| Form | 1040 |
|------|------|
| Line | 16 |

| | me(s) Shown on Return hn & Jane Doe | Social Security Number 111-11-1121 |
|----------------------|--|---------------------------------------|
| | a Enter your taxable income from Form 1040, line 15 | b 120,000. |
| 3 4 | b Enter any capital gain excess attributable to qualified dividends . c Subtract line 2b from line 2a Amount from Form 4952, line 4g a Amount from Form 4952, line 4e 4 a | |
| 5 6 7 | next to Form 4952, line 4e b c Line 4b, if applicable, 4a, if not . c Subtract line 4c from line 3 5 Subtract line 5 from line 2c. If zero or less, enter -0 a Enter line 15 of Schedule D 7a b Enter line 16 of Schedule D b a Enter line 16 of Schedule D b b Enter the amellow of line 7b b = 5 + 5 + 5 + 5 + 5 + 5 + 5 + 5 + 5 + 5 | |
| 8 9 | c Enter the smaller of line 7a or line 7b 7 c 8,000. Enter the smaller of line 3 or line 4c | |
| 10 11 | capital gains | |
| 12 13 14 15 | c Add lines 11a and 11b | 13 <u>8,000</u> |
| 16 17 | • $\frac{\$44, 625}{\$89, 250}$ if single or married filing separately, • $\frac{\$89, 250}{\$59, 750}$ if mfj or qualifying surviving spouse, or • $\frac{\$59, 750}{\$59, 750}$ if head of household. Enter the smaller of line 1c or line 15 | 6 89,250. |
| 18 19 | Subtr In 10 from In 1c. If zero or less, enter -0- \dots 18 181,555. Enter the smaller of line 1c or: • $\$182,100$ if single or married filing sep, • $\$364,200$ if MFJ or QSS, or 19 189,555. | |
| 20 21 22 | • <u>\$182,100</u> if head of household. Enter the smaller of line 14 or line 19 20 <u>181,555</u> . Enter the larger of line 18 or line 20 | 2 0. |
| 23 24 25 26 | Enter the smaller of line 1c or line 13 | - |
| 27 28 | • $\frac{5276,900}{553,850}$ if married filing separately, • $\frac{5553,850}{5523,050}$ if mfj or qualifying surviving spouse, or • $\frac{5523,050}{5523,050}$ if head of household. Enter the smaller of line 1c or line 26 27 189 555 | |
| 29 30 31 32 | Add lines 21 and 22 28 181,555. Subtract line 28 from line 27. If zero or less, enter -0 29 8,000. Enter the smaller of line 25 or line 29 3 Multiply line 30 by 15% (0.15) 32 8,000. If lines 1 and 32 are the same, skip lines 33 through 43 and go to line 44. Otherwise, | <u></u> |
| 33 34 35 | Subtract line 32 from line 23 | 3 <u>0.</u> 34 0. |
| 36 37 | Add lines 10 and 21 | |

| 38 | Subtract line 37 from line 36. If zero or less, enter -0 38 | | |
|----|--|--------|---------|
| 39 | Subtract line 38 from line 35. If zero or less, enter -0 | _ | |
| 40 | Multiply line 39 by 25% (0.25) | 40 | |
| | If Schedule D, line 18, is zero or blank, skip lines 41 through 43 and go to line 44. Otherwise, go to | line 4 | 1. |
| 41 | Add lines 21, 22, 30, 33, and 39 | | |
| 42 | Subtract line 41 from line 1c | | |
| 43 | Multiply line 42 by 28% (0.28) | 43 | |
| 44 | Figure the tax on the amount on line 21. If the amount on line 21 is less than \$100,000, | - | |
| | use the Tax Table to figure this tax. If the amount on line 21 is \$100,000 or more, | | |
| | use the Tax Computation Worksheet | 44 | 30,557. |
| 45 | Add lines 31, 34, 40, 43, and 44 | 45 | 31,757. |
| 46 | Figure the tax on the amount on line 1c. If the amount on line 1c is less than \$100,000, | _ | |
| | use the Tax Table to figure this tax. If the amount on line 1c is \$100,000 or more, | | |
| | use the Tax Computation Worksheet | 46 | 32,317. |
| 47 | Tax on all taxable income (including capital gains and qualified dividends). | - | |
| | Enter the smaller of line 45 or line 46. Also include this amount on Form 1040, line 16 | 47 | 31,757. |
| | | - | |

Capital Loss Carryforward Worksheet Capital Loss Carryforward from 2023 to 2024 Keep for your records

2024

| Name(s) Shown on Return John & Jane Doe | | | | Social Security Number 111-11-1121 | | |
|--|---|----|---|---------------------------------------|----------------------------|--|
| | | | F | Regular Tax | Alternative Minimum Tax | |
| 1 | Enter the amount from 2023 Form 1040, line 15. If a loss, | | | | | |
| | enter as a negative amount | 1 | | 69,555. | 86,255. | |
| 2 | Enter the loss from 2023 Schedule D, line 21, as a positive | | | | | |
| | amount | 2 | | | 3,000. | |
| 3 | Combine lines 1 and 2. If zero or less, enter -0 | 3 | | 69,555. | 89,255. | |
| 4 | Enter the smaller of line 2 or line 3 | 4 | | 0. | 3,000. | |
| | If line 7 of 2023 Schedule D is a loss, go to line 5; | | | | | |
| _ | otherwise, enter -0- on line 5 and go to line 9 | | | | | |
| 5 | Enter the loss from 2023 Schedule D, line 7, | _ | | | | |
| - | as a positive amount. | 5 | | | | |
| 6 | Enter any gain from 2023 Schedule D, line 15. If a loss, | _ | | | _ | |
| _ | enter -0 | 6 | | 8,000. | 0. | |
| 7 | Add lines 4 and 6 | 7 | | 8,000. | 3,000. | |
| 8 | Short-term capital loss carryforward to 2024. | | | | | |
| | Subtract line 7 from line 5. If zero or less, enter -0 ► | 8 | | 0. | 0. | |
| | If line 15 of Schedule D is a loss, go to line 9; | | | | | |
| _ | otherwise, skip lines 9 thru 13. | | | | | |
| 9 | Enter the loss from 2023 Schedule D, line 15, as a positive | _ | | | | |
| | | 9 | | | 30,000. | |
| 10 | Enter any gain from 2023 Schedule D, line 7. If a loss, | | | | | |
| | enter -0 | 10 | | | | |
| 11 | Subtract line 5 from line 4. If zero or less, enter -0 | 11 | | 0. | 3,000. | |
| 12 | Add lines 10 and 11 | 12 | | 0. | 3,000. | |
| 13 | Long-term capital loss carryforward to 2024. | | | | 0 | |
| | Subtract line 12 from line 9. If zero or less, enter -0 ► | 13 | | 0. | 27,000. | |

2023

Social Security No.

State ID

Name(s) Shown on Return John & Jane Doe

111-11-1121

Name of reporting financial institution > abc

| Form 8949 Reporting Exception Transactions | | | | | | | |
|--|----------------------|------------|--|--|--|--|--|
| Any transactions that are eligible to be reported direc | tly on Schedule D, | | | | | | |
| bypassing Form 8949, may be summarized here. | | | | | | | |
| | Proceeds | Cost Basis | | | | | |
| Box A transactions to report directly on Sch D, Line 1a (short term) | | | | | | | |
| Box D transactions to report directly on Sch D, Line 8a (long term) | | | | | | | |
| (Do not duplicate any transactions summarized above when making ent | ries in the table be | low.) | | | | | |

| | | Brokerag | e Statement (Fori | m 1099-B or subs | titute) Summarv | Table | | | | |
|--------|---|-----------------|---------------------|-------------------|--------------------|-----------------|---------|--|--|--|
| | Gains and losses by "8949 Box" (i.e. the Box to be checked on Form 8949) to assist in | | | | | | | | | |
| | | reconciling the | transactions in the | Quick Entry Table | e with a brokerage | statement. | | | | |
| 8949 E | Box | Proceeds | | Gain/(Loss) | Adjustment Amt | Adj Gain/(Loss) | Code(s) | | | |
| | - | | | | | ,,,, | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Box I |) | 10,000.00 | 2,000.00 | 8,000.00 | | 8,000.00 | | | | |
| Long | term | sales with | cost basis r | eported to t | he IRS | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Totals | 6 | 10,000.00 | 2,000.00 | 8,000.00 | | 8,000.00 | | | | |

| | Form 8940 | and Schedule D | Totals | | |
|-------------------------------|----------------------|------------------|-------------------|------------|-----------------|
| Totals gai | ins/losses as they | | | lule D. | |
| Note that these totals may | differ from your sta | tement to comply | with IRS rounding | instructio | ons. (See help) |
| Location on tax return | Proceeds | Cost Basis | Adjustment Amt | Code(s) | Adj Gain/(Loss) |
| Sch D, Line 1a | | | | | |
| Form 8949, Box A | | | | | |
| Form 8949, Box B | | | | | |
| Form 8949, Box C | | | | | |
| Sch D, Line 8a | | | | | |
| Form 8949, Box D | 10,000.00 | 2,000.00 | | | 8,000.00 |
| Form 8949, Box E | | | | | |
| Form 8949, Box F | | | | | |
| Total Federal Backup Withhold | ling | | | | |

| Total Collectible Gain | | | |
|--|------------|---------------|----------|
| Qualified Small Business (QSB) gain (Sec 1202) | Total Gain | Excluded Gain | Net Gain |
| Maximum 50% exclusion gain | | | |
| Maximum 60% exclusion gain | | | |
| Maximum 75% exclusion gain | | | |
| Maximum 100% exclusion gain | | | |

PDF Attachment

If yes, you'll need to submit a copy of your 1099-B to the IRS to provide documentation for some of the transactions on your sales summary.

Сору **#**1

2023

Name(s) Shown on Return John & Jane Doe

Social Security No. 111-11-1121

 Name of reporting financial institution ► abc

 Acct Number

Reporter's Tax ID . . . ►

| If you | Quick Entry Table If you have additional sale info to enter for a sale, double-click on any field in the table to QuickZoom to | | | | | | | | m to | | |
|---------|---|------------|--------------------|---------------|--------|---------------------|------------------|----------|----------|-------------------------------|------------|
| n you | the associated Capital Gain (Loss) Adjustments Worksheet. (See field help for more details.) | | | | | | | | | | |
| Sale# | | Property D | | | | Toritorio | . 1000 11010 110 | | 11010 0 | otano.) | |
| 8949 | Date | | | Acquired | Sal | es Price | Cost o | r | D | isallow | ed |
| Box | | | | - | | roceeds) | Other Ba | sis | | lash Sa | - |
| | stment | Adjust | | Holdir | | | Reported | | | rted on | |
| Am | ount | Cod | | Perio | | | IRS? | | Form | 1099B | ? |
| | | Addition | <u>al fields f</u> | for use by St | ep-by- | <u>Step and Imp</u> | oort only (See | help) | | | |
| | ЦЦЦЦ | | | | ЦЦ | ا با پا پا پا پا | | ЦЦ | ЦЦ | | |
| 1 | abc cor | | | | | | summarizes r | nultiple | e sales | | |
| D | 10 | /01/23 | (|)1/01/21 L | | 0,000.00 Yes X | 2,00 | V.00 | s x | | <u> </u> |
| Check | to use wor | kshoot (s | oo holn) | ► X ISO | NA | | .00 | | | | , |
| CHECK | 0.00 | 0.00 | 0.00 | 0.00 - | | 0.00 0.0 | | ┯┸┯Ĕ | XX | | хх |
| | | | ब्राह्य | | | | | + | | | |
| | ┎┸┖┹┸ | | | | Chec | chere if this | summarizes r | nultiple | | | |
| - | | | | | 011001 | | | nanipi | | | |
| | | | | | | Yes | No | Yes | s | No |) |
| Check t | to use wor | ksheet (s | ee help) | | | | | ' T T | | | |
| | | | • • | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | Chec | k here if this | summarizes r | nultiple | e sales | | ► |
| | | | | | | | | | | | |
| | | | | | | Yes | No | Yes | <u>s</u> | No |) |
| Check | to use wor | ksheet (s | ee help) | | | | | | | | |
| | | | | | | | | +++ | ++++ | $\left \right $ | |
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| | | | r | | Check | k here if this | summarizes r | nuitiple | e sales | | |
| | l | | | | | Yes | No | Yes | | No | <u> </u> |
| Check | to use wor | kshoot (s | aa haln) | | | 165 | | | | | , |
| Olicck | | Kalleet (a | | | | | | | +++ | | |
| | 111111 | | | | 1111 | | | + | ++++ | ++++ | |
| | | | | | Chec | chere if this | summarizes r | nultiple | sales | | |
| - | | | | | 011001 | | | nanipi | | | |
| | · | | 1 | | | Yes | No | Yes | s | No |) |
| Check t | to use wor | ksheet (se | ee help) | | | | | | | | |
| | | | | | | | | | | | |
| | | | ΠΠΠ | | | | | | | | |
| | | | | | | | | Sale(s |) missi | ing info? | , <u> </u> |

| | Sale Results | | | | | | | | | | |
|----------|--------------|----------------------|-----------|----------|---------|------------|--------------------|----|--|--|--|
| # | 8949 | Description | Sale | Cost | Adj. | Adjustment | Gain or | S/ | | | |
| | Box | | Proceeds | Basis | Code(s) | Amount | (Loss) 8,000.00 | L | | | |
| 1 | .D | 1000.0000sh abc corp | 10,000.00 | 2,000.00 | | | 8,000.00 | L | | | |
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| 1 | | | | | | | | | | | |

| Brokerage Statement (Form 1099-B or substitute) Summary Table Gains and losses by "8949 Box" (i.e. the Box to be checked on Form 8949) to assist in reconciling the transactions in the Quick Entry Table with a brokerage statement. | | | | | | | | | |
|---|--------------|---------------------|--------------|--------|----------|---|--|--|--|
| 8949 Box Proceeds Cost Basis Gain/(Loss) Adjustment Amt Adj Gain/(L | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | 1 | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Box D | 10,000.00 | 2,000.00 | 8,000.00 | | 8,000.00 | | | | |
| Long teri | n sales with | <u>cost basis r</u> | eported to t | he IRS | 1 | • | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | 1 | r | r | 1 | 1 | | | |
| Totals | 10,000.00 | 2,000.00 | 8,000.00 | | 8,000.00 | | | | |

Form 8949 and Schedule D Totals

Totals gains/losses as they will appear on Form 8949 and Schedule D.

| Note that these totals may a | Note that these totals may differ from your statement to comply with IRS rounding instructions. (See help) | | | | | | | |
|------------------------------|--|------------|----------------|---------|-----------------|--|--|--|
| Location on tax return | Proceeds | Cost Basis | Adjustment Amt | Code(s) | Adj Gain/(Loss) | | | |
| Sch D, Line la | | | | | | | | |
| Form 8949, Box A | | | | | | | | |
| Form 8949, Box B | | | | | | | | |
| Form 8949, Box C | | | | | | | | |
| Sch D, Line 8a | | | | | | | | |
| Form 8949, Box D | 10,000.00 | 2,000.00 | | | 8,000.00 | | | |
| Form 8949, Box E | | | | | | | | |
| Form 8949, Box F | | | | | | | | |

PDF Attachment

| Taxpayer must mail in a statement with more details? | Yes | X | No |
|--|-----|---|----|
|--|-----|---|----|

| | Employee Stock Transaction Worksheet For ESPP, ISO, NQSO, RSU, or Restricted Stock For ESPP, ISO, NQSO, RSU, or Restricted Stock | | | | | | | 2023 | |
|--|---|---|---|---|---|---|---|---|--|
| | (s) Shown (& Jane | | | | | | | Security No. | |
| Part | l Sto | ck Informa | tion From Ca | apital Gain (Lo | ss) Adjustmen | t Worksheet | | | |
| 2 3 4 5 | Date shai Selling pr Number c | es sold ice (per sha of shares sol price | | · · · · · · · · · · · · | · · · · · · · · · · · · | | | 10.0000 | 01/01/23 |
| Part | ll Em | ployee an | d Stock Pla | an Informatio | n | | | | |
| 10 a b c d Part 11 a b 12 13 a b c 14 | 10 Type of stock plan. Check one: a Employee Stock Purchase Plan (ESPP) Complete Part III | | | | | | | | |
| | | | | Imbers refer to Grant Informatio | | a rax Help.) | Acquisition | Information | |
| (a) Lot # | (b) Rprtd on Form 3922? | (c) Number of Shares (Box 6) | (d) Date Option Granted (Box 1) | (e) FMV/Share on Grant Date (Box 3) | (f) Price/Share as if Exercise on Grant Date (Box 8) | (g) Date Option Exercised (Box 2) | (h) FMV/Share on Exercise Date (Box 4) | (i) Exercise Price Paid Per Share (Box 5) | (j) Fees Paid (if any) |
| | | | | | | | | | |

Part IV Stock Options (NQSOs or ISOs)

16 Type of Options Select one:

Non-Qualified Stock Options (NQSO) a

b X Incentive Stock Options (ISO)

Type of exercise Select one: a Cashleen 17

b X Cash

18 For each NQSO or ISO purchase lot from which shares on line 4 above were sold, enter grant and acquisition information in columns (b) through (i). (Box numbers refer to Form 3921; see Tax Help.)

| | | | Grant Information | | Acquisition Information | | | |
|------------------------|-------------------------------------|---|--|---|---|---|---|--|
| (a) Lot # | (b) Rprtd on Form 3921? | (c) Number of Shares (Box 5) | (d) Date Option Granted (Box 1) | (e) Exercise Price Per Share (Box 3) | (f) Date Option Exercised (Box 2) | (g) FMV/Share on Exercise Date (Box 4) | (h) Bargain Element Per Share | (i) Fees Paid (if any) |
| | X | 1000.0000 | 01/01/19 | 2.0000 | 01/01/21 | 40.0000 | 38.0000 | 0.00 |

19

20 Computation of compensation income recognized upon sale and capital gain (loss), per lot

| (a) | (b) | (c) | (d) | Capital Gain or (Loss) | | | |
|----------|------------------------|---|-------------------------------------|---|-----------------------------|--|---|
| Lot # | Number of Shares | Type of Disposition Qualifying or Disqualifying | Amount of Compensation Income | (e) Allocated Sales Price | (f) Cost Basis | (g) Short-term Capital Gain (Loss) | (h) Long-term Capital Gain (Loss) |
| | 1000.0000 | <u>Qualify</u> | 0.00 | 10,000.00 | 2,000.00 | | 8,000.00 |
| Total | | | 0.00 | 10,000.00 | 2,000.00 | | 8,000.00 |

21 Alternative Minimum Tax (AMT) Summary (ISO only)

| | AMT | Regular Tax | Adjustment |
|--|------------|-------------|------------|
| a Exercise of ISO (Form 6251, line 14) | | | |
| b Sale of shares acquired via ISO (Form 6251, line 17): | | | |
| (1) Compensation income | 0.00 | 0.00 | 0.00 |
| (2) Short-term capital gain (loss) | | | |
| (3) Long-term capital gain (loss) | -30,000.00 | 8,000.00 | -38,000.00 |
| (4) Total | -30,000.00 | 8,000.00 | -38,000.00 |

111-11-1121

Part VII Summary

| 28 Amount reported as compensation income for 2023 29 Capital Gain or (Loss) | 0.00 | | |
|---|------------|------------|------------|
| | Short-Term | Long-Term | Total |
| a Number of shares | | 1000.0000 | 1000.0000 |
| b Date acquired | | 01/01/2021 | 01/01/2021 |
| c Date sold | | 01/01/2023 | 01/01/2023 |
| d Sales price | | 10,000. | 10,000. |
| e Cost or other basis | | 2,000. | 2,000. |
| f Gain or (loss) | | 8,000. | 8,000. |

Social Security No. Name(s) Shown on Return 111-11-1121 John & Jane Doe Part I Values for Form 8949 Click on any field in Part I to QuickZoom to its corresponding entry on the Form 1099-B Worksheet. Form 8949 Box* . . . D Description . 1000.000sh abc corp Date Sold Date Acquired 01/01/23 01/01/21 Cost Basis Sales Price/Proceeds . . 10,000.00 2,000.00 Adjustment Code(s) Adjustment Amount. Holding Period L*The fields above, other than Adjustment Code(s) and Adjustment Amount, will typically match their corresponding fields on the Form 1099-B Worksheet. See Part I in the help for this form for exceptions. (Form help can be accessed by right-clicking on any field above.) Part II Manual Adjustments For adjustments not entered in Part III, the adjustment code(s) and amount may be entered here. Do **not** duplicate code(s) or amounts entered elsewhere. Adjustments requiring entries on forms other than Form 8949 will require manual entries in Part IV, or in some cases, on the specific form. Adjustment Code(s) Adjustment Amount. The cost basis and proceeds are totals from multiple sales (code M). RESERVED Part III Specific Adjustments Form 1099-B reports an incorrect basis (code B). Corrected basis X Check this box for **employee stock** sales requiring adjustments. QuickZoom to Employee Stock Transaction Worksheet if basis is incorrect, compensation income should be reported, or for all Incentive Stock Option (ISO) sales Allocated amounts from Employer Short-Term Long-Term Total Stock Transaction Worksheet **a** Number of shares 1000.0000 1000.0000 **b** Date acquired 01/01/2021 01/01/2021 01/01/2023 01/01/2023 10,000.00 10,000.00 Cost or other basis 2,000.00 2,000.00 е Adjustment amount f Note: For employee stock sales with both short-term and long-term components, any adjustments will be ratably allocated on a per share basis. If this is not an accurate allocation for this sale, then report the short- and long-term components separately. RESERVED RESERVED This is a sale of a **collectible** item (code **C**). RESERVED Amounts reported on Form 1099-B do not reflect sales fees/expenses that were charged (code E). This sale cannot generate a loss for the following reason (code L): This is a vacation home or other **personal use property** with no business or rental activity. This is a sale to a **related party**. This sale is nondeductible for another reason (except wash sale). RESERVED

Any gain/loss from sale should not be included because asset held by a **nominee** (code **N**). If only part of the gain (loss) is nominee, enter offsetting adjustment here **>**

| Name(s) Shown on Return John & Jane Doe | | Social Security No. 111-11-1121 | | | | |
|---|--|------------------------------------|--|--|--|--|
| Part III Specific Adjustments (cont.) | | | | | | |
| Other adjustments are required (code O). Amount (positive to increase gain, negative to reduce) | | | | | | |
| Loss from this sale is ordinary loss from a secti Ordinary loss amount (leave blank if entire le RESERVED | | | | | | |
| Gain from this Qualified Small Business (QSB) This QSB stock is eligible for 50% exclusion This is empowerment zone stock eligible for For 60% exclusion, enter gain as of 12/31/2 This QSB stock is eligible for 75% exclusion This QSB stock is eligible for 100% exclusion Amount of gain eligible for exclusion | under section 1202. 60% exclusion under section 018 | 1202. | | | | |
| RESERVED All or part of the gain is deferred due to a rollover (code R). This includes rollovers of gain from Qualified Small Business stock and certain stock sold to ESOP plans. Amount reinvested in qualified stock (leave blank if sold to ESOP/co-op) Amount of gain deferred RESERVED | | | | | | |
| Loss from this sale is ordinary loss from a secti Ordinary loss amount (leave blank if entire le RESERVED | | | | | | |
| Form 1099-B reports an incorrect holding period RESERVED | od (code T). | | | | | |
| Sale includes a disallowed wash sale loss (code | W). Amount (leave blank if a | Ⅲ)► | | | | |
| Part or all of the gain is from DC Zone/qualified community assets eligible for exclusion (code X). Amount of exclusion (leave blank if entire gain should be excluded) | | | | | | |
| Part IV Amounts That Will Be Reported on Fo | rms Other Than Form 89 | 49 | | | | |
| Check if ordinary gain/loss FATCA requirement Federal tax withheld State name State tax withheld State identification number | Collectible gain/loss Accrued interest to Sch E Sec. 1242 loss on Form 4 Sec. 1244 loss on Form 4 | 3 ► 4797 . ► | | | | |

| Name(s) Shown on Return | Social Security Number |
|-------------------------|------------------------|
| John & Jane Doe | 111-11-1121 |
| | |

Taxable Income – Line 1

| 1 | 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 line 14 of Form 1040 of 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 | 69,555. |
| 2 | Additions to income | 2 | |
| 3 | Add lines 1 and 2 | 3 | 69,555. |
| 4 | Subtractions from income | 4 | |
| 5 | Subtract line 4 from line 3. Enter on Form 6251, line 1 | 5 | 69,555. |

Taxes – Line 2a

| 1 | Generation skipping transfer taxes included on Schedule A, line 6 | 1 | |
|---|---|---|--|
|---|---|---|--|

Refund of Taxes - Line 2b

| 1 | Taxable refund of state and local income tax | 1 | |
|---|---|---|--|
| 2 | Amount and description of any refund of state and local personal property | | |
| | taxes, foreign income or real property taxes | 2 | |
| 3 | Total tax refund adjustment. Enter on Form 6251, line 2b | 3 | |
| | | | |

Alternative Tax Net Operating Loss Deduction (ATNOLD) - Line 2f

| 1 | Alternative minimum taxable income (AMTI) without ATNOLD | 1 | 86,255. |
|-----|---|----|---------|
| 2 | Enter adjustments | 2 | |
| 3 | Adjustment for domestic production activities deduction | 3 | |
| 4 | Adjusted AMTI without ATNOLD. Add lines 1-3 | 4 | 86,255. |
| 5 | ATNOLD limitation. Multiply line 4 by 90% | 5 | 77,630. |
| 6 | Enter ATNOL carried to 2022 from other year(s) | 6 | |
| 7 | Enter ATNOL included above attributable to qualified disaster losses | 7 | |
| 8 | ATNOL above not attributable to qualified disaster losses. Line 6 minus 7 | 8 | |
| 9 | ATNOL deduction other than qualified disaster losses. Lesser of line 5 or 8 | 9 | |
| 10 | ATNOL Disaster Deduction. Lesser of line 7 or (line 4 minus line 9) | 10 | |
| 11 | ATNOLD. Add lines 9 and 10. Enter on Form 6251, line 2f, as neg | 11 | |
| Inc | entive Stock Options – Line 2i | | |
| 1 | Incentive stock options adjustment from Schedule K-1 worksheets | 1 | |
| 2 | Incentive stock options from Employer Stock Transaction Worksheets | 2 | |

| 2 | Incentive stock options from Employer Stock Transaction Worksheets | 2 | |
|---|--|---|--|
| 3 | Incentive stock options from Exercise of Stock Options Worksheets | 3 | |
| | Other incentive stock options | | |
| 5 | Total incentive stock options. Enter on Form 6251, line 2i | 5 | |

John & Jane Doe

I

Disposition of Property – Line 2k

| | | Alternative Minimum Tax | Regular Tax | | Difference |
|----------------------------|---|---|---------------------------------------|----------------------------|------------|
| 1 | Net capital gain or loss (Schedule D) | -3,000. | 8,0 | 00. | -11,000. |
| 2 3 | Ordinary gain or loss (Form 4797, Part II) Ordinary income from sale of Incentive Stock | 0. | | 0. | 0. |
| 4 | Total. Enter on Form 6251, line 2k | | | | -11,000. |
| Pos | t-86 Depreciation – Line 2I | | | | |
| 1 2 3 4 5 | From depreciation worksheets | nership interest hich is a tax shelter | | 1 2 3 4 5 | |
| Pas | sive Activities – Line 2m | | | | |
| 1 2 3 4 | Adjustment for recomputed income (loss) from pass Adjustment for recomputed income (loss) from publi Other adjustments to passive activities Total. Add lines 1, 2, and 3. Enter on Form 6251, lin | icly traded partnershi | DS | 1 2 3 4 | 0. |
| Circ | culation Costs – Line 2o | | | | |
| 1 2 3 | Circulation costs adjustment from Schedule K-1 Wo Other circulation costs adjustment | | | 1 2 3 | |
| Min | ing Costs – Line 2q | | | | |
| 1 2 3 | Mining costs adjustment from Schedule K-1 Worksh Other mining costs adjustment | | | 1 2 3 | |
| Res | earch and Experimental Costs – Line 2r | | | | |
| 1 2 3 | Research and Experimental costs adjustment from 3 Other research and experimental costs adjustment. Total. Add lines 1 and 2. Enter on Form 6251, line 2 | | | 1 2 3 | |
| Inta | ngible Drilling Costs – Line 2t | | | | |
| 1 2 3 4 5 6 | Excess intangible drilling costs | act line 3 from line 1 | · · · · · · · · · · · · · · · · · · · | 1 2 3 4 5 6 | |
| Oth | er Adjustments – Line 3 | | | | |
| 1 2 3 4 5 | Pre-1987 depreciation from depreciation worksheets Plus amount from Schedule K-1 worksheets Add lines 1 and 2 | nership interest hich is a tax shelter | · · · · · · · · · · · · · · · · · · · | 1 2 3 4 5 | |
| 6 7 8 9 | Enter other adjustments, including income-based re Add lines 5 and 6 | added to standard | · · · · · · · | 6 7 8 9 | |

111-11-1121 Page **3**

John & Jane Doe Alternative Minimum Taxable Income – Line 4

| rried filing separately and Form 6251, line 4, is more than \$831,150: | | |
|--|---|---|
| Alternative minimum taxable income, Form 6251 | 1 | |
| | | |
| Subtract line 2 from line 1 | 3 | |
| | | |
| Smaller of line 4 or \$63,250 | 5 | |
| Add line 1 and line 5. Enter on Form 6251, line 4 | 6 | |
| | Alternative minimum taxable income, Form 6251 Threshold amount Subtract line 2 from line 1 Multiply line 3 by 25% (.25) Smaller of line 4 or \$63,250 | Alternative minimum taxable income, Form 6251. 1 Chreshold amount. 2 Subtract line 2 from line 1. 3 Multiply line 3 by 25% (.25). 4 Smaller of line 4 or \$63,250 5 Add line 1 and line 5. Enter on Form 6251, line 4 6 |

Exemption – Line 5

| 1 | Enter \$81,300 if single or head of household, \$126,500 if married filing jointly | | |
|---|--|---|------------|
| | or qualifying surviving spouse, \$63,250 if married filing separately | 1 | 126,500. |
| 2 | Enter your alternative minimum taxable income from Form 6251, line 4 | 2 | 86,255. |
| 3 | Enter \$578,150 if single or head of household, \$1,156,300 if married filing | | |
| | jointly or qualifying surviving spouse, \$578,150 if married filing separately | 3 | 1,156,300. |
| 4 | Subtract line 3 from line 2. If zero or less, enter -0 | 4 | 0. |
| 5 | Multiply line 4 by 25% (.25) | 5 | 0. |
| 6 | Subtract line 5 from line 1. If zero or less, enter -0 Enter on 6251, line 5 | 6 | 126,500. |
| | | | |

Federal Carryover Worksheet

Keep for your records

| Name(s) Shown on Return | Social Security Number |
|-------------------------|------------------------|
| John & Jane Doe | 111-11-1121 |

2022 State and Local Income Tax Information

| (a) State or Local ID | (b) Paid With Extension | (c) Estimates Pd After 12/31 | (d) Total With- held/Pmts | (e) Paid With Return | (f) Total Over- payment | (g) Applied Amount |
|-----------------------------|-------------------------------|------------------------------------|---------------------------------|----------------------------|-------------------------------|--------------------------|
| | | | | | | |
| otals | | | | | | |

2022 State Extension Information

| (a) State | (b) Paid With Extension |
|--------------|----------------------------|
| | |
| | |
| | |

2022 State Estimates Information

| (a) State | (c) Estimates Paid After 12/31 |
|--------------|-----------------------------------|
| | |
| | |
| | |
| | |

2022 State Taxes Due Information

| (a) State | (e) Paid With Return |
|--------------|-------------------------|
| | |
| | |

2022 State Refund Applied Information

| (a) State | (g) Applied Amount |
|--------------|-----------------------|
| | |
| | |
| | |

2022 State Tax Refund Information

| (a) | (d) Total | (f) Total |
|----------|---------------|--------------|
| State | Withheld/Pmts | Overpayment |
| | | |
| | | |
| <u> </u> | | |
| 1 | | |

2022 Locality Extension Information

| - | |
|----------|---------------------|
| (a) | (b) |
| Locality | Paid With Extension |
| | |
| | |
| | |
| | |

2022 Locality Estimates Information

| (a) Locality | (c) Estimates Paid After 12/31 |
|-----------------|-----------------------------------|
| | |
| | |

2022 Locality Taxes Due Information

| (a) Locality | (e) Paid With Return |
|-----------------|-------------------------|
| | |
| | |

2022 Locality Refund Applied Information

| (a) Locality | (g) Applied Amount |
|-----------------|-----------------------|
| | |
| | |

2022 Locality Tax Refund Information

| (a) | (d) Total | (f) Total |
|----------|---------------|--------------|
| Locality | Withheld/Pmts | Overpayment |
| | | |
| | | |
| | | |

2023

Federal Carryover Worksheet page 2

John & Jane Doe

| Othe | er Tax and Income Info | rmation | | | | | | | 2022 | 2023 |
|---|--|---|---|--|---------------------------------|---------------------------------------|--|----------------------------------|------|-------------|
| 1Filing status12Number of exemptions for blind or over 65 (0 - 4).23Itemized deductions34Check box if required to itemize deductions45Adjusted gross income56Tax liability for Form 2210 or Form 2210-F67Alternative minimum tax78Federal overpayment applied to next year estimated tax8 | | | | | | | | | | |
| Qu | ickZoom to the IRA Inf | ormatio | n Workshe | et for | IRA | informati | on . | | | > |
| Exc | ess Contributions | | | | | | - I | | 2022 | 2023 |
| b 10 a b 11 a | | er MSA c verdell E rdell ES/ A contrib | contribution SA contribut A contribut utions as c | s as of utions ons as of 12/3 | f 12/ as of s of 1 1 , | 31 f 12/31 2/31 | . . 1(. . 1 [,] |) a b) a b 1 a b | | |
| | and Expense Carryov : Enter all entries as a po | | nount | | | | | | 2022 | 2023 |
| b 13 a b 14 a b 15 a b | Short-term capital loss AMT Short-term capital Long-term capital loss AMT Long-term capital Net operating loss avai AMT Net operating loss Investment interest exp AMT Investment interest Nonrecaptured net Secti | l loss | carry forwa le to carry sallowed . se disallow losses froi | forwar /ed n: | d . | · · · · · · · · · · · · · · · · · · · | · 1: · 1: · 1: · 1: · 1: · 1: · 1: · 1: | 2 bababababcdefabcdef | | 27,000 |
| Crec | lit Carryovers | | | | | | | | 2022 | 2023 |
| 18 19 | General business credi Adoption credit from: | it a 200 b 200 c 200 c 200 d 200 e 200 f 200 | 22 21 20 19 | · · · · · | · · · · · · · | · · · · · · · · · · · · · · · · · · · | . 11 . 19 | B Ba b c d e f | | |
| 20 21 22 23 | Mortgage interest credit Credit for prior year min District of Columbia firs Residential Clean Ener energy efficient propert | nimum ta st-time ho gy Credi | b 202 c 202 d 202 ax 202 bx 202 <tr< td=""><td>credit. Sly the</td><td> Resi</td><td> idential</td><td>. 2[.] . 2.</td><td>2</td><td></td><td></td></tr<> | credit. Sly the | Resi | idential | . 2 [.] . 2. | 2 | | |

Name(s) shown on return John & Jane Doe

Your social security number 111-11-1121

Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less

QuickZoom to Form(s) 8949, Short-Term Gain (Loss) Transactions ► QuickZoom to Schedule D, Short-Term Gain (Loss) Regular Tax Totals ►

| Short-Term Totals: | Sales Price | Adjstd Basis | Gn(Ls) Adjstmt | Gain (Loss) |
|---|-------------|--------------|-----------------------------|-------------|
| 1 a 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 b Short-term totals from all Forms 8949 with box A checked 2 Short-term totals from all Forms 8949 with box B checked 3 Short-term totals from all Forms 8949 with box C checked | | | | |
| 4 Short-term gain from Form 6252 an Forms 4684, 6781, and 8824: A Form(s) 6252, Installment Sale I B Form(s) 4684, Casualties and Th C Form(s) 6781, Gains and Losses Contracts and Straddles. D Form(s) 8824, Like-Kind Exchan E Sale of Incentive Stock Option st entered elsewhere). F Other Total. Shet short-term gain or (loss) from p and trusts from Schedule(s) K-1 6 Short-term capital loss carryover. E of your Capital Loss Carryover We 7 Net short-term capital gain or (loss) | ncome | 56 | ····· 4 ···· 5 ···· 6 | |

Part II Long-Term Capital Gains and Losses – Assets Held More Than One Year

QuickZoom to Form(s) 8949, Long-Term Gain (Loss) Transactions ► QuickZoom to Schedule D, Long-Term Gain (Loss) Regular Tax Totals ►

| Long-Term Totals: | | Sales Price | Adjstd Basis | Gn(Ls) Adjstmt | Gain (Loss) |
|-------------------|---|-------------|--------------|----------------|-------------|
| 8 a | Totals for all long-term trans- actions 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 | | | | |
| b 9 10 | Long-term totals from all Forms 8949 with box D checked Long-term totals from all Forms 8949 with box E checked Long-term totals from all Forms 8949 with box F checked | 10,000. | 40,000. | | -30,000. |

Т

| 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: | | |
| | A Form 4797, Sales of Business Property (Gain from Pt I) | | |
| | B Form(s) 6252, Installment Sale Income | | |
| | C Form(s) 4684, Casualties and Thefts | | |
| | D Form(s) 6781, Gains and Losses from Section 1256 | | |
| | Contracts and Straddles | | |
| | E Form(s) 8824, Like-Kind Exchanges | | |
| | F Form(s) 2439, Notice to Shareholder of Undistributed | | |
| | Long-Term Capital Gains | | |
| | G Sale of Incentive Stock Option stock (not | | |
| | entered elsewhere) | | |
| | H Other | | |
| | Total | 11 | |
| 12 | Net long-term gain or (loss) from partnerships, S corporations, estates, | | |
| | and trusts from Schedule(s) K-1 | 12 | |
| 13 | Capital gain distributions | 13 | |
| 14 | Long-term capital loss carryover. Enter the amount, if any, from line 15 | | |
| | of your Capital Loss Carryover Worksheet | 14 | |
| 15 | Net long-term capital gain or (loss). Combine lines 8 thru 14 in column (f) | 15 | -30,000. |
| | | 1 | · |

Part III Summary

| 16 | Combine lines 7 and 15 and enter the result | 16 | -30,000. |
|----|---|----|-----------|
| | • A gain, enter the amount on line 22 below. | | |
| | Then go to line 17 below. | | |
| | • A loss, skip lines 17 through 20 below. Then go to line 21. | | |
| | • Zero, skip lines 17 through 21 below and enter -0- on line 22 below. | | |
| 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 | Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet | 18 | 0. |
| 19 | Enter the amount if any from line 19 of the Unrecentured Section 1250 | | |
| 19 | Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet | 19 | |
| | | 13 | |
| 20 | Are lines 18 and 19 both zero or blank? | | |
| | Yes. | | |
| | No. | | |
| | | | |
| 21 | If line 16 is a loss, enter here and on line 22 below, the smaller of: | | |
| | The loss on line 16, or (01 500) | | 2 . 0 . 0 |
| | • (\$3,000), or, if married filing separately, (\$1,500) | 21 | -3,000. |
| | Note: When figuring which amount is smaller, treat both amounts as | | |
| | positive numbers. | | |
| 22 | Do you have qualified dividends on Form 1040, line 9b? | | |
| | Yes. | | |
| | No. | | |
| | | | |
| | Capital gain (loss) as refigured for the Alternative Minimum Tax. | | |
| | If line 16 is a gain or zero, enter line 16. If line 16 is a loss, | | |
| | enter line 21 | | |

| QuickZoom to the Qualified Dividends and Capital Gain Tax Worksheet |
|---|
| QuickZoom to the Schedule D Tax Worksheet |
| QuickZoom to the Unrecaptured Section 1250 Gain Worksheet |
| QuickZoom to the 28% Rate Gain Gain Worksheet. |
| QuickZoom to the Capital Loss Carryover Worksheet |
| QuickZoom to Form 6251, Alternative Minimum Tax. |

Smart Worksheets From 2023 Federal Tax Return

| Form 1099-B Worksheet (abc) Smart Worksheet QuickZoom to another copy of Form 1099-B Worksheet | |
|---|--|
| For sale of a primary residence eligible for gain exclusion, use the Home Sale Worksheet. | |
| QuickZoom to Form 1099-K reporting sale(s) of investment assets | |
| | |

 Form 1099-K reconciliation

 If checked, a copy of Form 1099-K with the payer and payment amount shown below has been linked to this worksheet. Total sales proceeds reported on the Capital Asset Sales Worksheet(s) must match the amount shown below.

Schedule D AMT: Capital Gains & Losses AMT -- Smart Worksheet

| (a Description c Property T | - | (b) Related Box on Form 8949 | | | | | |
|-----------------------------------|---------------------|------------------------------------|-------------------------------|-----------------------------------|--------------------------|--|--|
| (c) Date Acquired | (d) Date Sold | (e) Sales Price | (f) Cost or Other basis | (g) Gain or Loss Adjustment | (h) Gain or (Loss) | | |
| 1000.0000sh a | abc corp | D | | | | | |
| 01/01/21 | 01/01/23 | 10,000. | 40,000. | | -30,000. | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |