efile GRAPH	IIC p	rint - DO I	NOT PROCI	SS	ORIGI	NAL [DATA - I	Produc	tion			I	DLN:	14221	688449	9261
···1040			easury—Internal Reidual Inc			9)	202	20 0	MB No. 1	1545-00	74 sta				vr te or	^
Amended Re	eturn [Single [☐ Married filin	g jointly	✓ Ma	rried fili	ng separat	ely (MFS)) Пн	lead of H	ousehol	d (HOH)	□ Q	ualifying	widow(er)	(QW)
Filing State Check only one box	I		d the MFS box son is a child							HOH or	QW box	k, enter th	e chile	d's name	e if the	
Your first name						Last na	ame					Your s	ocial	security	y numbe	er
If joint return,			e and middle	initial	-+	Last na	ame					Spous	e's so	cial sec	urity nu	mber
Home address (r	numbe	r and street). If	you have a P.0	D. box, se	ee instruct	ions.					Apt. no					
																^
City, town, or pos	st offic	e. If you have a	a foreign addres	s, also c	omplete s	paces b	elow.	State		Τ		 Presiden Chaalaha				jn 📗
ZIP code	Fore	ign country nar	me			Foreig	gn province		unty	┨	:	Check he spouse if	filing	jointly,	want \$3	
21217											I	to go to t box belov	v will			r
Foreign postal co	ode					<u> </u>				_	t	tax or ref	_	_	_	
											_:	Spouse	L	You	Ш	_
At any time dur	ing 20	020, did you	receive, sell,	send, ex	xchange,	or oth	erwise ac	quire an	y financi	ial intere	_		currer	псу?	Yes [✓ No
Standard Deduction																^
Someone can cla	aim.	You as a d	tenendent	Vours	spouse as	a denei	ndent 🏄									
	41111.		rependent _	_ rours	pouse us	a acpci	ident 🌽									Ť
Age/Blindness																^
You: Were	born b	efore January	2 1956	Are blind	Spou	ıse:	Was bo	m before	January 2	2 1956	□ Is	blind				~
Dependents) Social se number	cur ty		elationsh you			qualifie	s for (see	instruct or	ns):
If more	(1)F	irst name	Last nam	e			Hamber			you	(Child tax cr	edt C	redit for o	other depe	ndents
than four dependents,	A		М		ø				DAUGH	TER		✓				
see instructions and check																
here																
Attach	1	Wages, sala	aries, tips, etc	. Attach	Form(s)	W-2	• :						1	%	2:	14,089
Attach Sch. B if	2a 3a	Tax-exempt Qualified div		2a 3a				TaxableOrdinary					2b 3b			
required. Standard	4a	IRA distribu		4a				b Taxab	•				4b			
Deduction for - Single or	5a	Pensions an		5a			_	b Taxab					5b		9	90,000
Married filing separately,	6a 7		rity benefits n or (loss). Att	6a	nedule D	if requ		b Taxab					6b 7			
\$12,400	8		ne from Sche						•			. • 🗆	8			0
 Married filing jointly or 	9	Add lines 1,	, 2b, 3b, 4b, 9	b, 6b, 7	7, and 8.	This is	your tot	al incor	ne			🕨	9		3(04,089
Qualifying widow(er),	10	-	s to income:						اء	_1						
\$24,800 • Head of	l a		dule 1, line 22 ontributions if y							_			1			
household, \$18,650	c		0a and 10b. T						_			▶	10c			
 If you checked 	11	Subtract lin	e 10c from lir	ne 9. Th	is is your	adjus	sted gros	s incon	ne			🕨	11		3(04,089
any box under Standard	$\overline{}$	_	deduction or				-		A)				12			12,400
Deduction, see instructions.			iness income d							• •			13			12.400
	14 15		2 and 13 . come. Subtra										14 15			12,400 91,689
For Disclosure, F											0. 1132	0B	10	Fo	rm 1040	_
													_	L 44		
												0		h. 41		
									CA	SE NO.		JKG	-22-0	007		
									IDE	ENTIFICA	ATION _					
									AD	MITTED						

Form 1040 (202	(0)								Page 2
	16	Tax(see instructions). Check if any from Form(s):	1 8814 2	4972 3				16	76,886
	17	Amount from Schedule 2, line 3				.	•	17	
	18	Add lines 16 and 17						18	76,886
	19	Child tax credit or credit for other depender	nts					19	
	20	Amount from Schedule 3, line 7 .						20	
	21	Add lines 19 and 20						21	
	22	Subtract line 21 from line 18. If zero	or less, enter -0)				22	76,886
	23	Other taxes, including self-employment	nt tax, from Sc	hedule 2, line 10	0			23	1,089
	24	Add lines 22 and 23. This is your tota	ıl tax				•	24	77,975
If you have a	25	Federal income tax withheld from:							
qualifying	а	Form(s) W-2 🕖			25a		32,20	2	
child, attach Sch. EIC.	b	Form(s) 1099 🍠 🐕			25b		9,00	_	
• If you have	С	Other forms (see instructions) 🥒 🐯			25c		41	-	
nontaxable	d	Add lines 25a through 25c						25d	41,616
combat pay, see	26	_2020 estimated tax payments and am_	nount applied fr	om 2019 return	1 1			26	
instructions.	27	_ Earned income credit (EIC)			27			4	
	28	Additional child tax credit. Attach Sch			28			_	
	29	American opportunity credit from Form	•		29			-	
	30	Recovery rebate credit. See instructio			30			-	
	31	Amount from Schedule 3, line 13.			31			┦ │	
	32	Add lines 27 through 31. These are you		• •			ts. 🟲	32	41.616
	33	Add lines 25d, 26, and 32. These are						33	41,616
Refund	34	If line 33 is more than line 24, subtractions of the 24 subtractions and the 24 subtractions of the 24 subtraction				•	rpaid 	34	
Direct deposit?		Amount of line 34 you want refunded	to you. If For	m 8888 is attac	nea, cne	ck nere	▶ ∟	35a	
See instructions.	►b ►d	Routing number Account number		▶ c Type: □	Checkir	ng 📙 S	Savings		
			2024 aatimata	l tou	36				
Amount	36 37	Amount of line 34 you want applied to you			30		_	37	36,359
Amount You Owe	37	Subtract line 33 from line 24. This is t Note: Schedule H and Schedule SE fil	-		all of the	o tayor you	owo for	3/	30,339
For details on		2020. See Schedule 3, line 12e, and i			all Of the	e taxes you	owe ioi		
how to pay, see	38	Estimated tax penalty (see instruction			38				
instructions. Third Party		you want to allow another person to o	•						
Designee		structions			▶	✓ Yes. 🤆	Complete	below.	□ No
-		esignee's	Pho	one			identifica		
		me JUDE J COVAS		(703) 218		number	, ,		*****
Sign Here		der penalties of perjury, I declare that I have examir rect, and complete. Declaration of preparer (other the						my knowl	edge and belief, they are true,
	Yo	our signature		Date	Your oc	cupation			RS sent you an
Joint return?	**	****		10-15-2021	STATES	ATTORNEY		ldentity it here	Protection PIN, enter
See								(see in	<u>st.) </u>
instructions. Keep a copy for		ouse's signature. If a joint return, both must	sign.	Date	Spouse'	s occupatio			RS s ent your spouse I ntity Protection PIN,
your records.	,							enter it	
•		(52.1) 522 522						(see ins	st.)
		one no. (604) 633-8328 parer's name	Preparer's sign	Email address	Date	YNMOSBY@	PTIN HOTMAIL	-COM	Check if:
Paid		DE J COVAS	Treparer 3 sign	lature	Date		P000672	63	
Preparer	Fire		OVCE				Ιp	hone n	Self-employed 0. (703) 218-3600
Use Only		II S HAITHEW S CARTER & D	OTCL					none m	0. (703) 216-3000
,									
	Fir	n's address ▶ 12500 FAIR LAKES CIRC	LE SUITE 260				Fi	rm's EI	N ▶ 54-1487262
		FAIRFAX, VA, 22033							
		, ,							
Go to www irs g	ov/Fc	orm1040for instructions and the latest i	nformation.						Form 1040 (2020)

Software ID: Software Version:

SSN:

Spouse SSN:

Name: MARILYN J<MOSBY

Top Right Margin - Refund Product Code: NO FINANCIAL PRODUCT

Filing Status - Spouse's Name: NICHOLAS MOSBY

Header - Primary Name Control: MOSB

Header - Spouse Name Control: MOSB

Standard Deduction - Total Exempt Primary And Spouse Cnt: 1
Dependents - Children Who Lived With You Count: 1

nts children who lived with roa count. 1

Dependents - Total Exemptions Count: 2

Dependent 1 Name Control: MOSB
Line 25a - Form W-2 Tax Withheld: 32202
Line 25b - Form 1099 Tax Withheld: 9000
Line 25c - Other Tax Withheld: 414

efile GRAPHIC print - DO NO	T PROCESS	ORIG	INAL DATA -	- Pro	duction		DLI	N: 142	21688449261		
<u>\$</u>		CORRE	CTED (if ch	neck	(ed)						
PAYER'S name, street address, c ty or to foreign postal code, and phone no.	own, state or prov			1	Gross distribu		OMB No. 1545-0119	Pens	Distributions From Pensions, Annuities, Retirement or		
NATIONWIDE TRUST CO FSB A DIV OF I PO BOX 182797	NW			\$ 2a	Taxable amo	90,000 ount	2020		t-Sharing Plans, IRAs, Insurance Contracts, etc.		
COLUMBUS, OH 432182797				\$		90,000	Form 1099-R				
				2b	not determ		Total distribution		Copy B Report this income on your		
PAYER'S TIN	RECIPIENT'S T	IN	_		Capital gain (ir in box 2a)	ncluded	4 Federal Income t w thheld	ax	federal tax return. If this form shows federal income		
				\$		0	\$	9,000	tax withheld in box 4, attach		
RECIPIENT'S name MARILYN J MOSBY				/	mployee contr Designated Ro contribut ons on nsurance pren	oth or	6 Net unrealized appreciation in employer's securit	ies	this copy to your return.		
Street address (including apt. no.)					Distribution ode(s)	IRA/ SEP/ SIMPLE	\$ Other	0	This informat on is being furnished to the IRS.		
City or town, state or province, country 21217	, ZIP or foreign po	ostal code			Your percer total distr		9b Total employee contributions		6		
within 5 years	11 1st year of d Roth contr		12 FATCA filing requirement	14 \$	State tax w	thheld 0	15 State/Payer's state MD/ 0964119	\$	State distribut on 90,000		
\$ 0 Account number (see instructions)			13 Date of payment	\$ t 17 \$	Local tax w	ithheld 0	18 Name of locality	\$ / 19 \$	Local Distribution 0		
Form 1099-R			www.irs.go	\$ ov/For	m1099R		Department of the Treas	\$ sury - Inte	rnal Revenue Service		

Software ID:

Software Version:

SSN: Spouse SSN:

Name: MARILYN J<MOSBY

Payer Name Control: NATI **Standard or NonStandard Cd:** S

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DLN: 14221688449261

Form 4562

Depreciation and Amortization

OMB No. 1545-0172

rollii 1002	(Including Informa	tion on List	ed Property	')		l 2020
Department of the Treasury Internal Revenue Service (99)		► Attach to	your tax retu	rn.			Attachment
	► Go to ww	w.irs.gov/Form4562 fo	r instructions	and the latest i	nformation.		Sequence No. 179
Name(s) shown on return	n		Business	s or activity to w	hich this form	relates	Identifying number
MARILYN J <mosby< td=""><td></td><td></td><td>SINGLE</td><td>FAMILY RESIDE</td><td>NCE - 1953 N</td><td>ICE CT,</td><td></td></mosby<>			SINGLE	FAMILY RESIDE	NCE - 1953 N	ICE CT,	
		rtain Property Under					
		ed property, complete F	Part V before y	ou complete P	art I.		
	(see instructions) •	ed in service (see instruction	ne)			2	
		before reduction in limitati	•			3	
		from line 2. If zero or less	•			4	
		line 4 from line 1. If zero o		. If married filing	separately,		
see instructions						5	
6	(a) Description of pr	roperty	(b) Cost (bus		(c) Elected co	st	
			,				
7 Listed property. Er	nter the amount from	ı line 29		. 7			
		rty. Add amounts in colum		d7 · · · ·		8	
		r of line 5 or line 8 · · ·				9	
•		line 13 of your 2019 Form				10	
11 Business income li instructions.	mitation. Enter the s	maller of business income	(not less than 2	ero) or line 5. Se		11	
	se deduction. Add lin	nes 9 and 10, but don't ent	er more than lin	ne 11 • •		12	
•		021. Add lines 9 and 10, le		▶ 13			
		w for listed property. In					
Part II Special D	epreciation Allo	wance and Other Dep	preciation (D	on't include list	ed property.	See ins	tructions.)
14 Special depreciation	n allowance for qual	ified property (other than I	isted property)	placed in service	during the		
tax year. See instr	ructions. • • • •					14	
15 Property subject to	section 168(f)(1) el	lection • • • • •				15	
<u> </u>	(including ACRS) •					16	
Part III MACRS	Depreciation (Do	on't include listed prope		uctions.)			
17 MACRS deductions	for accets placed in	service in tax years begin	ection A			17	
		placed in service during th				17	
accounts, check he		placed in service during tr			• 🗌		
				C D		<u> </u>	
Section B—A	ssets Placed in Sel	rvice During 2020 Tax Y (c) Basis for	ear using the	Generai Depred 	lation Syste	<u>m</u>	
(a) Classification of	(b) Month and	depreciation	(d) Recovery			.	(g)Depreciation
property	year placed in service	(business/investment use	period	(e) Convention	(f) Meth	od	deduction
	Service	only—see instructions)					
19a 3-year property							
b 5-year property	_					-	
c 7-year property d 10-year property	\dashv					\dashv	
e 15-year property	\neg					\neg	
f 20-year property							
g 25-year property			25 yrs.		S/L		
h Residential rental	2020-09	189,791	27.5 yrs.	MM	S/L		2,013
property			27.5 yrs.	MM MM	S/L S/L	-	
i Nonresidential real property			39 yrs.	MM	S/L	-	
	on C—Assets Place	d in Service During 2020	0 Tax Year Usi			tion S	ystem
20a Class life				<u> </u>	S/L		
b 12-year			12 yrs.		S/L		
c 30-year			30 yrs.	MM	S/L		
d 40-year Part IV Summ	ary (See instructi	one)	40 yrs.	MM	S/L		
		28				21	
		28 · · · · · · · · · · · · · · · · · · ·		a), and line 21	nter here	21	
		rn. Partnerships and S cor	-			22	2,013

23

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 12906N

Form **4562** (2020)

Form 4562 (2020) Page **2**

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.) **24b** If "Yes," is the evidence written? LYes No (c) (i) Elected (b) (d) (f) (h) (a) (g) Basis for depreciat on (business/investment Type of property (list Date placed in investment Cost or other Method/ Depreciation/ section 179 veh cles first) service use basis period Convent on deduction use only) cost percentage 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 26 Property used more than 50% in a qualified business use: % 27 Property used 50% or less in a qualified business use: S/L % S/L S/L -28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 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. (a) (b) (d) (f) (c) (e) Vehicle 2 Vehicle 3 Vehicle 1 Vehicle 4 Vehicle 5 Vehicle 6 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 Yes No Yes No Yes No Yes No Yes No Yes No 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? 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. Yes No 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? 38 See the instructions for vehicles used by corporate officers, directors, or 1% or more owners $\dots \dots$ 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? **41** Do you meet the requirements concerning qualified automobile demonstration use? See instructions. . Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles. Part VI Amortization (b) (e) (f) (c) (d) Date (a) Amortization Amortizable Code Amortization for Description of costs amortization period or amount section this year begins percentage 42 Amortization of costs that begins during your 2020 tax year (see instructions): 43

Form **4562** (2020)

44

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

Software ID:

Software Version:

SSN: Spouse SSN:

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Form **6251**

Alternative Minimum Tax—Individuals

DLN: 14221688449261 OMB No. 1545-0074

Attachment

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

Sequence No. 32

2a If Jiling Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040 Jine 12		(s) shown on Form 1040, Form 1040-SR, or Form 1040NR _YN J <mosby< th=""><th>Your so</th><th>ocial security number</th></mosby<>	Your so	ocial security number
1. Eiter the amount from Form 1040 or 1940-SR, line 15, it more than zero. If form 1040 or 1040-SR, line 15, it zero, subtract lines 12 and 13 of Form 1040 or 1040 or 1040-SR had enter the result here. (If less than zero, enter as a negative amount.) 2. If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040, line 12. 2. If thing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040, line 12. 2. If view the second of the seco	Pa	rt Alternative Minimum Taxable Income (See instructions for how to complete ea	ch line	2.)
Form 1040, line 12 . 2a 12,400 b Tax refund from Schedule 1 (Form 1040) line 10 or line 21 . 2b . (c Investment interest expense (difference between regular tax and AMT) . 2c . 2c . (d Depletion (difference between regular tax and AMT) . 2c . 2d		Enter the amount from Form 1040 or 1040-SR, line 15, if more than zero. If Form 1040 or 1040-SR, line 15, is zero, subtract lines 12 and 13 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the result here. (If less than zero, enter as a negative amount.)	1	291,689
c Investment interest expense (difference between regular tax and AMT) . 2d . 2	2a			12,400
d Depletion (difference between regular tax and ANT). e Net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount 2	b	Tax refund from Schedule 1 (Form 1040) line 10 or line 21	2b	()
e Net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount f Alternative tax net operating loss deduction	c	Investment interest expense (difference between regular tax and AMT)	2 c	
f Alternative tax net operating loss deduction g Interest from specified private activity bonds exempt from the regular tax A Qualified small business stock, see instructions 1 Exercise of incentive stock options (excess of AMT Income over regular tax income) 2 Exercise of incentive stock options (excess of AMT Income over regular tax income) 2 Exercise of incentive stock options (excess of AMT Income over regular tax income) 2 Exercise of incentive stock options (excess of AMT Income over regular tax income) 2 Exercise of incentive stock options (excess of AMT Income over regular tax and AMT) 2 Exercise of incentive stock options (excess of AMT and regular tax and regular tax and AMT) 3 Exercise of incentives (difference between AMT and regular tax income or loss) 4 Income regular tax and AMT) 5 Income from contracts (difference between AMT and regular tax income) 6 Includition costs (difference between AMT and regular tax income) 7 Income from certain installment sales before January 1, 1987 8 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment sales before January 1, 1987 9 Income from certain installment January 1, 1987 9 Income from certain installment January 1, 1987 9 Income from certain installment January 1, 1987 9 Inc	d	Depletion (difference between regular tax and AMT)	2d	
g Interest from specified private activity bonds exempt from the regular tax	e	Net operating loss deduction from Schedule 1 (Form 1040), line 8. Enter as a positive amount	2e	
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). 2] k Disposition of property (difference between AMT and regular tax again or loss). 2k Deprecation 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). 2n Occuration costs (difference between AMT and regular tax income or loss). p Long-term contracts (difference between AMT and regular tax income). p Long-term contracts (difference between regular tax and AMT). p Long-term contracts (difference between regular tax and AMT). p Long-term contracts (difference between regular tax and AMT). r Research and experimental costs (difference between regular tax and AMT). 2q Tr Research and experimental costs (difference between regular tax and AMT). 21 Tr Common from certain installment sales before January 1, 1987. 22 Tr Common from certain installment sales before January 1, 1987. 23 Other adjustments, including income-based related adjustments. 3 Alternative minimum tax able income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$745,200, see instructions.). 3 Alternative Minimum tax (AMT) 5 Exemption. If your filing status is AND line 4 is not over THEN enter on line 5 Single or head of household \$ 5.18,400 \$ 72,900 Married filing separately \$ 518,400 \$ 56,700 If Jine 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 from line 40 here. • All others: If line 6 is \$197,900 or less (\$98,950 or less if married	f	Alternative tax net operating loss deduction	2f	()
i Exercise of incentive stock options (excess of AMT income over regular tax income) . 2 i j Estates and trusts (amount from Schedule K-1 (Form 1041), tox 12, code A)	g	Interest from specified private activity bonds exempt from the regular tax	2 g	
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). 2k 1 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). 2 co Circulation costs (difference between AMT and regular tax income or loss). 2 co Circulation costs (difference between AMT and regular tax income or loss). 2 co Circulation costs (difference between AMT and regular tax income or loss). 2 co Circulation costs (difference between AMT and regular tax and AMT). 2 co Circulation costs (difference between AMT and regular tax and AMT). 2 co Circulation costs (difference between regular tax and AMT). 2 co Circulation costs (difference between regular tax and AMT). 2 cr Circulation costs (difference between regular tax and AMT). 2 cr Circulation costs (difference between regular tax and AMT). 2 cr Circulation costs (difference between regular tax and AMT). 2 cr Circulation costs (difference between regular tax and AMT). 2 cr Circulation costs (difference between regular tax and AMT). 2 cr Circulation costs (difference between regular tax and AMT). 2 cr Circulation costs (difference between regular tax and AMT). 2 cr Circulation costs (difference between regular tax and AMT). 3 cr Circulation costs (difference between regular tax and AMT). 3 cr Circulation costs (difference between regular tax and AMT). 3 cr Circulation costs (difference between regular tax and AMT). 3 cr Circulation costs (difference between regular tax and AMT). 3 cr Circulation costs (difference between regular tax and AMT). 3 cr Circulation costs (difference between regular tax and AMT). 3 cr Circulation costs (difference between regular tax and AMT). 3 cr Circulation costs (difference between regular tax and AMT). 4 cr Circulation costs (difference between regular tax and AMT). 4 cr Circulati	h	Qualified small business stock, see instructions	2h	
k Disposition of property (difference between ART and regular tax gain or loss) . 2k 1 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) . 2l 2m 2m 2m 2m 2m 2m 2m	i	Exercise of incentive stock options (excess of AMT income over regular tax income)	2 i	
I Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) . 2m In Passive activities (difference between AMT and regular tax income or loss) . 2m I Loss limitations (difference between AMT and regular tax income or loss) . 2n Circulation costs (difference between regular tax and AMT) . 2o I Long-term contracts (difference between regular tax and AMT) . 2p I Mining costs (difference between regular tax and AMT) . 2p I Research and experimental costs (difference between regular tax and AMT) . 2r I Research and experimental costs (difference between regular tax and AMT) . 2r I Intensible drilling costs preference . 21 I Other adjustments, including income-based related adjustments . 21 I Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$745,200, see instructions.) . 4 I Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$745,200, see instructions.) . 4 If your filing status is AND line 4 is not over THEN enter on line 5 Single or head of household \$ 518,400 \$ 72,900 Married filing separately \$ 518,400 \$ 56,700 \$ 56,700 If line 4 is over the amount shown above for your filing status, see instructions. Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9 and 11, and go to line 10 . 6 247,385 7 • If you are filing form 2555, see instructions for the amount to enter. • All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply. line 6 by 28% (0.26). Otherwise, multiply line 6 by 28% (0.26). Other	j		2j	
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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. dt Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$745,200, see instructions.). 4 Alternative minimum Tax (AMT) 5 Exemption. If your filing status is AND line 4 is not over THEN enter on line 5 Single or head of household . \$ 518,400 . \$ 72,900 Married filing jointly or qualifying widow(er) 1,036,800 . If line 4 is over the amount shown above for your filing status, see instructions. Subtract line 5 from line 4 . If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9 and 11, and go to line 10 . f If you are filing Form 2555, see instructions for the amount to enter. If you are filing Form 2555, see instructions for the amount to enter. If you reported qualified dividends on Form 1040 or 1040-SR, line 3; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) or 1040-SR, line 3; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if mereissary), complete Part III on the back and enter the amount from line 40 here. • All others: If line 6 is \$197,900 or less (\$98,950 or less if married filing separately), multiply, line 6 by 26% (0.26) of therwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979) if married filing separately) from the result. 8 Alternative minimum tax. Subtract line 8 from line 7. 9 67,291 10 Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule 1 to figure your tax on Form 1040 or 1040-SR, line 16,				
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3 Other adjustments, including income-based related adjustments	_	• •	$\overline{}$	()
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IF your filing status is AND line 4 is not over THEN enter on line 5 Single or head of household \$ 518,400 \$ 72,900 Married filing jointly or qualifying widow(er) 1,036,800			1	
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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			. 5	56,700
lines 7, 9 and 11, and go to line 10	6			
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line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979) if married filing separately) from the result. 8 Alternative minimum tax foreign tax credit (see instructions)		if necessary), complete Part III on the back and enter the amount from line 40 nere.		
9 Tentative minimum tax. Subtract line 8 from line 7		line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,958 (\$1,979)		
9 Tentative minimum tax. Subtract line 8 from line 7	8	Alternative minimum tax foreign tax credit (see instructions)	R	
10 Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result any foreign tax credit from Schedule 3 (Form 1040), line 1. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see instructions)	9	Tentative minimum tax. Subtract line 8 from line 7		67,290
to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line (see instructions)	10			2.725
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),			10	76 886
	11	, , ,		, 5,000
			11	0

Form 6251 (2020) Page **2**

Par	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	in the instructions.	-
12	Enter the amount from Form 6251, line 6. If you are filing Form 2555, enter the amount from line 3 of the worksheet in the instructions for line 7	12	
13	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040 and 1040-SR or the amount from line 13 of the Schedule D Tax Worksheet in the Instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555, see instructions for the amount to enter	13	
14	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555, see instructions for the amount to enter	14	
15	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see instructions for the amount to enter	15	
16	Enter the smaller of line 12 or line 15	16	
17	Subtract line 16 from line 12	17	
18	If line 17 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result	18	
19	Enter: • \$80,000 if married filing jointly or qualifying widow(er), • \$40,000 if single or married filing separately, or • \$53,600 if head of household.	19	
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 15; if zero or less, enter -0 If you are filing Form 2555, see instructions for the amount to enter	20	
21	Subtract line 20 from line 19. If zero or less, enter -0	20	
	Enter the smaller of line 12 or line 13	22	
	Enter the smaller of line 21 or line 22. This amount is taxed at 0%	23	
	Subtract line 23 from line 22	24	
		24	
25	Enter: • \$441,450 if single		
	• \$248,300 if married filing separately	35	
	• \$441,450 if single • \$248,300 if married filing separately • \$496,600 if married filing jointly or qualifying widow(er) • \$469,050 if head of household	25	
26	Enter the amount from line 21	26	
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 15; if zero or less, enter -0 If you are filing Form 2555, see instructions for the amount to enter	27	
28	Add line 26 and line 27	28	
29	Subtract line 28 from line 25. If zero or less, enter -0	29	
	Enter the smaller of line 24 or line 29	30	
	Multiply line 30 by 15% (0.15)	31	
	Add lines 23 and 30	32	
	If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33.		
33	Subtract line 32 from line 22	33	
	Multiply line 33 by 20% (0.20)	34	
	If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35.		
35	Add lines 17, 32, and 33	35	
	Subtract line 35 from line 12	36	
	Multiply line 36 by 25% (0.25)	37	
	Add lines 18, 31, 34, and 37	38	
	If line 12 is \$197,900 or less (\$98,950 or less if married filing separately), multiply line 12 by 26%		
J	(0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$3,958 (\$1,979 if married filing separately) from the result	39	
40	Enter the smaller of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7	40	
		. TU I	

Form **6251** (2020)

Software ID: Software Version:

SSN: Spouse SSN:

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DLN: 14221688449261

Form **8959**

Additional Medicare Tax

OMB No. 1545-0074

Department of the Treasury

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

Go to www.irs.gov/Form8959 for instructions and the latest information. Internal Revenue Service Sequence No. 71 Name(s) shown on return Your social security number MARILYN J<MOSBY Additional Medicare Tax on Medicare Wages Medicare wages and tips from Form W-2, box 5. If you have 1 more than one Form W-2, enter the total of the amounts from box 5 1 245.987 Unreported tips from Form 4137, line 6 2 Wages from Form 8919, line 6 3 3 Add lines 1 through 3 4 245,987 Enter the following amount for your filing status: \$125,000 Single, Head of household, or Qualifying widow(er) . . 125,000 \$200,000 120,987 Subtract line 5 from line 4. If zero or less, enter -0- Additional Medicare tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and 1.089 Additional Medicare Tax on Self-Employment Income 8 Self-employment income from Schedule SE (Form 1040). Section A, line 4, or Section B, line 6. If you had a loss, enter -0- (Form 1040-PR or Form 1040-SS filers, see instructions.) 8 Enter the following amount for your filing status: \$250,000 \$125,000 Single, Head of household, or Qualifying widow(er) . . \$200,000 Q 125,000 Enter the amount from line 4 245,987 10 Subtract line 10 from line 9. If zero or less, enter -0-11 12 Subtract line 11 from line 8. If zero or less, enter -0-12 Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions) 14 Enter the following amount for your filing status: 15 Married filing jointly \$250,000 Married filing separately \$125,000 . . \$125,000 Single, Head of household, or Qualifying widow(er) . . \$200,000 15 125,000 Subtract line 15 from line 14. If zero or less, enter -0- 16 Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 17 Part IV **Total Additional Medicare Tax** Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 8 (check box a) (Form 1040-PR or 1040-SS filers, see instructions), and go to Part V 18 1,089 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 19 3.981 Enter the amount from line 1 20 245,987 Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages . . . 3,567 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax 22 414 Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, 23 23 box 14 (see instructions) Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25 (Form 1040-PR or 1040-SS filers, see instructions) 24 414

Software ID:

Software Version:

SSN: Spouse SSN:

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 $_{\text{Form}}\,8960$

Net Investment Income Tax—

OMB No.1545-2227

		individuals, Estates, and	ırusts		2020
Internal	nent of the Treasury Revenue Service (99)	► Attach to your tax retur ► Go to www.irs.gov/Form8960 for instructions a	and the latest information		Attachment Sequence No. 72
	s) shown on your tax LYN J <mosby< th=""><th>return</th><th>Y</th><th>our social</th><th>security number or EIN</th></mosby<>	return	Y	our social	security number or EIN
1000	21113 (11002)				
Dai	rt I Investm	ent Income Section 6013(g) election (see instructions)			
ı dı	investm	ent Income Section 6013(g) election (see instructions) Section 6013(h) election (see instructions)			
		Regulations section 1.1411-10(g) election ((see instructions)		
1	Taxable interest ((366 III3u dedolis)	1	
2		s (see instructions)		2	
3	Annuities (see ins			3	
4a	Rental real estate	, royalties, partnerships, S corporations, trusts, etc.			
	(see instructions)		ła		
b		et income or loss derived in the ordinary course of a non- e or business (see instructions)	lb		
c	Combine lines 4a	and 4b		4c	
5a	Net gain or loss fr	rom disposition of property (see instructions) • • • 5	ia		
b	Net gain or loss fr	om disposition of property that is not subject to net	i	-	
			ib		
c	Adjustment from (see instructions)	disposition of partnership interest or S corporation stock	ic		
d	Combine lines 5a	through 5c		5d	
6	Adjustments to in	vestment income for certain CFCs and PFICs (see instructions)		6	
7		ns to investment income (see instructions)		7	
8		income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7		8	
		ent Expenses Allocable to Investment Income and			
		' ` `)a	-	
			Ob	-	
С.			OC	┩	
	Add lines 9a, 9b,			9d	
10 11		ations (see instructions) and modifications. Add lines 9d and 10		10 11	
		putation		111	
12	Net investment in	come. Subtract Part II, line 11 from Part I, line 8. Individuals cos complete lines 18a-21. If zero or less, enter -0-	mplete lines 13–17.	12	
	Individuals:				
13		gross income (see instructions)	304,0	89	
14	-	· · · · ·	.4 125,0	_	
15		-	.5 179,0	_	
16	Enter the smaller	of line 12 or line 15		16	
17		come tax for individuals. Multiply line 16 by 3.8% (.038). include on your tax return (see instructions)		17	
	Estates and Tru	sts:		l l	
		` <i>'</i>	8a	4	
Ь		tributions of net investment income and deductions (c) (see instructions)	8b		
c		investment income. Subtract line 18b from 18a . If zero or less, enter -0	8c	_	
19a	Adjusted gross in	come (see instructions) 19	9a		
b	Highest tax brack	et for estates and trusts for the year (see instructions)	9b	⊣ ∣	
c	Subtract line 19b	from line 19a. If zero or less, enter -0 1	9c	_	
20		of line 18c or line 19c		20	
21		come tax for estates and trusts. Multiply line 20 by 3.8% (.038) include on your tax return (see instructions)		3.	
For P		tion Act Notice, see your tax return instructions.	Cat. No. 59474M	21	Form 8960 (2020)
					10mm 0500 (2020)

Software ID: Software Version:

SSN:

Spouse SSN:

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TY 2020 Gen Dep

Name: MARILYN J<MOSBY

SSN:

Spouse SSN:

Business Name or Person Name: Taxpayer Identification Number:

Form, Line or Instruction Reference:

Regulations Reference:

Description: SECTION 1.263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION

Attachment Information: MARILYN J. MOSBY IS MAKING THE DE MINIMIS SAFE HARBOR

ELECTION UNDER REG. SEC. 1.263(A)-1(F).

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efile GRAPHIC print - DO NOT PROCESS ORIGINAL D	ATA - Production DLN: 14221688449261
TY 2020 Other Tax Statement	
Name: MARILYN J	<mosby< th=""></mosby<>
SSN:	
Spouse SSN:	
Other Tax Literal or Tax Text	Other Tax Amount
FROM FORM 8959	1.089

efile GRAPHIC print - DO NOT PROCESS ORIGINAL DATA - Production DLN: 14221688449261

TY 2020 Other Withholding Statement

Name: MARILYN J<MOSBY

SSN:
Spouse SSN:

Withholding Code or Withholding Txt

FORM 1099

DLN: 14221688449261

Withholding Statement

Withholding Amount

9,000

efile GRAPHIC print - DO NOT PROCESS ORIGINAL DATA - Production

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

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

OMB No. 1545-0074 Attachment

DLN: 14221688449261

Department of the Treasury

▶Go to www.irs.gov/Form1040 for instructions and the latest information. Internal Revenue Service Sequence No. 01 Name(s) shown on Form 1040 1040-SR, or 1040-NR Your social security number MARILYN J<MOSBY Part I **Additional Income** Taxable refunds, credits, or offsets of state and local income taxes 1 1 **2**a Date of original divorce or separation agreement (see instructions) 4 Other gains or (losses). Attach Form 4797 5 5 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 📆 Farm income or (loss). Attach Schedule F 6 7 Unemployment compensation 7 Other income. List type and amount 8 8 9 9 Combine lines 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8. Part II **Adjustments to Income** 10 10 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach 11 Health savings account deduction. Attach Form 8889 12 12 13 Moving expenses for members of the Armed Forces. Attach Form 3903 13 Deductible part of self-employment tax. Attach Schedule SE 14 14 Self-employed SEP, SIMPLE, and qualified plans 15 15 16 16 17 17 18a b Date of original divorce or separation agreement (see instructions) 19 20 20 Tuition and fees deduction. Attach Form 8917 21 21

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

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

Cat. No. 71479F

Schedule 1 (Form 1040) 2020

Software ID: Software Version:

ile version:

SSN: Spouse SSN:

efil	e GRAPHIC pr	int - DO NOT PROCESS	ORIGINAL DATA - Production			DLI	N: 14221688449261
	HEDULE 2 1 1040)		Additional Taxes				OMB No. 1545-0074
	ment of the Treasury I Revenue Service		tach to Form 1040, 1040-SR, or 104 ov/Form1040 for instructions and the		nation.		Attachment Sequence No. 02
	(s) shown on Form 1 YN J <mosby< td=""><td>040, 1040-SR or 1040-NR</td><td></td><td></td><td>Your soc</td><td>ial secu</td><td>rity number</td></mosby<>	040, 1040-SR or 1040-NR			Your soc	ial secu	rity number
	rt I Tax						
1	Alternative minir	num tax. Attach Form 6251				1	
2	Excess advance	premium tax credit repayment.	Attach Form 8962			2	
3	Add lines 1 and 2	2. Enter here and include on Fo	rm 1040, 1040-SR, or 1040-NR, line 17			3	0
Pai	rt II Other T	axes					
4	Self-employment	t tax. Attach Schedule SE				4	
5	Unreported socia	al security and Medicare tax fro	m Form: a 4137 b 891	.9		5	\$
6	Additional tax or 5329 if required	IRAs, other qualified retirement	nt plans, and other tax-favored accounts	a. Attach Form		6	
7a	Household emplo	oyment taxes. Attach Schedule	н			7a	
b	Repayment of fir	st-time homebuyer credit from	Form 5405. Attach Form 5405 if require	ed		7 b	
8	_	a ☑ Form 8959 b ☐ ons; enter code(s)	Form 8960			8	1,089
9	Section 965 net	tax liability installment from Fo	rm 965-A 9				
10			ner taxes. Enter here and on Form 1040			10	1,089
	aperwork Reductio Iditional Da	n Act Notice, see your tax return ta	instructions. Cat. No. 71478U			Sche	dule 2 (Form 1040) 2020

Software ID:

Software Version: SSN:

Spouse SSN:

efile GRAPHIC print - DO NOT PROCESS | ORIGINAL DATA - Production

DLN: 14221688449261

OMB No. 1545-0074

SCHEDULE E

Supplemental Income and Loss

(For	rm 1040)	(From	rental real esta		oyalties, partnership		orpo	orations, esta	tes,	20	20
	tment of the Treasury		_		trusts, REMICs, etc.	•				Attachn	nont
nterna	al Revenue Service (99)				orm 1040, 1040-SR, 1040-N neduleE for instructions and			rmation.			ce No. 13
	()		2 00 10 1111111315	,01,00	Teacher for insuractions and						
	e(s) shown on retur ILYN J <mosby< td=""><td>m</td><td></td><td></td><td></td><td></td><td></td><td>Your so</td><td>ciai se</td><td>curity nu</td><td>mber</td></mosby<>	m						Your so	ciai se	curity nu	mber
Pa	rt I Income or	Loss Fron	n Rental Real E	state	and Royalties Note:	If you a	re in	the business of	f rentir	ng persor	nal
				tions).	If you are an individua	l, repor	t far	m rental income	or los	ss from F	orm
A	4835 on pa			equire	you to file Form(s) 1099?	(coo inct	ructio	ons)	П.,		
B			e all required Forms	•		•		•		s ☑ No	
	ii ies, did you c	n will you file	e all required rorms	1033		• • •	•		⊔ Yes	s 🗆 No	
1a	Physical address	of each pro	perty (street, city	. state	, and ZIP code)						
Α	1953 NICE CT		, , , , , , , , , , , , , , , , , , , ,		,						
	KISSIMMEE, FL 34	747									
B C											
	Type of Pro	perty	2 For each re	untal r	aal actata proporty lista	vd.		Fair Rental	Per	rsonal	
1b	(from list be				eal estate property liste number of fair rental an			Days		Days	QJV
Α	VACATION/SHORT- RENTAL	-TERM			Check the QJV box onl	y if	Α	37		61	
В	KLNTAL				irements to file as a ure. See instructions.		В				
			quamica join		arer see monactions.		\vdash][
C	f D						C				Ш
	pe of Property: Single Family Reside	nce	3 Vacation/Short-To	erm Re	ntal 5 Land		7	Self-Rental			
2 N	Aulti-Family Residen	ice .	4 Commercial		6 Royalties		8	Other (describe)			
Inco	ome:		Properties:		Α			В		С	
3	Rents received			3	11,284						
4	Royalties receive	ed		4							
_	enses:			_							
5 6	Advertising Auto and travel	· · · · (see instructi	ions) .	5 6							
7	Cleaning and ma	-		7	362						
8	Commissions			8	1,617						
9	Insurance			9	243						
10 11	Legal and other Management fee		rees .	10 11							
12	Mortgage interes	st paid to bar	nks,								
	etc. (see instruc	tions)		12	4,836						
13 14	Other interest Repairs			13							
15	Supplies			15							
16	Taxes			16	1,660						
17	Utilities Depreciation exp	· · · ·		17 18	549 2 ,013						
18 19	Other (list)	cuse or depl	edon · · · ·	10							
	CECLIDITY				28						
	PEST CONTROL				45						
	HOA DUES				812						
	MISCELLANEOUS	EXPENS			504						
	MORTGAGE INSU	JRANCE P		19	343						
20	Total expenses.		_	20	13,012						
21	Subtract line 20 (royalties). If res		rents) and/or 4 s), see instructions								
22	to find out if you	ı must file Fo	rm 6198 · ·	21	0						
22	Deductible renta limitation, if any										
	instructions)		on line 2.5 "	22	()	22-		()			()
23a			on line 3 for all rer		•	23a		11,284			
b			on line 4 for all roy		•	23b					
С.			on line 12 for all p			23c		4,836			
М	Total of all amou	inte renorted	on line 18 for all n	ronerti	96	13.34		2 013			

24 ^e	Total of all amounts reported on line 20 for all properties include any losses . 23e	24	
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	()
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	26	0

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11344L

Schedule E (Form 1040) 2020

Page 2

	e(s) shov ILYN J <m< th=""><th>vn on return. Do not ente IOSBY</th><th>r name</th><th>and social security</th><th>/ numbe</th><th>er if shown on</th><th>other</th><th>side.</th><th>Your</th><th>socia</th><th>al security</th><th>number</th></m<>	vn on return. Do not ente IOSBY	r name	and social security	/ numbe	er if shown on	other	side.	Your	socia	al security	number
	ion: The rt II	IRS compares amounts Income or Loss Fro of stock, or receive a attach the required b risk, you must check	m Par loan ro asis co	tnerships and a epayment from a mputation. If yo	S Corp an S co u repo	orations - I orporation, y rt a loss fror	Note ou m n an	If you report a loust check the boat-risk activity fo	x in co r which	lumı h an	n (e) on li y amount	ne 28 and
27	loss fror	reporting any loss not al n a passive activity (if th wered "Yes," see instruct	lowed ir at loss v	n a prior year due t was not reported o	o the a	t-risk or basis 8582), or unre	limita eimbu	tions, a prior year u	ınallowe penses?	ed ? If	☐ Yes	□ No
28		(a)Name	(b)	Enter P for partnersh for S corporat on	ip; S	(c)Check if foreign partnership		(d)Employer identificat on numbe		com	neck if basis putation is equired	(f)Check if any amount is not at risk
Α												
В												
С												
D												
		Passive Income	and Lo	oss	,		No	npassive Incom	ne and	Los	SS	
		Passive loss allowed Form 8582 if required)) Passive income m Schedule K-1		i) Nonpassive lo ed (see Schedu		(j) Sect on 179 deduction from Fo				ssive income hedule K-1
A B					+							
С												
D										Į.		
	Totals											
	Totals		20							30		
30 31		umns (h) and (k) of line umns (g), (i), and (j) of					: :			31		()
32	Total p	partnership and S corp			. Comb	ine lines 30 a	nd 31.			32	:	
	rt III	Income or Loss Fro	m Esta	ates and Trusts	5							
33				(a) Name					(b) Emp	ployer identifi	cation number
A B												
ь		Passive I	ncome	and Loss				Nonpassiv	e Inco	me	and Loss	
A		Passive deduct on or loss alloattach Form 8582 if require		(d) Pass from Sc l	ive incor nedule K			(e) Deduction or loss from Schedule K-1			(f) Other inco Schedu	
В												
34a	Totals											
b	Totals											
35 36		umns (d) and (f) of line I umns (c) and (e) of line								35 36		()
37		estate and trust income		ss). Combine lines	 : 35 and	136				37	_	()
	rt IV	Income or Loss Fro		•					Residu			
38		(a) Name	ide	(b) Employer entificat on number	Sche	cess inclusion fro edules Q , line 20 ee instructions)		(d) Taxable income (n from Schedules Q , I				come from les Q, line 3b
20	C	an and comment of the second	J	an the annual to	ر ان المسا		1 4 11 11	no 41 holow		1		
39	rt V	ne columns (d) and (e) or	ily. Ente	er the result here a	ina incil	ide in the tota	ı on ıı	ne 41 below		39	'	
40		Summary m rental income or (loss)	from F	orm 4835. Also, o	omplete	e line 42 belov	v .			40) [
41	Total i	ncome or (loss). Comb	ne lines	•	nd 40. E	nter the resul		and on Schedule 1	(Form	41		
42 43	and fish box 14, K-1 (Fo Recond profess	ciliation of farming and ning income reported on , code B; Schedule K-1 (form 1041), box 14, code ciliation for real estate ional (see instructions), come on Form 1040, Form	Form 48 Form 11 F (see in profesenter the	335, line 7; Schedu 20-S), box 17, coonstructions) sionals. If you we e net income or (lo	lle K-1 (le AC; a ere a rea oss) you	(Form 1065), and Schedule in the state reported	42			_		
	estate a	activities in which you ma		participated under			42			-		
	1033 101				• •		43			chod	ulo E /Form	n 1040) 2020
										Lilei	ule c crori	N 1040) 2070

Software ID:

Software Version:

SSN: Spouse SSN:

efile GRAPHIC print - DO NOT PROCESS ORIGINAL DATA - Prod					ction DLN: 14221688449261				
∌	a Employee's social security	number	OMB No. 1545-0		afe, accur AST! Use		file	Visit the IRS webs te at www.irs.gov/efile.	
b Employer identification 52-6000769	on number (EIN)	_		1 Wages	, tips, other	compensation 214,089	2	Federal income tax withheld 32,202	
c Employer's name, add				3 Social	security w	ages 137,700	4 :	Social secur ty tax w thheld 8,537	
401 E FAYETTE RM 8				5 Med ca	ire wages a	and tips	6	Medicare tax withheld	
BALTIMORE, MD 21	202			7 Social	security tip		8	3,981 Allocated tips	
d Control number				9		0	10 [0 Dependent care benefits	
								0	
e Employee's first name MARILYN J MOSBY	e and in tial Last name		Suff.	11 Nonqu	ualified plan	ns O	12a c C	See instructions for box 12 566	
				13Statutory employee		t Third-party sick pay	12b	ı	
f Employee's address a	and ZIP code			14 Other			12c c Di	D 21,825	
							12d		
15 State Employer's st MD 03683527	tate ID number 16 State wage	s, tips, etc. 17 S	State income tax 16,844	18 Local wage	s, tips, etc.	19 Local inco	me tax	20 Local ty name	
	Wage and Tax Statement	l	2020		Dep	partment of the	Treasu	I ury—Internal Revenue Serv ce	

Copy B—To Be Filed With Employee's FEDERAL Tax Return. This information is being furnished to the Internal Revenue Serv ce.

Software ID: Software Version:

ware version

SSN: Spouse SSN:

Name: MARILYN J<MOSBY

Standard or NonStandard Cd: S **Line C - Employer Name Control:** MAYO

efile GRAPHIC print - DO NOT PROCESS | Production | DLN: 14221688449261

AVS Data - Get PTC Info Response

There is no AVS PTC Response for this submission.

DLN: 14221688449261

Return Index - sorted by Display Name in ascending order

Itetain Index	Recuir I Index sorted by Display Name in ascending order									
Display Name	Identifying #	Attach To	Document Type	Regulation						
1040			Form							
1099-R		1040	Form							
4562	SINGLE FAMILY RESIDENCE - 1953 NICE CT,	Schedule E (1040)	Form							
6251		1040	Form							
8959		1040, Schedule 2 (1040)	Form							
8960		1040	Form							
AVS Data PTC Info			AVSDataPTCInfo							
Gen Dep		1040	Statement							
Other Tax Statement		Schedule 2 (1040)	Statement							
Other Withholding Statement		1040	Statement							
Schedule 1 (1040)		1040	Schedule							
Schedule 2 (1040)		1040	Schedule							
Schedule E (1040)		Schedule 1 (1040)	Schedule							
W-2		1040	Form							