589 |
| $\mathbf{1 4}$ | 558,886 |

15

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




# Tuition and Fees Deduction 

Attach to Form 1040 or 1040-SR.

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

Attachment Sequence No. 60

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:

$\checkmark$ To see if you qualify for this deduction, see Who Can Take the Deduction in the instructions below.
$\checkmark$ 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 name (as shown on page 1 of your tax return)

First name

## \section*{Fir} <br> -

2 Add the amounts on line 1, column (c), and
Enter the amount from your "total income" line of Form 1040 or 1040-SR

4 - For 2018: Enter the total of the amounts on your 2018 Schedule 1 (Form 1040), lines 23 through 33, plus any write-in adjustments you entered on the dotted line next to Schedule 1 (Form 1040), line 36.

- For 2019 and 2020: Enter the total of the amounts on your 2019 Schedule 1 (Form 1040 or 1040-SR), lines 10 through 20, plus any write-in adjustments you entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22.
- For later years: See www.irs.gov/Form8917 to find out if the line references above for 2019 have changed

| 3 |  |  |
| :--- | :--- | :--- |
|  |  |  |
|  |  |  |
| 4 |  |  |
|  |  |  |

5 Subtract line 4 from line 3.* If the result is more than $\$ 80,000$ ( $\$ 160,000$ if married filing jointly), stop; you can't take the deduction for tuition and fees
*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 deduction. Is the amount on line 5 more than $\$ 65,000(\$ 130,000$ if married filing jointly)?
$\square$ Yes. Enter the smaller of line 2, or \$2,000.
$\square$ No. Enter the smaller of line 2, or $\$ 4,000$. $\square$
(b)
n
(b) Student's social security umber (as shown on page

- $\quad 1$

(c) Adjusted qualified expenses (see instructions) | $1,286,956$ |  |
| :---: | :--- |
| $\mathbf{1 8 , 4 6 0}$ |  |

8917
Department of the Treasury Internal Revenue Service
Name(s) shown on return

## Tuition and Fees Deduction

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

Attachment Sequence No. 60

| Total Forms Filed $=\quad 1,294,251$ | 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:

$\checkmark$ To see if you qualify for this deduction, see Who Can Take the Deduction in the instructions below.
$\checkmark$ 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 name (as shown on page 1 of your tax return)

First name

2 Add the amounts on line 1, column (c), and enter the total.
3 Enter the amount from your "total income" line of Form 1040 or 1040-SR

4 - For 2018: Enter the total of the amounts on your 2018 Schedule 1 (Form 1040), lines 23 through 33, plus any write-in adjustments you entered on the dotted line next to Schedule 1 (Form 1040), line 36.

- For 2019 and 2020: Enter the total of the amounts on your 2019 Schedule 1 (Form 1040 or 1040-SR), lines 10 through 20, plus any write-in adjustments you entered on the dotted line next to Schedule 1 (Form 1040 or 1040-SR), line 22.
- For later years: See www.irs.gov/Form8917 to find out if the line references above for 2019 have changed

| 3 |  |
| :--- | :--- |
|  |  |
|  |  |
| 4 |  |

5 Subtract line 4 from line 3.* If the result is more than $\$ 80,000$ ( $\$ 160,000$ if married filing jointly), stop; you can't take the deduction for tuition and fees
*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 deduction. Is the amount on line 5 more than \$65,000 (\$130,000 if married filing jointly)?

Yes. Enter the smaller of line 2, or $\$ 2,000$.No. Enter the smaller of line 2, or $\$ 4,000$.

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.

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) $\rightarrow$ Attach to your tax return.

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

Total Forms Filed $=167,136$
Identifying numbe

## Note:

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


## Part I Tentative Credit

| Use a separate column for each vehicle. If you need more columns, use additional Forms 8936 and include the totals on lines 12 and 19. |  | (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 | \% | \% |
| c Tentative credit. Multiply line 4a by line 4b | 4c |  |  |

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

## Part II Credit for Business/Investment Use Part of Vehicle

5 Business/investment use percentage (see instructions)

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

7 Section 179 expense deduction (see instructions)
8 Subtract line 7 from line 6
9 Multiply line 8 by $10 \%$ ( 0.10 )
10 Maximum credit per vehicle

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

| 5 |  | \% |  | \% |
| :---: | :---: | :---: | :---: | :---: |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  | 2,500 |  | 2,500 |
| 11 |  |  |  |  |
| - $\cdot$ | - . . . . . . . . | 12 | 7,101 |  |
| partnerships and S corporations |  | 13 | 1,281 |  |
| 12 and 13. Partnerships and hedule K. All others, report this |  | 14 | 8,382 |  |

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

Department of the Treasury Internal Revenue Service

## Qualified Plug-in Electric Drive Motor Vehicle Credit

 (Including Qualified Two-Wheeled Plug-in Electric Vehicles) - Attach to your tax return.- Go to www.irs.gov/Form8936 for instructions and the latest information.

Attachment Sequence No. 125 Name(s) shown on return Total Forms Filed $=167,136$

## Note:

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


## Part I Tentative Credit

Use a separate column for each vehicle. If you need more columns, use additional Forms 8936 and include the totals on lines 12 and 19.

1 Year, make, and model of vehicle
2 Vehicle identification number (see instructions)
3 Enter date vehicle was placed in service (MM/DD/YYYY)

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
b Phase-out percentage (see instructions).
c Tentative credit. Multiply line 4a by line 4b

| 19. | (a) Vehicle 1 | (b) Vehicle 2 |
| :---: | :---: | :---: |
| $\mathbf{1}$ |  |  |
| $\mathbf{2}$ |  |  |
| $\mathbf{3}$ |  |  |
|  |  |  |
| 4a |  |  |
| 4b |  |  |
| 4c |  |  |

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

## Part II Credit for Business/Investment Use Part of Vehicle

5 Business/investment use percentage (see instructions)

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

7 Section 179 expense deduction (see instructions)
8 Subtract line 7 from line 6

9 Multiply line 8 by 10\% (0.10)
10 Maximum credit per vehicle

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

| 5 | $\%$ |  |
| ---: | ---: | ---: |
|  |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| 9 |  |  |
| 10 | 2,500 |  |
|  |  | 2,500 |

11

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

13 Qualified plug-in electric drive motor vehicle credit from partnerships and S corporations (see instructions)

13
4,028

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

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

## Part III Credit for Personal Use Part of Vehicle

15 If you skipped Part II, enter the amount from line 4c. If you completed Part II, subtract line 6 from line 4 c . If the vehicle has at least four wheels, leave lines 16 and 17 blank and go to line 18

16 Multiply line 15 by $10 \%$ (0.10)

17 Maximum credit per vehicle. If you skipped Part II, enter $\$ 2,500$. If you completed Part II, subtract line 11 from line 10
(a) Vehicle 1

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

|  |  |  |
| :---: | :--- | :--- |
| 15 |  |  |
| 16 |  |  |
|  |  |  |
|  |  |  |
| 17 |  |  |

19 Add columns (a) and (b) on line 18 . . . . . . . . . . . . . . . . .

20 Enter the amount from Form 1040 or Form 1040-SR, line 12b, or Form 1040-NR, line 45

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

22 Subtract line 21 from line 20


Part III Credit for Personal Use Part of Vehicle


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.

For calendar year 20
20 and ending
, 20
Attachment
Sequence No. 175
If you have attached continuation statements, check here


Number of continuation statements $\qquad$
1 Name(s) shown on return
Total Forms Filed $=\quad 489,258$
2 Taxpayer Identification Number (TIN)
3 Type of filer
a $\square$ Specified individual $\quad$ b $\square$ Partnership
c $\square$ Corporation
d $\square$ Trust
4 If you checked box 3a, skip this line 4. If you checked box 3b or 3c, enter the name and TIN of the specified individual who closely holds the partnership or corporation. If you checked box 3d, enter the name and TIN of the specified person who is a current beneficiary of the trust. (See instructions for definitions and what to do if you have more than one specified individual or specified person to list.)

a Name

b TIN
Part I Foreign Deposit and Custodial Accounts Summary


Part III Summary of Tax Items Attributable to Specified Foreign Financial Assets (see instructions)

| (a) Asset Category | (b) Tax item | (c) Amount reported on form or schedule |  | Where reported |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | (d) Form and line | (e) Schedule and line |
| 1 Foreign Deposit and Custodial Accounts | 1a Interest | \$ 205,651 | +/- |  |  |
|  | 1b Dividends | \$ 73,236 | +/- |  |  |
|  | 1c Royalties | \$ 23 | +/- |  |  |
|  | 1d Other income | \$ 10,330 | +/- |  |  |
|  | 1e Gains (losses) | \$ 25,019 | +/- |  |  |
|  | 1 f Deductions | \$ 3.273 | +/- |  |  |
|  | 19 Credits | \$ 5,665 | +/- |  |  |
| 2 Other Foreign Assets | 2a Interest | \$ 20,771 | +/- |  |  |
|  | 2b Dividends | \$ 32.467 | +/- |  |  |
|  | 2c Royalties | \$ 1,642 | +/- |  |  |
|  | 2d Other income | \$ 32,603 | +/- |  |  |
|  | 2e Gains (losses) | \$ 16,210 | +/- |  |  |
|  | 2 f Deductions | \$ 7,442 | +/- |  |  |
|  | 2g Credits | \$ 5,372 | +/- |  |  |

## Part IV Excepted Specified Foreign Financial Assets (see instructions)

If you reported specified foreign financial assets on one or more of the following forms, enter the number of such forms filed. You do not need to include these assets on Form 8938 for the tax year.

1. Number of Forms 3520 $\qquad$ 2. Number of Forms 3520-A3. Number of Forms 5471
2. Number of Forms 8621
3. Number of Forms 8865

## Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary <br> (see instructions)

If you have more than one account to report in Part V, attach a continuation statement for each additional account (see instructions).

| $\mathbf{1}$ | Type of account | $\square$ Deposit $\quad \square$ Custodial | $\mathbf{2}$ Account number or other designation |  |  |
| :---: | :--- | :--- | :--- | :--- | :--- |
| $\mathbf{3}$ | Check all that apply | $\mathbf{a} \square$ | Account opened during tax year | $\mathbf{b} \square$ | Account closed during tax year |
|  |  | $\mathbf{c} \square$ | Account jointly owned with spouse | $\mathbf{d} \square$ | No tax item reported in Part III with respect to this asset |


| 4 | Maximum value of account during tax year |
| :---: | :---: |
| 5 | Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? . . $\square$ Yes $\square$ No | 6 If you answered "Yes" to line 5, complete all that apply.

(a) Foreign currency in which account is maintained
(b) Foreign currency exchange rate used to convert to U.S. dollars
(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service

Department of the Treasury Internal Revenue Service
or tax year beginning
20 and ending


Attachment
Sequence No. 175

If you have attached continuation statements, check here $\square$
Number of continuation statements

| 1 Name(s) shown on return | Total Forms Filed $=$ | 489,258 |  | 2 Taxpayer Identification Number (TIN) |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 3 Type of filer |  |  |  |  |  |  |
| 4 If you checked box 3a, skip this line 4. If you checked box 3b or 3c, enter the name and TIN of the specified individual who closely holds the partnership or corporation. If you checked box 3d, enter the name and TIN of the specified person who is a current beneficiary of the trust. (See instructions for definitions and what to do if you have more than one specified individual or specified person to list.) <br> a Name <br> b TIN |  |  |  |  |  |  |
| Part I Foreign Deposit and Custodial Accounts Summary |  |  |  |  |  |  |
| 1 Number of Deposit Accounts (reported in Part V) . . . . . . . . . . . . . . . . . . ${ }^{\text {a }}$ |  |  |  |  |  |  |
| 2 Maximum Value of All Deposit Accounts . . . . . . . . . . . . . . . . . . . . . $\$ 323,106,264$ |  |  |  |  |  |  |
| 3 Number of Custodial Accounts (reported in Part V) . . . . . . . . . . . . . . . . . $\quad$ l |  |  |  |  |  |  |
| 4 Maximum Value of All Custodial Accounts . . . . . . . . . . . . . . . . . . . . . $\$ 69,047,081$ |  |  |  |  |  |  |
| 5 Were any foreign deposit or custodial accounts closed during the tax year? . . . . . . . . . . $\square$ Yes $\square$ No |  |  |  |  |  |  |
| Part II Other Foreign Assets Summary |  |  |  |  |  |  |
| 1 Number of Foreign Assets (reported in Part VI) . . . . . . . . . . . . . . . . . . |  |  |  |  |  |  |
| 2 Maximum Value of All Assets (reported in Part VI) . . . . . . . . . . . . . . . . . . . $\$ 263,812,652$ |  |  |  |  |  |  |
| 3 Were any foreign assets acquired or sold during the tax year? . . . . . . . . . . . . . . $\square$ Yes $\square$ No |  |  |  |  |  |  |
| Part III Summary of Tax Items Attributable to Specified Foreign Financial Assets (see instructions) |  |  |  |  |  |  |
| (a) Asset Category | (b) Tax item | (c) Amount reported on form or schedule |  | Where reported |  |  |
|  |  |  |  | (d) Form and line |  | Schedule and line |
| 1 Foreign Deposit and Custodial Accounts | 1a Interest | \$ 1,881,740 |  |  |  |  |
|  | 1b Dividends | \$ 2,097,678 |  |  |  |  |
|  | 1c Royalties | \$ 3,485 | +/- |  |  |  |
|  | 1d Other income | \$ 483,403 | +/- |  |  |  |
|  | 1e Gains (losses) | \$ 1,318,709 | +/- |  |  |  |
|  | 1f Deductions | \$ 46.925 | +/- |  |  |  |
|  | 1g Credits | \$ 97,154 | +/- |  |  |  |
| 2 Other Foreign Assets | 2a Interest | \$ 753,263 | +/- |  |  |  |
|  | 2b Dividends | \$ 2,667.186 | +/- |  |  |  |
|  | 2c Royalties | \$ 64,164 | +/- |  |  |  |
|  | 2d Other income | \$ 4,446,021 | +/- |  |  |  |
|  | 2e Gains (losses) | \$ 5,819,327 | +/- |  |  |  |
|  | 2f Deductions | \$ 333,217 | +/- |  |  |  |
|  | 2g Credits | \$ 139,904 | +/- |  |  |  |

## Part IV Excepted Specified Foreign Financial Assets (see instructions)

If you reported specified foreign financial assets on one or more of the following forms, enter the number of such forms filed. You do not need to include these assets on Form 8938 for the tax year.

1. Number of Forms 3520
2. Number of Forms 3520-A
3. Number of Forms 5471
4. Number of Forms 8621
5. Number of Forms 8865
$\qquad$

Number

## Part V Detailed Information for Each Foreign Deposit and Custodial Account Included in the Part I Summary

 (see instructions)If you have more than one account to report in Part V, attach a continuation statement for each additional account (see instructions).

| $\mathbf{1}$ | Type of account | $\square$ Deposit $\quad \square$ Custodial | $\mathbf{2}$ Account number or other designation |  |  |
| :---: | :--- | :--- | :--- | :--- | :--- |
| $\mathbf{3}$ | Check all that apply | a $\square$ | Account opened during tax year | $\mathbf{b} \square$ | Account closed during tax year |
|  |  | $\mathbf{c} \square$ | Account jointly owned with spouse | $\mathbf{d} \square$ | No tax item reported in Part III with respect to this asset |

4 Maximum value of account during tax year . . . . . . . . . . . . . . . . . . . . . \$
5 Did you use a foreign currency exchange rate to convert the value of the account into U.S. dollars? . . $\square$ Yes $\square$ No
6 If you answered "Yes" to line 5, complete all that apply.
(a) Foreign currency in which
account is maintained
(b) Foreign currency exchange rate used to convert to U.S. dollars
(c) Source of exchange rate used if not from U.S. Treasury Department's Bureau of the Fiscal Service


## Part II Additional Medicare Tax on Self-Employment Income

8 Self-employment income from Schedule SE (Form 1040 or 1040-SR), Section A, line 4, or Section B, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)
9 Enter the following amount for your filing status:
Married filing jointly.
\$250,000
Married filing separately \$125,000
Single, Head of household, or Qualifying widow(er) . . . . . \$200,000
10 Enter the amount from line 4
11 Subtract line 10 from line 9. If zero or less, enter -0- .
12 Subtract line 11 from line 8. If zero or less, enter -0-
13 Additional Medicare Tax on self-employment income. Multiply line 12 by $0.9 \%$ ( 0.009 ). Enter here and go to Part III


## Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation

14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)
15 Enter the following amount for your filing status:
Married filing jointly
\$250,000
Married filing separately
\$125,000
Single, Head of household, or Qualifying widow(er)
16 Subtract line 15 from line 14. If zero or less, enter -0-

|  |  |  |  |
| :---: | :---: | :---: | :---: |
| 14 | 4,852 |  |  |
|  |  |  |  |
| 15 |  |  |  |

17 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by $0.9 \%$ (0.009).
Enter here and go to Part IV

## Part IV Total Additional Medicare Tax

18 Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040 or 1040-SR), line 8 (check box a) (Form 1040-NR, 1040-PR, or 1040-SS filers, see instructions), and go to Part V . . . . . 18 $18 \quad 4,790,111$

## Part V Withholding Reconciliation

19 Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6
20 Enter the amount from line 1
21 Multiply line 20 by $1.45 \%$ ( 0.0145 ). This is your regular Medicare tax withholding on Medicare wages

| 19 | $5,367,573$ |
| :---: | :---: |
| 20 |  |
| 21 | $5,370,518$ |

22 Subtract line 21 from line 19. If zero or less, enter $-0-$. This is your Additional Medicare Tax withholding on Medicare wages
23 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions)
24 Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040 or 1040-SR, line 17 (Form 1040-NR, 1040-PR, or 1040-SS filers, see instructions)

| 22 | $4,062,899$ |
| :---: | :---: |
| 23 | 3,053 |
|  |  |
| 24 | $4,065,866$ |



Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation
14 Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)
15 Enter the following amount for your filing status:
Married filing jointly
\$250,000
Married filing separately
\$125,000
Single, Head of household, or Qualifying widow(er) . . . . . \$200,000

| 14 | $1,193,207$ |
| :---: | :---: |
|  |  |
| 15 | $1,263,861,740$ |

16 Subtract line 15 from line 14. If zero or less, enter -0-
17 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by $0.9 \%$ ( 0.009 ). Enter here and go to Part IV

13
1,787,689

## Part IV Total Additional Medicare Tax

18 Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040 or 1040-SR), line 8 (check box a) (Form 1040-NR, 1040-PR, or 1040-SS filers, see instructions), and go to Part V

## Part V Withholding Reconciliation

19 Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6
20 Enter the amount from line 1
21 Multiply line 20 by $1.45 \%$ ( 0.0145 ). This is your regular Medicare tax withholding on Medicare wages

| 19 | $38,197,081$ |
| :--- | :--- |
| 20 |  |
| 21 | $30,488,876$ |

22 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages
23 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions)
24 Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040 or 1040-SR, line 17 (Form 1040-NR, 1040-PR, or 1040-SS filers, see instructions)

| 22 | 7,768,505 |
| :---: | :---: |
| 23 | 4,767 |
| 24 | 7,773,271 |




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

## Premium Tax Credit (PTC)

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

You cannot take the PTC if your filing status is married filing separately unless you qualify for an exception (see instructions). If you qualify, check the box

## Part I Annual and Monthly Contribution Amount

1 Tax family size. Enter your tax family size (see instructions) .
2a Modified AGI. Enter your modified AGI (see instructions)
b Enter the total of your dependents' modified AGI (see instructions)


3 Household income. Add the amounts on lines 2 a and 2 b (see instructions)

| 1 | $5,997,896$ |
| :---: | :---: |
|  |  |
| 3 | $5,863,774$ |
| 4 |  |
| 5 |  |
|  |  |
| 7 | 5 |
| 8 Bb | $5,391,819$ |

## Part II Premium Tax Credit Claim and Reconciliation of Advance Payment of Premium Tax Credit

9 Are you allocating policy amounts with another taxpayer or do you want to use the alternative calculation for year of marriage (see instructions)? $\square$ Yes. Skip to Part IV, Allocation of Policy Amounts, or Part V, Alternative Calculation for Year of Marriage. $\square$ No. Continue to line 10.
10 See the instructions to determine if you can use line 11 or must complete lines 12 through 23.
$\square$ Yes. Continue to line 11. Compute your annual PTC. Then skip lines 12-23No. Continue to lines 12-23. Compute and continue to line 24. your monthly PTC and continue to line 24.

| Annual Calculation |  | (a) Annual enrollment premiums (Form(s) 1095-A, line 33A) | (b) Annual applicable SLCSP premium (Form(s) 1095-A, line 33B) | (c) Annual contribution amount (line 8a) | (d) Annual maximum premium assistance (subtract (c) from (b), if zero or less, enter -0-) | (e) Annual premiu credit allowed (smaller of (a) or |  | (f) Annual advance payment of PTC (Form(s) 1095-A, line 33C) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Annual Totals | 2,878,252 | 2,850,335 | 2,872,896 | 2,767,212 | 2,764,203 |  | 3,025,479 |
| Monthly Calculation |  | (a) Monthly enrollment premiums (Form(s) 1095-A, lines 21-32, column A) | (b) Monthly applicable <br> SLCSP premium (Form(s) 1095-A, lines 21-32, column B) | (c) Monthly contribution amount (amount from line 8b or alternative marriage monthly calculation) | (d) Monthly maximum premium assistance (subtract (c) from (b), if zero or less, enter -0-) | (e) Monthly premium tax credit allowed (smaller of (a) or (d)) |  | (f) Monthly advance payment of PTC (Form(s) 1095-A, lines 21-32, column C) |
| 12 | January |  |  |  |  | 1,784,677 |  | 2,005,579 |
| 13 | February |  |  |  |  | 1,806,350 |  | 2,030,946 |
| 14 | March |  |  |  |  | 1,775,393 |  | 1,996,541 |
| 15 | April |  |  |  |  | 1,728,095 |  | 1,933,848 |
| 16 | May |  |  |  |  | 1,670,246 |  | 1,856,787 |
| 17 | June |  |  |  |  | 1,617,329 |  | 1,790,407 |
| 18 | July |  |  |  |  | 1,586,031 |  | 1,757,091 |
| 19 | August |  |  |  |  | 1,548,670 |  | 1,703,948 |
| 20 | September |  |  |  |  | 1,510,662 |  | 1,666,424 |
| 21 | October |  |  |  |  | 1,484,562 |  | 1,638,258 |
| 22 | November |  |  |  |  | 1,474,505 |  | 1,610,344 |
| 23 | December |  |  |  |  | 1,435,765 |  | 1,571,050 |
| 24 | Total premium tax credit. Enter the amount from line 11(e) or add lines 12(e) through 23(e) and enter the total hereAdvance payment of PTC. Enter the amount from line 11(f) or add lines 12(f) through 23(f) and enter the total here |  |  |  |  |  | 24 | 5,181,984 |
| 25 |  |  |  |  |  |  | 25 | 5,767,630 |
| 26 | Net premium tax credit. If line 24 is greater than line 25 , subtract line 25 from line 24. Enter the difference here and on Schedule 3 (Form 1040 or 1040-SR), line 9, or Form 1040-NR, line 65. If line 24 equals line 25, enter -0-. Stop here. If line 25 is greater than line 24, leave this line blank and continue to line 27 |  |  |  |  |  | 26 | 2,169,772 |
| 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 |  |  |  |  |  | 27 | 3,018,032 |
| 28 | Repayment limitation (see instructions) . . . . . . . . . . . . . . . . . . . . . . |  |  |  |  |  | 28 | 2,610,098 |
|  | Excess advance premium tax credit repayment. Enter the smaller of line 27 or line 28 here and on Schedule 2 (Form 1040 or 1040-SR), line 2, or Form 1040-NR, line 44 |  |  |  |  |  | 29 | 3,018,032 |
| For Paperwork Reduction Act Notice, see your tax return instructions. Cat. No. 37784Z |  |  |  |  |  |  |  | Form 8962 (2019) |

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

## Premium Tax Credit (PTC)

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

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

| Total Forms Filed $=$Y,998, | Your social security number |
| :--- | :--- |

You cannot take the PTC if your filing status is married filing separately unless you qualify for an exception (see instructions). If you qualify, check the box

## Part I Annual and Monthly Contribution Amount

1 Tax family size. Enter your tax family size (see instructions).
2a Modified AGI. Enter your modified AGI (see instructions)
b Enter the total of your dependents' modified AGI (see instructions)

| - . . . . j . . |  | 1 | 12,202 |
| :---: | :---: | :---: | :---: |
| 2a | 209,938,172 |  |  |
| 2b | 707,418 |  |  |
| s) |  | 3 | 221,463,949 |
| -1, 1-2, or 1-3 (see instructions). Check the $\square$ Hawaii $\quad \mathbf{c} \square$ Other 48 states and DC |  | 4 |  |
| ) . . . . . . . . . . . |  | 5 | \% |
| 100\%.) |  |  |  |
| the PTC was made, see the instructions for |  |  |  |
| gure" on the table in the instructions |  | 7 | 3,165,366 |
| Monthly contribution amount. Divide line 8a by 12. Round to nearest whole dollar amount |  | 8b | 1,049,717 |

3 Household income. Add the amounts on lines 2 a and 2 b (see instructions)


7 Applicable Figure. Using your line 5 percentage, locate your "applicable figure" on the table in the instructions

8a Annual contribution amount. Multiply line 3 by line 7. Round to nearest whole dollar amount
b Monthly contribution amount. Divide line 8a by 12. Round to nearest whole dollar amount

## Part II Premium Tax Credit Claim and Reconciliation of Advance Payment of Premium Tax Credit

9 Are you allocating policy amounts with another taxpayer or do you want to use the alternative calculation for year of marriage (see instructions)? $\square$ Yes. Skip to Part IV, Allocation of Policy Amounts, or Part V, Alternative Calculation for Year of Marriage. $\square$ No. Continue to line 10.
10 See the instructions to determine if you can use line 11 or must complete lines 12 through 23.
$\square$ Yes. Continue to line 11. Compute your annual PTC. Then skip lines 12-23 and continue to line 24.No. Continue to lines 12-23. Compute your monthly PTC and continue to line 24.

## Annual Calculation

| Calculation |  |
| :---: | :---: |
| 11 | Annual Totals |


|  | (c) Annual <br> contribution amount <br> (line 8a) | (d) Annual maximum <br> premium assistance <br> (subtract (c) from (b), if <br> zero or less, enter -0-) |
| :---: | :---: | :---: |
|  | $\mathbf{6 , 3 4 4 , 3 5 9}$ | $\mathbf{2 7 , 2 8 7 , 1 0 7}$ |
| (c) Monthly <br> contribution amount <br> (amount from line 8b <br> or alternative marriage <br> monthly calculation) | (d) Monthly maximum <br> premium assistance <br> (subtract (c) from (b), if <br> zero or less, enter -0-) |  |
|  |  |  |
|  |  |  |
|  |  |  |

## Part IV Allocation of Policy Amounts

Complete the following information for up to four policy amount allocations. See instructions for allocation details.

| Allocation 1 |
| :--- |
| $30 \quad$ (a) Policy Number (Form 1095-A, line 2) |
| (b) SSN of other taxpayer |
| Allocation percentage <br> applied to monthly <br> amounts |

## Allocation 2

| 31 | (a) Policy Number (Form 1095-A, line 2) |  | (b) SSN of other taxpayer |  | (c) Allocation start month |  |  | Allocation stop month |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Allocation percentage applied to monthly amounts | (e) Premium Percentage |  |  | (f) SLCSP Percentage | (g) Advance Payment of the PTC Percentage |  |  |
| Allocation 3 |  |  |  |  |  |  |  |  |
| 32 | (a) Policy Number (Form 1095-A, line 2) |  | (b) SSN of other taxpayer |  | (c) Allocation start month |  |  | Allocation stop month |
|  | Allocation percentage applied to monthly amounts | (e) Premium Percentage |  |  | (f) SLCSP Percentage | (g) Advance Payment of the PTC Percentage |  |  |

## Allocation 4



34 Have you completed all policy amount allocations?
$\square$ Yes. Multiply the amounts on Form 1095-A by the allocation percentages entered by policy. Add all allocated policy amounts and nonallocated policy amounts from Forms 1095-A, if any, to compute a combined total for each month. Enter the combined total for each month on lines 12-23, columns (a), (b), and (f). Compute the amounts for lines 12-23, columns (c)-(e), and continue to line 24.No. See the instructions to report additional policy amount allocations.

## Part V Alternative Calculation for Year of Marriage

Complete line(s) 35 and/or 36 to elect the alternative calculation for year of marriage. For eligibility to make the election, see the instructions for line 9 . To complete line(s) 35 and/or 36 and compute the amounts for lines 12-23, see the instructions for this Part V.

| 35 | Alternative entries <br> for your SSN | (a) Alternative family size | (b) Alternative monthly <br> contribution amount | (c) Alternative start month | (d) Alternative stop month |
| :--- | :--- | :--- | :--- | :--- | :--- |
| 36 | Alternative entries <br> for your spouse's <br> SSN | (a) Alternative family size | (b) Alternative monthly <br> contribution amount | (c) Alternative start month | (d) Alternative stop month |

## Part IV Allocation of Policy Amounts

Complete the following information for up to four policy amount allocations. See instructions for allocation details.

## Allocation 1

| 30 | (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 |  |
| Allocation 2 |  |  |  |  |  |  |  |
| 31 | (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 |  |
| Allocation 3 |  |  |  |  |  |  |  |
| 32 | (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 |  |
|  |  |  |  |  |  |

## Allocation 4

33
(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 <br> Percentage |
| :---: | :---: | :---: |
|  |  |  |

34 Have you completed all policy amount allocations?
$\square$ Yes. Multiply the amounts on Form 1095-A by the allocation percentages entered by policy. Add all allocated policy amounts and nonallocated policy amounts from Forms 1095-A, if any, to compute a combined total for each month. Enter the combined total for each month on lines 12-23, columns (a), (b), and (f). Compute the amounts for lines 12-23, columns (c)-(e), and continue to line 24.No. See the instructions to report additional policy amount allocations.

## Part V Alternative Calculation for Year of Marriage

Complete line(s) 35 and/or 36 to elect the alternative calculation for year of marriage. For eligibility to make the election, see the instructions for line 9. To complete line(s) 35 and/or 36 and compute the amounts for lines 12-23, see the instructions for this Part V.

| 35 | Alternative entries <br> for your SSN | (a) Alternative family size | (b) Alternative monthly <br> contribution amount | (c) Alternative start month | (d) Alternative stop month |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :---: |
| 36 | Alternative entries <br> for your spouse's <br> SSN | (a) Alternative family size | (b) Alternative monthly <br> contribution amount | (c) Alternative start month | (d) Alternative stop month |  |
|  |  |  |  |  |  |  |



Section II-Adjusted Taxable Income
Taxable Income


Reductions (adjustments to be made if amounts are taken into account on line 6)

| 17 | Any item of income or gain which is not properly allocable to a trade or business of the taxpayer. See instructions | 17 |  | 1,955 |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 18 | Any business interest income not from a pass-through entity. See instructions | 18 |  | 593 |  |  |  |  |  |
| 19 | Amount of any income or gain items from a pass-through entity. See instructions | 19 |  | 25,766 |  |  |  |  |  |
| 20 | Other reductions. See instructions | 20 |  | 235 |  |  |  |  |  |
| 21 | Total. Combine lines 17 through 20 |  |  |  | $\checkmark$ | 21 |  | 26,433 | ) |
| 22 | Adjusted taxable income. Combine lines 6, 16, and 21. (If zero or less, enter -0 |  |  | . . . | - | 22 |  | 180,318 |  |

## Section III-Business Interest Income

| 23 | Current year business interest income. See instructions Excess business interest income from pass-through entities (total of Schedule | 23 |  | 25 16,233 |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 24 |  | 24 |  |  |  |
| 25 | Total. Add lines 23 and 24 . . . |  |  |  |  |

## 8990 <br> (Rev. December 2019)

 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.

## Total Forms Filed $=\quad 192,574$

## Part I Computation of Allowable Business Interest Expense

Part I is completed by all taxpayers subject to section 163(i). Schedule A and Schedule B need to be completed before Part I when the taxpayer is a partner or shareholder of a pass-through entity subject to section 163(j).

## Section I-Business Interest Expense

1 Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation
2 Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership)
3 Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h))
4 Floor plan financing interest expense. See instructions .

| 1 | 4,003,136 |  |  |
| :---: | :---: | :---: | :---: |
| 2 | 272,292 |  |  |
| 3 | 2,011,390 |  |  |
| 4 | 57,442 |  |  |
| . | - | 5 | 6,344,260 |

5 Total business interest expense. Add lines 1 through 4

Taxable Income
6 Taxable income. See instructions
6 114,855,025
Additions (adjustments to be made if amounts are taken into account on line 6)

| 7 | Any item of loss or deduction which is not properly allocable to a trade or business of the taxpayer. See instructions | 7 | 2,530,307 |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 8 | Any business interest expense not from a pass-through entity. See instructions | 8 | 2,667,693 |  |  |
| 9 | Amount of any net operating loss deduction under section 172 | 9 | 10,997,768 |  |  |
| 10 | Amount of any qualified business income deduction allowed under section 199A | 10 | 5,888,707 |  |  |
| 11 | Deduction for depreciation, amortization, or depletion attributable to a trade or business. See instructions | 11 | 4,917,457 |  |  |
| 12 | Amount of any loss or deduction items from a pass-through entity. See instructions | 12 | 31,821,800 |  |  |
| 13 | Other additions. See instructions | 13 | 2,572,667 |  |  |
| 14 | Total current year partner's excess taxable income (Schedule A, line 44, column (f)) | 14 | 40,788,038 |  |  |
| 15 | Total current year $S$ corporation shareholder's excess taxable income (Schedule B, line 46, column (c)) | 15 | 45,513,273 |  |  |
| 16 | Total. Add lines 7 through 15 | . | . . . $\downarrow$ | 16 | 147,697,709 |

Reductions (adjustments to be made if amounts are taken into account on line 6)

| 17 | Any item of income or gain which is not properly allocable to a trade or business of the taxpayer. See instructions | 17 | ( 13,097,332 ) |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 18 | Any business interest income not from a pass-through entity. See instructions | 18 | ( 428,942 ) |  |  |
| 19 | Amount of any income or gain items from a pass-through entity. See instructions | 19 | ( 60,401,053 ) |  |  |
| 20 | Other reductions. See instructions | 20 | ( 809,774 ) |  |  |
| 21 | Total. Combine lines 17 through 20 |  | . $\downarrow$ | 21 | 74,737,101 |
| 22 | Adjusted taxable income. Combine lines 6, 16, and 21. (If zero or less, enter -0-.) |  | - | 22 | 188,632,642 |

## Section III-Business Interest Income



## 2019 Line Item Estimates—All figures are estimates based on samples.

Number of returns filed for selected lines

## Section IV-Section 163(j) Limitation Calculations

## Limitation on Business Interest Expense



## Allowable Business Interest Expense



## Carryforward



## Part II Partnership Pass-Through Items

Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.

## Excess Business Interest Expense

| 32 | Excess business interest expense. Enter amount from line 31. | 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. (lf 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 |  | 36 |  |

## Excess Business Interest Income



## Part III S Corporation Pass-Through Items

Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.

## Excess Taxable Income



## Excess Business Interest Income

42 Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.)

# 2019 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars) 

## Section IV-Section 163(j) Limitation Calculations

## Limitation on Business Interest Expense

| 26 | Multiply adjusted taxable income (line 22) by 30\% (0.30). See instructions | 26 | 89,651,676 | 29 97,180,117 |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 27 | Business interest income (line 25) | 27 |  |  |  |
| 28 | Floor plan financing interest expense (line 4) | 28 |  |  |  |
| 29 | Total. Add lines 26, 27, and 28 . . . . |  | - |  |  |

## Allowable Business Interest Expense

30 Total current year business interest expense deduction. See instructions . . . . . . . . 30 5,641,782

## Carryforward

| 31 Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0-.) . . . | 31 | $\mathbf{7 1 7 , 0 7 6}$ |
| :--- | :--- | :--- | :--- | Part II Partnership Pass-Through Items

Part II is only completed by a partnership that is subject to section 163(j). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.

## Excess Business Interest Expense

| 32 | Excess business interest expense. Enter amount from line 31 | 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 | 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 line 25. (If zero or less, enter -0-.)

## Part III S Corporation Pass-Through Items

Part III is only completed by S corporations that are subject to section 163(j). The S corporation items below are allocated to the shareholders. See the instructions for more information.

## Excess Taxable Income



## Excess Business Interest Income

42 Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.)

SCHEDULE A Summary of Partner's Section 163(i) Excess Items
Any taxpayer that owns an interest in a partnership subject to section 163(i) should complete Schedule A before completing Part l.


## SCHEDULE B Summary of S Corporation Shareholder's Excess Taxable Income and Excess Business Interest Income

Any taxpayer that is required to complete Part I and is a shareholder in an S corporation that has excess taxable income or excess business interest income should complete Schedule B before completing Part I.

| (a) Name of S corporation | (b) EIN | (c) Current year excess <br> taxable income | (d) Current year excess <br> business interest income |  |
| :--- | :--- | :--- | :--- | :--- |
| 45 |  |  |  |  |
|  |  |  |  |  |

## 2019 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8990 (Rev. 12-2019)
Page 3
SCHEDULE A Summary of Partner's Section 163(i) Excess Items
Any taxpayer that owns an interest in a partnership subject to section 163(i) should complete Schedule A before completing Part I.


## SCHEDULEB Summary of S Corporation Shareholder's Excess Taxable Income and Excess Business Interest Income

Any taxpayer that is required to complete Part I and is a shareholder in an $S$ corporation that has excess taxable income or excess business interest income should complete Schedule $B$ before completing Part $I$.

|  | (a) Name of $S$ corporation | (b) EIN | (c) Current year excess taxable income | (d) Current year excess business interest income |
| :---: | :---: | :---: | :---: | :---: |
| 45 |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 46 | Total . . . . . . . . . . . . . . . . . . . . . ${ }^{\text {a }}$ |  |  |  |




| 8001 | Employer Credit for Paid Family and Medical Leave <br> Attach to your tax return. <br> Go to www.irs.gov/Form8994 for instructions and the latest information. |  |  | OMB No. 1545-2282 |
| :---: | :---: | :---: | :---: | :---: |
| Department of the Treasury Internal Revenue Service |  |  |  |  |
| Name(s) shown on return | Total Forms Filed $=$ | 1,340 |  | number |

A Do you have a written policy providing for at least 2 weeks of annual paid family and medical leave for your qualifying employee(s) to whom wages are paid (prorated for any part-time employees)? See instructions.Yes.
No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).

B Does the written policy provide paid family and medical leave of at least $50 \%$ of the wages normally paid to a qualifying employee? See instructions.

Yes.
No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).

C Did you pay family and medical leave to at least one qualifying employee during the tax year? See instructions.

No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).

D If you employed at least one qualifying employee who was not covered by the Family and Medical Leave Act, did you include in your written policy and otherwise comply with "non-interference" language? See instructions.Yes.
No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).

1 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 | $*$ |
| 2 | 1,291 |
|  |  |
| 3 | 1,292 |

For Paperwork Reduction Act Notice, see separate instructions.
Cat. No. 37804G
Form 8994 (2019)

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

- Attach to your tax return.

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

A Do you have a written policy providing for at least 2 weeks of annual paid family and medical leave for your qualifying employee(s) to whom wages are paid (prorated for any part-time employees)? See instructions.Yes.No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).
B Does the written policy provide paid family and medical leave of at least $50 \%$ of the wages normally paid to a qualifying employee? See instructions.

## Yes.

$\square$ No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).
C Did you pay family and medical leave to at least one qualifying employee during the tax year? See instructions.

## Yes.

$\square$ No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).

D If you employed at least one qualifying employee who was not covered by the Family and Medical Leave Act, did you include in your written policy and otherwise comply with "non-interference" language? See instructions.Yes.
No. Stop. Do not file Form 8994 (see instructions for an exception that may apply to a partnership or S corporation).

1 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

2 Employer credit for paid family and medical leave from partnerships and S corporations (see instructions)
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

|  |  |
| :---: | :---: |
|  |  |
| 1 | $*$ |
| 2 | 400 |
|  |  |
| 3 | 410 |

For Paperwork Reduction Act Notice, see separate instructions.
Cat. No. 37804G
Form 8994 (2019)

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


# Qualified Business Income Deduction Simplified Computation 

- Attach to your tax return.

Department of the Treasury Internal Revenue Service

## on samples.

Name(s) shown on return
Total Forms 8995 Filed $=30,401,399 \quad$ Total Forms 8995A Filed $=3,167,180$

| 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 $=29,228,795$ |  |  |  |  |
| iii | Number of forms with aggregation business of |  |  | perations $=653,985$ |  |
| iv |  |  |  |  |  |
| v |  |  |  |  |  |
| 2 | Total qualified business income or (loss). Combine lines 1 i through 1v, column (c) | 2 | 26,274,150 |  | 19,020,959 |
| 3 | Qualified business net (loss) carryforward from the prior year . . | 3 | ( 6,296,689 ) |  |  |
| 4 | Total qualified business income. Combine lines 2 and 3 . If zero or less, enter -0- | 4 | 17,568,119 |  |  |
| 5 | Qualified business income component. Multiply line 4 by 20\% (0.20) <br> Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions) |  |  | 5 |  |
| 6 |  |  |  |  |  |
| 7 | Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year. | 7 | ( 163,206 ) |  |  |
| 8 | Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0- | 8 | 9,234,693 |  |  |
| 9 | REIT and PTP component. Multiply line 8 by 20\% (0.20) Qualified business income deduction before the income limitation. Add lines 5 and 9 |  |  | 9 | 8,685,117 |
| 10 |  |  |  | 10 | 25,720,785 |
| 11 |  |  |  |  |  |
| 12 | Net capital gain (see instructions) Subtract line 12 from line 11. If zero or less, enter -0- |  |  |  | 29,865,763 |
| 13 |  |  |  |  |  |
| 14 |  |  |  | 14 |  |
| 15 | Qualified business income deduction. Enter the lesser of line 10 or line 14. Also enter this amount on the applicable line of your return |  |  | 15 | 21,693,097 |
| 16 | Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0- . . |  |  | 16 | 10,140,216 ) |
| 17 | Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- |  |  | 17 | ( 191,761 ) |

## 2019 Line Item Estimates-All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Department of the Treasury Internal Revenue Service

- Attach to your tax return.

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

Total Forms 8995 Filed $=30,401,399 \quad$ Total Forms 8995A Filed $=3,167,180$

| 1 | (a) Trade, business, or aggregation name |  | (b) Taxpayer identification number | (c) Qualified business income or (loss) |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| i |  |  |  |  |  |
| ii | Number of trade, business, or aggregations $=48,029,187$ |  |  |  |  |
| iii | Number of aggregation business |  |  | operations = 905,001 |  |
| iv |  |  |  |  |  |
| $v$ |  |  |  |  |  |
| 2 | Total qualified business income or (loss). Combine lines 1 i through 1v, column (c) | 2 | 270,459,666 |  |  |
| 3 | Qualified business net (loss) carryforward from the prior year . | 3 | ( 157,607,624 ) |  |  |
| 4 | Total qualified business income. Combine lines 2 and 3 . If zero or less, enter -0- | 4 | 428,455,730 |  |  |
| 5 |  |  |  |  |  |
| 6 | Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions) | $6$ | 12,007,204 |  |  |
| 7 | Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year. | 7 | ( 1,746,833 ) |  |  |
| 8 | Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0- | 8 | 12,598,355 |  |  |
| 9 | REIT and PTP component. Multiply line 8 by 20\% (0.20) |  |  | 9 | 2,519,603 |
| 10 | Qualified business income deduction before the income limitation. Add lines 5 and 9 . . . . . . |  |  | 10 | 173,390,786 |
| 11 | Taxable income before qualified business income deduction |  | $4,439,843,618$ |  | 725,039,694 |
| 12 | Net capital gain (see instructions) | 12 | 889,575,816 |  |  |
| 13 | Subtract line 12 from line 11. If zero or less, enter -0- | 13 | 3,625,198,812 |  |  |
| 14 | Income limitation. Multiply line 13 by 20\% (0.20) |  |  | 14 |  |
| 15 | Qualified business income deduction. Enter the lesser of line 10 or line 14. Also enter this amount on the applicable line of your return |  |  | 15 | 151,496,920 |
| 16 | Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0- . . |  |  | 16 | 343,985,240 ) |
| 17 | Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- |  |  | 17 | 2,337,518 ) |

## זom 8997

Department of the Treasury Internal Revenue Service Name

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

## Part I

Total QOF investment holdings at beginning of tax year
If different from last year's ending QOF investment holdings, attach explanation.

| (a) Qualified Opportunity Fund (QOF) EIN | (b) <br> Date QOF investment acquired (MM/DD/YYYY) | (c) <br> Description of QOF investment (For example, 100 shares or $25 \%$ interest) | Deferred gain held in QOF |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  | (d) <br> Amount of short-term deferred gain remaining in QOF | (e) <br> Amount of long-term deferred gain remaining in QOF |
|  |  |  | 394 | 2,021 |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Enter the totals, if any, from continuation sheet . . . . . . . . . . . . . . . |  |  |  |  |
| Enter the totals from columns (d) and (e) |  |  |  |  |

Part II Current tax year capital gains deferred by investing in QOF


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


Part III QOF investments disposed of during current tax year


Check this box if you disposed of any investment(s) and didn't receive a Form 1099-B reporting the disposition from the qualified opportunity fund or other third party. See the Instructions for Form 8949 for reporting requirements of any gain or loss.

## Part IV Total QOF investment holdings at year end due to deferrals (see instructions)

| (a) <br> Qualified Opportunity Fund (QOF) EIN | (b) <br> Date QOF investment acquired (MM/DD/YYYY) | (c) <br> Description of interest acquired (For example, 100 shares or $25 \%$ interest) | Deferred gain invested in QOF investment |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  | Amount of short-term deferred gain invested in QOF | (e) <br> Amount of long-term deferred gain invested in QOF |
|  |  |  | 2,087 | 11,001 |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Enter the totals, if any, from continuation sheet . . . . . . . . . . . . . . . |  |  |  |  |
| Enter the totals from columns (d) and (e) |  |  |  |  |

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

2019 Line Item Estimates—All figures are estimates based on samples. Amounts of selected lines filed (in thousands of dollars)

Form 8997 (2019)

| ing current tax ye |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| (a) Qualified Opportunity Fund (QOF) EIN | (b) sold ar disposed (MMIDDMYYY) | (c) <br> Description of interest disposed (For example, 100 shares or $25 \%$ interest) | Deferred gain included due to disposition of QOF interest |  |
|  |  |  | (d) <br> Amoun of previously deferred short-term gain now included in taxable income taxable income | (e) <br> Amount of previously deferred long-term gain now included in taxable income income |
|  |  |  | * | 122,584 |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Enter the totals, if any, from continuation sheet . . . . . . . . . . . . . . |  |  |  |  |
| Enter the totals from columns (d) and (e). See instructions for reporting on Form 8949 . . |  |  |  |  |
| Check this b opportunity f | if you dispos d or other thir | tment(s) and didn't receive a Form 10 Ine Instructions for Form 8949 for repo | ting the dispos ments of any | from the qualifie or loss. |

Part IV Total QOF investment holdings at year end due to deferrals (see instructions)

| (a) Qualified Opportunity Fund (QOF) EIN | (b) <br> Date QOF investment acquired (MM/DD/YYYY) | (c) <br> Description of interest acquired (For example, 100 shares or $25 \%$ interest) | Deferred gain invested in QOF investment |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  | (d) Amount of short-term deferred gain invested in QOF | (e) <br> Amount of long-term deferred gain invested in QOF |
|  |  |  | 1,377,522 | 13,719,255 |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Enter the totals, if any, from continuation sheet . . . . . . . . . . . . . . . |  |  |  |  |
| Enter the totals from columns (d) and (e) |  |  |  |  |

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


[^0]:    * Data not shown because of the small number of sample returns on which it is based.

[^1]:    ${ }^{1}$ From Sch. F, line 9, and Sch. K-1 (Form 1065), box 14, code B.
    ${ }^{2}$ From Sch. F, line 34, and Sch. K-1 (Form 1065), box 14, code A-minus the amount you would have entered on line 1b had you not used the optional method.
    ${ }^{3}$ From Sch. C, line 31; and Sch. K-1 (Form 1065), box 14, code A. ${ }^{4}$ From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.

[^2]:    ${ }^{1}$ From Sch. F, line 9, and Sch. K-1 (Form 1065), box 14, code B.
    ${ }^{2}$ From Sch. F, line 34, and Sch. K-1 (Form 1065), box 14, code A-minus the amount you would have entered on line 1b had you not used the optional method.

[^3]:    ${ }^{3}$ From Sch. C, line 31; and Sch. K-1 (Form 1065), box 14, code A. ${ }^{4}$ From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.

[^4]:    If more lines are needed for any Part on this form, attach additional sheets.

[^5]:    * Data not shown because of the small number of sample returns on which they are based.

[^6]:    * Data not shown because of the small number of sample returns on which they are based.

[^7]:    * Data not shown because of the small number of sample returns on which they are based.

[^8]:    21 11,567,389

    22 157,591,330

[^9]:    * Data not shown because of the small number of sample returns on which they are based.

[^10]:    * Data not shown because of the small number of sample returns on which they are based.

[^11]:    * Data not shown because of the small number of sample returns on which they are based.

[^12]:    * Data not shown because of the small number of sample returns on which they are based.

[^13]:    * Data not shown because of the small number of sample returns on which they are based.

[^14]:    * Data not shown because of the small number of sample returns on which they are based.

[^15]:    * Data not shown because of the small number of sample returns on which they are based.

[^16]:    * The 2018 Qualified Dividends and Capital Gain Tax Worksheet is in the 2018 Instructions for Form 1040. The 2018 Schedule D Tax Worksheet is in the 2018 Instructions

[^17]:    * The 2018 Qualified Dividends and Capital Gain Tax Worksheet is in the 2018 Instructions for Form 1040. The 2018 Schedule D Tax Worksheet is in the 2018 Instructions

[^18]:    * Data not shown because of the small number of sample returns on which they are based.

[^19]:    * Data not shown because of the small number of sample returns on which they are based.

[^20]:    * Data not shown because of the small number of sample returns on which they are based.

