CANDIDATE OATH JUDICIAL OFFICE

Check box **only** if you are seeking to qualify as a write-in candidate:

☐ Write-in candidate

RECEIVED

APR 1 4 2020

DUVAL COUNTY ELEC. By_____

OFFICE USE ONLY

-					
			lidate Oath		
1	SCOTT MITCHELL	(Section 105	.031, Florida Statutes)		
1,					
	(Print name above as you wish i hyphen, check box ☐. (See pa Although a write-in candidate's na	ge 2 - Compound L	ast Names). No change ca	n be made after the e	and of qualifying. th purposes.)
am	a candidate for the judicial office of	DUVAL COUNTY (COURT JUDGE		, 4TH .
			(Office)	(District #)	(Circuit #)
#	1 ; my legal residence is	DUVAL		County, Florida; I am a	qualified elector
(Gr	oup #)				
no c resig Con	ne state and of the territorial jurisding of Florida to hold the judicial office of the public office in the state, the togned from any office which I am restitution of the United States and the states are states are states and the states are stat	ce to which I desire te erm of which office of required to resign pure the Constitution of the	o be elected or in which I de or any part thereof runs condursuant to Section 99.012, e State of Florida.	sire to be retained; I to surrent with the office I Florida Statutes; and I	nave qualified for seek; and I have will support the
Flor	tion 876.05, Florida Statutes, oat ida and of the United States of Am is as such employee or officer, do of the State of Florida.	erica, and being em	ployed by or an officer of the	e court system and a r	ecipient of public
Cano	lidate's Florida Voter Registratio	n Number (located o	n your voter information card):	103900019	
ballo	netic spelling for audio ballot: Post as may be used by persons with de-CHULL	rint name phonetica isabilities (see instru	lly on the line below as you ctions on page 2 of this form	wish it to be pronoun): [Not applicable to wri	ced on the audio ite-in candidates.]
\ <u>\</u>	2011-1-1-11				
X	Sest Melchell			SMITCHELL@	COJ.NET
Sign	nature of Candidate	Telephone Number		Email Address	
50	01 W. ADAMS STREET,	JACKSONVILLE	· FLORIDA	32202	
Addr	ess	City	State	ZIP	Code
STA	TE OF FLORIDA		Signature of Notary	Public	
COI	JNTY OF			missioned Name of Notary	Public below:
onlin Pers	on to (or affirmed) and subscribed before me e _ presence this day of onally Known: or Produced Identification Produced:	1 , 20 20	Com	CY HEALY mission # GG 274777 res December 1, 2022 d Thru Troy Fath Insurance 800-385-70	119

JUDGE SCOTT MITCHELL CAMPAIGN ACCOUNT
DATE 41.7.20
ORDER OF DUYUL (BUNCH, SWARNISON OF Electrons 18 100 72 GO
Sixtagrams severally two & 851100 - DOLLARS @
Walley (
FOR Videntification Bank

FORM 6 FULL AND PUBLIC DISCLA	OSURE	2019
Please print or type your name, mailing address, agency name, and position below:	ESTS [FOR OFFICE USE ONLY:
LAST NAME FIRST NAME MIDDLE NAME:	T	
MITCHELL, SCOTT FARLEY MAILING ADDRESS:		
ROOM 1241 500 WIST Adams Street	F	RECEIVED
STACKSONVILLE 32202 DUVAL		APR 1 4 2020
CITY: ZIP: COUNTY:	D1	, , , _ <u>-</u>
AN JUDICIAL CIRCUIT		IVAL COUNTY ELEC.
NAME OF OFFICE OR POSITION HELD OR SOUGHT:		
CHECK IF THIS IS A FILING BY A CANDIDATE		
PART A NET WORTH Please enter the value of your net worth as of December 31, 2019 or a more	current date	INote: Net worth is not cal.
culated by subtracting your reported liabilities from your reported assets, so p		
My net worth as of <u>December 31</u> , 20 19 was \$_	1. lalo 2 1	254 254
in the work do of the property of the state	7.04.7.	
PART B ASSETS		
HOUSEHOLD GOODS AND PERSONAL EFFECTS: Household goods and personal effects may be reported in a lump sum if their aggregate valid following, if not held for investment purposes: jewelry; collections of stamps, guns, and nur		
furnishings; dothling; other household items; and vehicles for personal use, whether owned or	r leased.	na an
The aggregate value of my household goods and personal effects (described above) is \$	13.4,	500
ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:	43	WALNE OF ACCET
DESCRIPTION OF ASSET (specific description is required - see instruction in the second	ons p.4)	425,000 °°
Prudential Brollian Acris-Amiriks 105/195K		205 000
Charles Schwat Brokerage		1.058,15400
10 Bank/Principal Stock/ Cars "12		31,100/881000/25,200
PART C LIABILITIES LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):		·
NAME AND ADDRESS OF CREDITOR		AMOUNT OF LIABILITY
Clase Hortgage POBOX 9001871. Louisville KY 20298	· · · · · · · · · · · · · · · · · · ·	202,500
NNFCU, P.O. BOX 1349, Heindon, VA 20172-Corolla		4,80C
2019 Personce Sucome Tury Due		4200
JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:	······································	
Joint and Several Liabilities not reported above: NAME AND ADDRESS OF CREDITOR		AMOUNT OF LIABILITY

	PART D - INCOME						
Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2019 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.							
	I elect to file a copy of my 2019 federal income tax return and all W2's, schedules, and attachments. [If you check this box and attach a copy of your 2019 tax return, you need not complete the remainder of Part D.]						
PRIMARY SOURCES OF INCO		ige 5):					
NAME OF SOURCE OF INC	OME EXCEEDING \$1,000	<u> </u>	ADDRESS OF SOURCE OF INCOME	<u> </u>	AMOUNT		
SECONDARY SOURCES OF II	ICOME [Major customers, cli	ents, etc., of b	usinesses owned by reporting person-	see instructio	ns on page 5]:		
NAME OF BUSINESS ENTITY	NAME OF MAJOR OF BUSINESS		ADDRESS OF SOURCE		PRINCIPAL BUSINESS ACTIVITY OF SOURCE		
·	ART E INTERESTS II	N SPECIFIE	D BUSINESSES [Instructions on	page 6]			
	BUSINESS ENTITY		BUSINESS ENTITY # 2		IESS ENTITY #3		
NAME OF BUSINESS ENTITY							
ADDRESS OF BUSINESS ENTITY							
PRINCIPAL BUSINESS ACTIVITY	Control of the contro		Ma				
POSITION HELD WITH ENTITY							
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS							
NATURE OF MY OWNERSHIP INTEREST							
	**************************************	PART F-	TRAINING				
For office	rs required to complete		ics training pursuant to section	112.3142,	F.S.		
	and the same of the property of the same o		PLETED THE REQUIRED				
O.A	TH		OF FLORIDA				
I, the person whose name app		COUN	to (or affirmed) and subscribed before	me by mean	s of		
beginning of this form, do depo			sical presence or \square online notarizati				
and say that the information di			100 m S	10011	Mitchell		
and any attachments hereto is	true, accurate,		101 to				
and complete.		(Signa:	ture of Notary Public-State of Florida	A Come	Y HEALY nission # GG 274777		
		, ,	W :+:	THE PARTY OF THE P	- December 1 7072		
C devet A	00	(Print,	Type, or Stamp Commissioned N. me	of Notary Pu	olla)		
SIGNATURE OF REPORTING	OFFICIAL OR CANDIDATE	Persor		uced Identific			
SIGNATURE OF REPORTING	OFFICIAL OR CANDIDATE		f Identification Produced				
If a certified public accountant	licensed under Chapter 47	3, or attorney	in good standing with the Florida B	ar prepared	this form for you, he or		
she must complete the following					552 St.		
I,Section 112.3144. Florida Sta	tutes, and the instructions t	, prepared to the form. Ur	the CE Form 6 in accordance with A oon my reasonable knowledge and b	ort. II, Sec. 8, belief, the dis	, Florida Constitution, sclosure herein is true		
and correct.			i saccinato mariolago dila i	,			
Signatur	e			Date			
· · · · · · · · · · · · · · · · · · ·		oes not relie	eve the filer of the responsibilit		e form under oath.		
			ON A SEPARATE SHEET, PLI				

Form 8879

Department of the Treasury Internal Revenue Service

IRS e-file Signature Authorization

► ERO must obtain and retain completed Form 8879.

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

2019

Submission Identification Number (SID)	
Taxpayer's name SCOTT F. MITCHELL	Social security number
Spouse's name	Spouse's social sec <u>urity number</u> *** !**
AMY A. MITCHELL Part I Tax Return Information - Tax Year Ending December 31, 2019 (Whole dollars only)	7.7.7
<u> </u>	√ 1 232,960.
1 Adjusted gross income (Form 1040 or 1040-SR, line 8b; Form 1040-NR, line 35)	"\ \
2 Total tax (Form 1040 or 1040-SR, line 16; Form 1040-NR, line 61)	" \
3 Federal income tax withheld from Forms W-2 and 1099 (Form 1040 or 1040-SR, line 17; Form 1040-NR, line 62a	
4 Refund (Form 1040 or 1040-SR, line 21a; Form 1040-NR, line 73a; Form 1040-SS, Part I, line 13a)	5 4,199.
5 Amount you owe (Form 1040 or 1040-SR, line 23; Form 1040-NR, line 75) Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep 5	
Part II Taxpayer Declaration and Signature Authorization (Be sure you get and Reep and Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying sch	
for the tax year ending December 31, 2019, and to the best of my knowledge and bellef, they are true, correct, and complete. Further in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitted originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or leason for rejection reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account fide ated in the tax prepare of my federal taxes owed on this return and/or a payment of estimated tax, and the financial Institution to debit the entry to this account remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization for revoke (cancel) a paym Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 3 business days prior to date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential inforce and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.	,declare that the amounts r, or electronic return of the transmission, (b) the its designated Financial ition software for payment int. This authorization is to ient, I must contact the U.S. ithe payment (settlement) irmation necessary to
Taxpayer's PIN: check one box only	
X Lauthorize SMOAK, DAVIS & NIXON LLP to enter or generate my PIN	
as my signature on my tax year 2019 electronically filed income tax return.	Enter five digits, but don't enter all zeros
I will enter my PIN as my signature on my tax year 2019 electronically filed income tax return. Check this box of PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	nly if you are entering your own
Your signature Date Date	
Spouse's PIN: check one box only	
X Lauthorize SMOAK, DAVIS & NIXON LLP to enter or generate my PIN	
FRO firm name	Enter five digits, but
as my signature on my tax year 2019 electronically filed income tax return.	don't enter all zeros
I will enter my PIN as my signature on mytax year 2019 electronically filed income tax return. Check this box of PIN and your return is filed using the Practitional PIN method. The ERO must complete Part III below.	nty it you are entening your own
Pily and your (stuff) is fired using the Practical Pily The Life (most complete) at its object.	4/1 / 1
(h < h / l) k k l l l	6/20
Spouse's signature Date	
Practitioner PIN Method Returns Only - continue below	
Part III Certification and Authentication - Practitioner PIN Method Only	
ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.	
Don't enter all zertify that the above numeric entry is my PIN, which is my signature for the tax year 2019 electronically filed income indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.	tax return for the taxpayer(s)
	03/15/2020
Page 1999 O1-13-20 ERO Must Retain This Form - See Instructions Don't Submit This Form to the IRS Unless Requested To Do So	
LHA For Paperwork Reduction Act Notice, see your tax return instructions.	Form 8879 (2019)

Tax Year 2019 e-file Jurat/Disclosure for Form 1040 or 1040NR using Practitioner PIN method (with or without Electronic Funds Withdrawal)

ERO Declaration

I declare that the information contained in this electronic tax return is the information furnished to me by the taxpayer. If the taxpayer furnished me a completed tax return, I declare that the information contained in this electronic tax return is identical to that contained in the return provided by the taxpayer. If the furnished return was signed by a paid preparer, I declare I have entered the paid preparer's identifying information in the appropriate portion of this electronic return. If I am the paid preparer, under the penalties of perjury I declare that I have examined this electronic return, and to the best of my knowledge and belief, it is true, correct, and complete. This declaration is based on all information of which I have any knowledge.

ERO Signature

I am signing this Tax Return by entering my PIN below.

ERO's PIN

(enter EFIN plus 5 self-selected numerics)

Taxpayer Declarations Perjury Statement

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Consent to Disclosure

I consent to allow my Intermediate Service Provider, transmitter_or_Electronic Return Originator (ERO) to send my return/form to IRS and to receive the following information from IRS: a) an acknowledgment of receipt or reason for rejection of transmission; b) the reason for any delay in processing or refund; and, c) the date of any refund.

I am signing this Tax Return and Electronic Funds Withdrawal Consent, if applicable, by entering my Self-Select PIN below.

Taxpayer's PIN:

`Qate <u>031,52020</u>

Spouse's PIN:

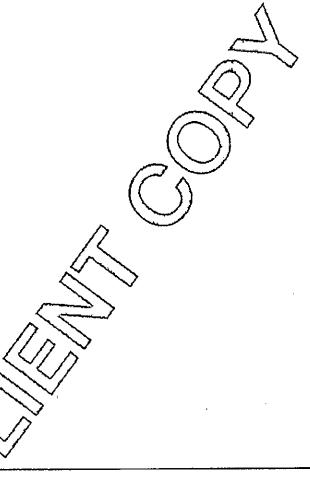
919986 04-01-19

Paperwork Reduction Act Notice.

We ask for the information on Form 1040-V to help us carry out the Internal Revenue laws of the United States. If you use Form 1040-V, you must provide the requested information. Your cooperation will help us ensure that we are collecting the right amount of tax.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Internal Revenue Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For the estimated averages, see the instructions for your income tax return, if you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.



910681 06-10-19

ШΑ

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

TO DETACH HERE

Form 1040-V (2019)

Department of the Treasury Internal Revenue Service

OMB No. 1545-0074

Form 1040-V Payment Voucher

Use this voucher when making a payment with Form 1040 Do not staple this voucher or your payment to Form 1040

Make your check or money order payable to the "United States Treasury."

Write your social security number (SSN) on your check or money order.

Dollars Enter the amount of your payment

Cents 4,199

1019

SCOTT F. & AMY A. MITCHELL

- 4040	Dep	ariment of the Treasury - Internal Revenue Servi	00	(99)		- 1		1			
_통 1040	U.	S. Individual Income Tax R	eturn	(83)	201	9 📗	OMB No. 1545-0074	IRS Use Or	nly - Do i	not write or staple in	this space.
Filing Status	Πs	ingle Married filing jointly	Married	filing sepa	rately (MFS)	Head	d of household (H	OH) 🔲 Qua	llifying	widow(er) (QW)	1
Check only	If you	u checked the MFS box, enter the name							he qua	lifying person is	
one box.	-	id but not your dependent.	·	•							<u> </u>
Your first nam	e and	middle initial	Last	name					- 1	ir social security	numbar
SCOTT F.			MIT	CHELL	·					** **	
If joint return,	spous	se's first name and middle initial	Last	name						use's social sec	urity number
AMY A.	•		MIT	CHELL					*	** **	
Home address	(กนท	ber and street). If you have a P.O.	box, see	instructi	ons.			Apt. no.	Pre	sidential Electio	n Campaign
										k here If you, or your sp y, want \$3 to go to this i	-
City town or no	st offi	se, state, and ZIP code, if you have a for	eign add	ress, also	complete sp	aces belov	v (see instruction	s). (below will not change;	
			•	·				,	/ Six o	r refund. You	Spouse
Foreign count	y nar	ne		Foreign	province/st	ate/coun	ty Fareign po	stal code	ማሳ ሥ	jore than four de	pendents, _
<u>-</u>	_		i	<u> </u>					Š68	Instructions and	i √here ▶
Standard	Some	one can claim: You as a depend	dent	Your s	pouse as a	depend	ent	//^\		•	
Deduction	∐s	pouse itemizes on a separate retur	n or you	were a d	lual-status	alien					
_		_				_			_		
Age/Blindness	You:	Were born before January 2, 1955	A	re blind	Spouse:	Was	born before Jant	Jary 2, 1955		s blind	
Dependents (see ir	structions):	(2)	Social secu	rity number	(3) Rel	allonship to you		-	fles for (see Instruct	-
(1) First name		Last name						child tax	credit	Credit for oth	er dependents
							<u> </u>				
							$\langle \triangle \rangle$				
						1					
	1	Wages, salaries, tips, etc. Attach	orm(s)	W-2		<i>[</i>	Sole Interest, Attach	PMT_1	1_		9,421.
	2a	Tax-exempt Interest	a			Yorku			2b		1,077.
Standard] 3a	Qualified dividends	a		7,983	> BEG	inary dividends, Atta required	ch Sch.	3b		7,993.
Deduction for - Single or Married	4a	I	а		\sim		able amount 🔒	,	4b		
filing separately,	c		c			d Tax	able amount		4d	<u> </u>	
\$12,200 Married filling	5a	Social security benefits5	a			Tav	able amount		5b		
jointly or	6	Capital gain or (loss). Attach Sche	dule D	if required	d: Hi rot rec	ulred, ch	eck here	▶∐	8		30.
Qualitying widow(er),	7a	Other income from Schedule 1, lir	ne 9					***********	7a		4,500.
\$24,400 • Head of	ь	Add lines 1, 2b, 3b, 4b, 4d, 5b, 6,				ncome .		>	7b	23.	3,021.
household.	8a	Adjustments to income from Scho			$\int \int \int$,	************	******	8a		61.
\$18,350 If you checked	b	Subtract line 8a from fine 7b. This	ls your	adjuste	gross inc	ome			8b	23	2,960.
any box under	9	Standard deduction or itemized	deduc	tions (ing	m Schedul	e A) 📙	9 2	<u>4,400.</u>		,	
Standard Deduction,	10	Qualified business income deduction.	Attach F	orm 8995	or Form 899	5-A 1	0	58.	_		
see instructions,	lita	Add lines 9 and 10		<i>[]</i>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		11a	2	<u>4,458.</u>
	b	Taxable income. Subtract line.	a from	lige 8b.							
		If zero onless, e	nter co	•••••			*,4;***************		11b	20	<u>8,502.</u>
LHA For Disc	O O LIVE	Privacy Act and Panerwork Re								For	m 1040 (2019)

Form 1040 (2019)	sco	OTT F. & AMY A. MITCHELL	***_	.**		Page 2
	12a	Tax any from Form(s): 1 8814 2 4972 3 12:	a	37,668.		
	b	Add Schedule 2, line 3, and line 12a and enter the total			12b	37,668 <u>.</u>
	13a	Child tax credit or credit for other dependents13				
	ь	Add Schedule 3, line 7, and line 13a and enter the total			13b	<u> </u>
	14	•			14	37,663.
	15	Other taxes, including self-employment tax, from Schedule 2, line 10			15	121.
	16	Add lines 14 and 15. This is your total tax			16	<u>37,784.</u>
	17	Federal income tax withheld from Forms W-2 and 1099			17	33,599.
	118	Other payments and refundable credits:			- 1	
 if you have a qualifying child, 	a	Earned income credit (EIC)	a		ŀ	
attach Sch. EIC.	Ь	Additional child tax credit. Attach Schedule 8812	b			
eldaxatron	C	American opportunity credit from Form 8863, line 8	c		3	
combat pay, see	ď	Schedule 3, line 14	d		1	
		Add lines 18a through 18d. These are your total other payments an	nd refundable	credits 🔼	189/	
	19	Add lines 17 and 18e. These are your total payments	*************		19	33,599.
Refund	20	If line 19 is more than line 16, subtract line 16 from line 19. This is the	e amount you	overbald 🖳	20	
	21a	Amount of line 20 you want refunded to you. If Form 8888 is attached			21a	
Direct deposit? See instructions.	b	Routing number C Type:	Checkin	g Savings		
See maducions.	▶ d	Account number				•
	22	Amount of line 20 you want applied to your 2020 estimated tax	2	71		
Amount	23	Amount you owe. Subtract line 19 from line 16. For details on how to	o pay, see ins	tructions 🕨	23	4,199.
You Owe	24	Estimated tax penalty (see instructions) 24		14.		-
Third Party	Do	you want to allow another person (other than your paid preparer) to discuss the	iş return witi(î)	ıp IRS? See instru	ctions	Yes. Complete below.
Designee		ignes's Phone	(\).	Personal Iden		∐ No
(Other than peld preparer)	nan	no. >		number (PIN)		<u> </u>
•	Unc	fer penalities of perjury. I declare that I have examined this return and accompanying schedules ect, and complete. Declaration of preparer (other than taxpayer) is based on all information of w	and statements, a which preparer has	nd to the best of my i any knowledge.	knowled	ge and belief, they are true,
Sign	You	r signature Oate //out occups	ation			If the IRS sent you an Identity Protection PIN, enter it here
Here						(see inst.)
Joint return?	Spo	sure's signature, if a joint return, both must sign. Date Spouse's or	ccupation			If the IRS sent your spouse an identity Protection PIN.
See instructions. Keep a copy for						enter it here
your records.				ISTRATO		(see inst.)
	,	ne no. Email address AMYMIT			r.NE	
raid	Preparer'	name Preparer's signature	Date	PTIN		Check if:
Preparer						3rd Party Designee
Use Only	ROBI	ERT D. ROSARIO	03/15/2	501		Self-employed
Floreto			Phone n			Firm's EIN
Firm's		DAK, DAVIS & NIXON LLP	904-	<u>-396–583</u>	1	**-**
Firm's		11 GATE PARKWAY BIDG 100 STE 300				
acciress		CKSONVILLE, FL/32256-0562				
Go to www.irs.	gov/Fo	orm1040 for instructions apolithe latest information.				Form 1040 (2019)

SCHEDULE 1

(Form 1040 or 1040-SR)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

➤ Attach to Form 1040 or 1040-SR.

► Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074 2019

Your social security number Name(s) shown on Form 1040 or 1040-SR ***_** SCOTT F. & AMY A. MITCHELL At any time during 2019, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any Yes X No Part I | Additional Income Taxable refunds, credits, or offsets of state and local income taxes 1 2a Alimony received 2a Date of original divorce or separation agreement (see instructions) 3 3 Business income or (loss). Attach Schedule C Other gains or (losses). Attach Form 4797 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 5 Farm income or (loss). Attach Schedule F 6 7 Unemployment compensation Other income. List type and amount 4,500. 8 FIDUCIARY FEES 4,500. 9 Combine lines 1 through 8. Enter here and on Form 1040 or 1040-SR, line 7a Part II Adjustments to Income 10 Educator expenses Certain business expenses of reservists, performing artists, and fee-basis government officials Attach 11 11 Form 2106 Health savings account deduction. Attach Form 8889 12 12 13 Moving expenses for members of the Armed Forces. Attach Form 3903 13 61. 14 Deductible part of self-employment tax. Attach Schedule SE 14 15 Self-employed SEP, SIMPLE, and qualified plans 15 16 Self-employed health insurance deduction 16 Penalty on early withdrawal of savings 17 17 18a Alimony paid 18a b Recipient's SSN Date of original divorce or separation agreement (see instructions). ¢ IRA deduction 19 19 Student loan Interest deduction 20 20 Tuition and fees, Attach Form 8917 21 21 Add lines 10 through 21. These are your adjustments to income. Enter here and on Form 1040 or 1040-SR, line 8a Schedule 1 (Form 1040 or 1040-SR) 2019 For Paperwork Reduction Act Notice, see your tax return instructions. LHA

SCHEDULE 2

Internal Revenue Service

(Form 1040 or 1040-SR)
Department of the Treesury

Additional Taxes

➤ Attach to Form 1040 or 1040-SR.

► Go to www.lrs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2019 Attachment Sequence No. 02

s) shown on Form 1040 or 1040-SR		curity number
TT F. & AMY A. MITCHELL	***_**-	
Tax		
Alternative minimum tax, Attach Form 6251	1	
Excess advance premium tax credit repayment, Attach Form 8962	2	
Add lines 1 and 2. Enter here and include on Form 1040 or 1040-SR, line 12b	3	0.
Self-employment tax, Attach Schedule SE	4	121.
Unreported social security and Medicare tax from Form: a 4137 b 8919	1 5	
Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form	1	
5329 if required	6,	
Household employment taxes, Attach Schedule H	7a	
	7b	
	8	
	<u></u>	
	10	121.
	Alternative minimum tax. Attach Form 6251 Excess advance premium tax credit repayment. Attach Form 8962 Add lines 1 and 2. Enter here and include on Form 1040 or 1040-SR, line 12b II i Other Taxes Self-employment tax. Attach Schedule SE Unreported social security and Medicare tax from Form: a 4137 b 8919 Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required Household employment taxes. Attach Schedule H Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required Taxes from: a Form 8959 b Form 8960 c Instructions; enter code(s) Section 965 net tax liability installment from Form 965-A Add lines 4 through 8. These are your total other taxes. Enter here and on Form 1040 or 1040-SR, line 15	Alternative minimum tax. Attach Form 6251 Excess advance premium tax credit repayment. Attach Form 8962 Add lines 1 and 2. Enter here and include on Form 1040 or 1040-SR, line 12b Self-employment tax. Attach Schedule SE Unreported social security and Medicare tax from Form: a 4137 b 8919 Additional tax on IRAs, other qualified retirement plans, and other tax-favored accounts. Attach Form 5329 if required Household employment taxes. Attach Schedule H Repayment of first-time homebuyer credit from Form 5405. Attach Form 5405 if required Taxes from: a Form 8959 b Form 8960 c Instructions; enter code(s) Section 965 net tax liability installment from Form 965-A Add lines 4 through 8. These are your total other taxes. Enter here and on Form 1040 or 1040-SR, line 15

SCHEDULE 3

(Form 1040 or 1040-SR)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

▶ Attach to Form 1040 or 1040-SR.

➤ Go to www.irs.gov/Form1040 for Instructions and the latest information.

OMB No. 1545-0074

2019
Attachment 88

,	s) shown on Form 1040 or 1040-SR TT F. & AMY A. MITCHELL	* * * _ * *
	I Nonrefundable Credits	
1	Foreign tax credit. Attach Form 1116 if required	1 5.
2	Credit for child and dependent care expenses. Attach Form 2441	2
3	Education credits from Form 8863, line 19	3
4	Retirement savings contributions credit. Attach Form 8880	4
5	Residential energy credits. Attach Form 5695	<u>(\) 5</u>
6	Other credits from Form: a 3800 b 8801 c	\'à
_ 7	Add lines 1 through 6. Enter here and include on Form 1040 or 1040-SR, line 13b	5.
Part	II Other Payments and Refundable Credits	<u> </u>
8	2019 estimated tax payments and amount applied from 2018 return	8
9	Net premium tax credit. Attach Form 8962	9
10	Amount paid with request for extension to file (see instructions)	10
11	Excess social security and tier 1 RRTA tax withheld	11
12	Credit for federal tax on fuels. Attach Form 4136	12
13	Credits from Form: a 2439 b Reserved c 8885 d	13
14	Add lines 8 through 13. Enter here and on Form 1040 or 1040-SR, line 18d	14_)

Form 2210

Department of the Treasury Internal Revenue Service

Name(s) shown on tax return

Underpayment of Estimated Tax by Individuals, Estates, and Trusts

▶ Go to www.irs.gov/Form2210 for Instructions and the latest information.

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

2019 Attachment Sequence No. 06

OMB No.1545-0074

ldentifying number

***_**

SCOTT F. & AMY A. MITCHELL

Do You Have To File Form 2210? Complete lines 1 through 7 below. Is line 7 less than \$1,000? Don't file Form 2210. You don't owe a penalty. No You don't owe a penalty, Don't file Form 2210 Complete lines 8 and 9 below. Is line 6 equal to or more than Yes (but if box E in Part II applies, you must file page 1 of Form 2210). No Yes You must file Form 2210, Does box B, C, or D in Part II apply? You may owe a penalty. Does any box in Part II below apply? ÌΒS No No You must figure your penalty. You aren't required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to Don't file Form 2210. You aren't required to figure your penalty because the IRS will figure it and send you a bill for any figure it, yournay use Part III or Part IV as a worksheet and enter unpaid amount. If you want to figure it, you may use Part III or Part IV as a worksheet and enter your penalty amount on your tax your penalty amount on your tax return, but file only page 1 of Form 2210. return, but don't file Form 2210. Part | Required Annual Payment Enter your 2019 tax after credits from Form 1040 or Form 1040-SR, line 14 (see instructions if not 37,663. filling Form 1040 or Form 1040-SR) Other taxes, including self-employment tax and, if applicable, Additional Medicare Lax and/or Net investment 121. Income Tax (see Instructions) Refundable credits, including the premium tax credit (see instructions) 37,784. Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, stop, you don't give a penalty. Don't file Form 2210 5 Multiply line 4 by 90% (0.90) 33,599. Withholding taxes. Don't include estimated tax payments (see instructions). 6 4,185. 7 Subtract line 6 from line 4. If less than \$1,000, stop; you don't owe a penalty. Don't file Form 2210 48,887. Maximum required annual payment based on prior year stax (see instructions) 34,006. Required annual payment. Enter the smaller of line 5 or line 8. Next: is line 9 more than line 6? No, You don't owe a penalty. Don't file Form 2210 unless box E below applies. X Yes. You may owe a penalty, but don't file Form 2210 unless one or more boxes in Part II below applies. If box B, C, or D applies, you must figure your penalty and file Form 2210. • If box A or E applies (but not B, C, or D) file only page 1 of Form 2210. You aren't required to figure your penalty; the IRS will figure it and send you a bill for any unpaid amount. If you want to figure your penalty, you may use Part III or IV as a worksheet and enter your penalty on your tax return, but file only page 1 of Form 2210. Part II Reasons for Filing. Check applicable boxes. If none apply, don't file Form 2210. A You request a waiver (see instructions) of your entire penalty. You must check this box and file page 1 of Form 2210, but you aren't required to figure your penalty. You request a waiver (see Instructions) of part of your penalty. You must figure your penalty and walver amount and file Form 2210. C _____ Your income varied during the year and your penalty is reduced or eliminated when figured using the annualized income installment method. You must figure the penalty using Schedule Al and file Form 2210. D Your penalty is lower when figured by treating the federal income tax withheld from your income as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210. You filed or are filing a joint return for either 2018 or 2019, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 2210, but you aren't required to figure your penalty (unless box B, C, or D applies).

912501 02-05-20

Form 2210 (2019)

LHA For Paperwork Reduction Act Notice, see separate instructions.

SCHEDULE B

(Form 1040 or 1040-SR)

Interest and Ordinary Dividends

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

Attach to Form 1040 or 1040-SR.

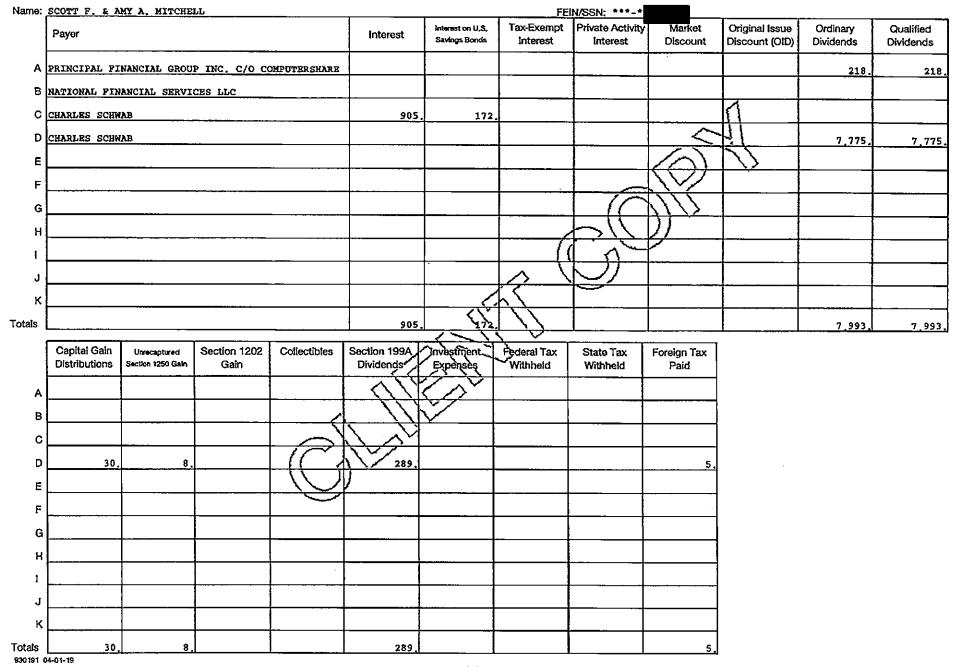
2019
Affachment
Sequence No. 08

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

*** ** SCOTT F. & AMY A. MITCHELL Amount Part I List name of payer, if any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that Interest buyer's social security number and address 1,077. CHARLES SCHWAB Note: If you received a Form 1099-INT Form 1099-OID, or substitute statement from a brokerage firm. list the firm's name as the payer and enter the total interest 1,077 shown on that 2 Add the amounts on line 1 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040 SR, line 2b 1.077 Amount Note: If line 4 is over \$1,500, you must complete Part III. Part II List name of payer ≥ C%O 218 GROUP INC: COMPUTERSHARE PRINCIPAL FINANCIAL Ordinary NATIONAL FINANCIAL SERVICES LLC Dividends 7,775 CHARLES SCHWAB 5 Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form. 7,993. 6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b Note: If line 6 is over \$1,500, you must complete Part III. Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a Yes No foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust 7a At any time during 2019, did you have a financial interest in or signature authority over a financial account (such Foreign X Accounts as a bank account, securities account, or brokerage account) located in a foreign country? See instructions and Trusts If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing Caution: If required, fallure to file FinCEN requirements and exceptions to those requirements Form 114 may b If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account result in is located substantial penalties. See During 2019, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? instructions. If "Yes," you may have to file Form 3520. See instructions

Schedule B (Form 1040 or 1040-SR) 2019

Interest and Dividend Summary



SCHEDULE D

(Form 1040 or 1040-SR)

Department of the Treasury Internal Revenue Service (99)

Capital Gains and Losses

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

➤ Go to www.rs.gov/ScheduleD for instructions and the latest information.

➤ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

2019 Attachment

Your social security number Name(s) shown on return *** ** SCOTT F. & AMY A. MITCHELL X No Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) (h) Gain or (loss) See instructions for how to figure the amounts to Adjustments Subtract column (e) (d) (e) enter on the lines below. to gain or loss from Form(s) 8949, Part's from column (d) and Proceeds Cost combine the result This form may be easier to complete if you round off (sales price) (or other basis) with column (g) cents to whole dollars. line 2, column (g). Totals for all short-term transactions reported on Form 1099-B for which basis was recorted to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b Totals for all transactions reported on Form(s) 1h 8949 with Box A checked Totals for all transactions reported on Form(s) 8949 with Box B checked. Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 9781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and frusts 5 from Schedule(s) K-1 Short-term capital loss carryover, Enter the amount, if any, from line 8 of your Capital Ross Carryover Worksheet in the Instructions 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h), if you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2 Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) (h) Gain or (loss) See Instructions for how to figure the amounts to Subtract column (e) Adjustments ·(d) (e) enter on the lines below. Cost to gain or loss from from column (d) and Proceeds Form(s) 8949, Part II, combine the result This form may be easier to complete if you round off (sales price) (or other basis) with column (g) cents to whole dollars. line 2, column (g) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions), However, if you choose report all these transactions on Form 8949, leave this life blank and go to line 8b Totals for all transactions reported on Form(s) 8949 with Box D checked. Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 from Forms 4684, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from 12 Schedule(s) K-1 30. Capital gain distributions SEE STATEMENT 3 13 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 Worksheet in the instructions Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then go to 30. Part III on page 2

Schedule D (Form 1040) 2019

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

for Forms 1040 and 1040-SR, line 12a (or in hip instructions for Form 1040-NR, line 42).

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

New All Security Secu	Your SSN
Name(s) shown on return SCOTT F. & AMY A. MITCHELL	***_**
Complete this worksheet only if line 18 or line 19 of Schedule D is more than zero and lines 15 and 16 of Schedule D are gains. O Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 12a (or in the instruction line 42) to figure your tax. Before completing this worksheet, complete Form 1040 or 1040-SR through line 11b (or Form 1040-NR Exception: Don't use the Qualified Dividends and Capital Gain Tax Worksheet or this worksheet to figure your tax if: • Line 5 or line 16 of Schedule D is zero or less and you have no qualified dividends on Form 1040 or 1040-SR, line 3a (or Form 1040-NR, line 41) is zero or less. Instead, see the instructions for Forms 1040 and 1040-SR, line 12a (or Form 1040-NR, line 42).	
4. Enter your tayable income from Form 1040 or 1040 SR, line 11b for Form 1040 NR, line 41). Province if you are filling Form 2555	
(relating to foreign earned income), enter instead the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 12a)	1. 208,502.
2. Enter your qualified dividends from Form 1040 or 1040-SR, line 3a (or Form 1040-NR, line 10b) 2 7 , 993 .	
3. Enter the amount from Form 4952 (used to figure Investment Interest expense deduction), line 40 3	\
4. Enter the amount from	•
Form 4952, line 4e* 4	
5. Subtract line 4 from line 3. If zero or less, enter -0- 5.	
6. Subtract line 5 from line 2. If zero or less, enter 0. 6. 7,993.	
7. Enter the smaller of line 15 or line 16 of Sch. D 7. 30.	
8. Enter the smaller of line 3 or line 4 8	
9. Subtract line 8 from line 7. If zero or less, enter -0-**	
10. Add lines 6 and 9	3.
11. Add lines 18 and 19 of Schedule D**	
12. Enter the smaller of line 9 or line 11	3 <u>.</u>
13. Subtract line 12 from line 10	13. 8,015.
14. Subtract line 13 from line 1. If zero or less, enter -0-	14. 200,487.
15. Enter:	
 \$39,376 If single or married filling separately; \$78,750 If married filling jointly or qualifying widow(er); or \$52,750 If head of bousehold. 	
16. Enter the smaller of line 1 or line 15 16 78,750	<u>).</u>
16. Enter the smaller of line 1 or line 15 17. Enter the smaller of line 14 or line 16 18. 78,750	
18. Subtract line 10 from line 1. If zero or less.	
enter 01818.	
19. Enter the smaller of line 1 or: • \$160,725 if single or married filing	
separately;	1
• \$321,450 if married filing jointly or qualifying widow(er); or	
• \$160,700 if head of household	
20. Enter the smaller of line 14 or line 19 20 200 , 487.	_
21. Enter the larger of line 18 or line 20 21 200 , 48	
	0.
If lines 1 and 16 are the same, skip lines 23 through 43 and go to line 44. Otherwise, go to line 23.	
23. Enter the smaller of line 1 or line 13 23 8,015.	
24. Enter the amount from line 22. (If line 22 is blank, enter -0) 24 24	
25. Subtract line 24 from line 23. If zero or less, enter -0 25 8 , 015 .	
26. Enter:	
 \$434,550 if single; \$244,425 if married filing separately; \$488,850 if married filing jointly or qualifying widow(er); or \$461,700 if head of household. 	
27. Enter the smaller of line 1 or line 26 27 208,502.	
28. Add fines 21 and 22 28. 200,487.	
29. Subtract line 28 from line 27. If zero or less, enter -0- 29. 8,015.	
30. Enter the smaller of line 25 or line 29	<u>5.</u>

Sc	hedule D Tax Worksheet - Continued		
_	31, Multiply line 30 by 15% (0.15)	31.	1,202.
;	32. Add lines 24 and 30		
	If lines 1 and 32 are the same, skip lines 33 through 43 and go to line 44. Otherwise, go to line 33.		
	33. Subtract line 32 from line 23 33 0 .		
	34. Multiply line 33 by 20% (0.20)	34.	0.
	If Schedule D, line 19, is zero or blank, skip lines 35 through 40 and go to line 41. Otherwise, go to line 35.		
	35, Enter the smaller of line 9 above or Schedule D, line 19 35 8 .		
	36. Add lines 10 and 21 36 208, 510.		
3	37. Enter the amount from line 1 above 37. 208,502.		
	38. Subtract line 37 from line 36. If zero or less, enter -0		
	39. Subtract line 38 from line 35. If zero or less, enter -0-		
	10. Multiply line 39 by 25% (0.25)	40.	0.
	If Schedule D, line 18, is zero or blank, skip lines 41 through 43 and go to line 44. Otherwise, go to line 41.		
4	11. Add lines 21, 22, 30, 33, and 39	>	
	2. Subtract line 41 from line 1		
	l3. Multiply line 42 by 28% (0.28)	43.	
	4. 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		
	the tax. If the amount on line 21 is \$100,000 or more, use the Tax Computation Worksheet	44	36,466.
4	5. Add lines 31, 34, 40, 43, and 44	45	37,668.
	6. Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure the		
	tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet	46	<u> 38,389.</u>
4	7. 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 or 1040-SR, line 12a (or Form 1040-NR, line 42) (if you		
	are filing Form 2555, don't enter this amount on Form 1040 or 1040-SR, line 12a. Instead, enter it on line 4 of		
	the Foreign Earned Income Tax Worksheet in the Instructions for Forms 1040 and 1040 SR)	47	37,668.
		_	
		-	
	* If applicable, enter instead the smaller amount you entered on the dotted line next to line 4e of Form 4952. ** If you are filing Form 2555, see the footnote in the Foreign Earned Income Tax Worksheet in the		
	Instructions for Forms 1040 and 1040-SR, line 12a, before completing this line.		
	/_/ \ 1		

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

Social security number of

person with self-employment Income

*** **

SCOTT F. MITCHELL

Section B - Long Schedule SE

Part I 🚦 Self-Employment Ta	X
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Note: If your only income subject to self-employment tax is church employee income, see instructions. Also see instructions for the definition of church employee income.

A	If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but y \$400 or more of other net earnings from self-employment, check here and continue with Part I	you had	<u> </u>
1 a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. Note: Skip lines 1a and 1b if you use the farm optional method (see instructions)	^ _{1a}	
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AH	745	
2	Net profit or (loss) from Schedule C, iline 31; and Schedule K-1 (Form 1065), box 14, code A (other		>
2.	than farming), Ministers and members of religious orders, see instructions for types of income to]	√
	report on this line. See instructions for other income to report. Note: Sklp this line if you use the		
	Teport on this line, see instructions for other income to report. Note: Skip this line if you use the	2	4,500.
	nonfarm optional method (see Instructions) SEE STATEMENT 5	3	4,500.
3	Combine lines 1a, 1b, and 2	-	4,156.
4 a	If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3	4a	±,100+
	Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.	4.	
	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
C	Combine lines 4a and 4b. if less than \$400, stop; you don't owe self-employment tax/ Exception? If		1 156
	less than \$400 and you had church employee income, enter-0- and continue	4c	4,156.
5 a	Enter your church employee income from Form W-2. See instructions for		
	definition of church employee income	32-22 PK-12 PK:	
þ	Multiply line 5a by 92,35% (0.9235). If less than \$100, enter -0-	5b	/ 1 F G
6	Add lines 4c and 5b	6	4,156.
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or		
	the 6.2% portion of the 7.65% railroad retirement (tler 1) tax for 2019	7	132,900
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W2)		
	and railroad retirement (tier 1) compensation. If \$132,900 or more, skip lines		
	8b through 10, and go to line 11 8a 132,900.		
b	Unreported tips subject to social security tax (from Form 4131, line 10)		
¢	Wages subject to social security tax (from Form 8919, Jine 10).		
đ	Add lines 8a, 8b, and 8c	8d	
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9	
10	Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	····
11	Multiply line 6 by 2.9% (0.029)	11	121.
12	Self-employment tax, Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040 or 1040-SR),		
	line 4, or Form 1040-NR, line 55	12	121.
13	Deduction for one-half of self-employment tax.	İ	i
	Multiply line 12 by 50% (0.50). Enter the result here and on Schedule 1 (Form		
	1040 or 1040-SR), line 14, or Form 1040-NR, line 27		
Par	t II 3 Optional Methods To Figure Net Earnings (see instructions)		· · · · · · · · · · · · · · · · · · ·
	Optional Method. You may use this method only if (a) your gross farm income 1 wasn't more than		
\$8,16	0, or (b) your net farm profits 2 were less than \$5,891:		
14	Maximum income for optional methods	14	5,440
15	Enter the smaller of: two-thirds (2/3) of gross farm income 1 (not less than zero) or \$5,440. Also include		
	this amount on line 4b above	15	
Nonf	arm Optional Method. You may use this method only if (a) your net nonfarm profits 3 were less than \$5,891		
and a	iso less than 72.189% of your gross nonfarm income, 4 and (b) you had not earnings from self-employment of		
at lea	st \$400 in 2 of the prior 3 years. Caution: You may use this method no more than five times.	****	
16	Subtract line 15 from line 14	16	<u> </u>
17	Enter the smaller of: two-thirds (2/3) of gross nonfarm income 4(not less than zero) or the amount on		
	line 16. Also include this amount on line 4b above	17	
1 Fro	n Sch. F, line 9, and Sch. K-1 (Form 1065), box 14, code B. 3 From Sch. C , line 31; and Sch. K-1 (Form 10	165), bo	x 14, code A.

² From Sch. F, line 34, and Sch. K-1 (Form 1065), box 14, code A - minus the amount you would have entered on line 1b had you not used the optional method.

³ From Sch. C , line 31; and Sch. K-1 (Form 1065), box 14, code A.

From Sch. C, ilne 7; and Sch. K-1 (Form 1065), box 14, code C.

Foreign Tax Credit

(Individual, Estate, or Trust)

► Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

Department of the Treasury internal Revenue Service (99)

► Go to www.ira.gov/Form1116 for instructions and the latest information. Identifying number as shown on page 1 of your tax return Name SCOTT F. & AMY A. MITCHELL Use a separate Form 1116 for each category of income listed below. See Categories of Income in the Instructions. Check only one pox on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below. c X Passive category income g Lump-sum distributions Section 951A category income Section 901(j) income Foreign branch category income General category income Certain income re-sourced by treaty h Resident of (name of country) > UNITED STATES Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession Part I Taxable Income or Loss From Sources Outside the United States (for category checked aboye) Foreign Country or U.S. Possession Total (Add cols. A, B, and C.) Δ OTHER Enter the name of the foreign country or U.S. COUNTRIES possession _____ 1a Gross income from sources within country shown above and of the type checked above; 33 33. b Check if line tails compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) Deductions and losses (Caution: See instructions.): Expenses definitely related to the income on line 1a (attach statement) Pro rata share of other deductions not definitely related: a Certain itemized deductions or standard deduction b Other deductions (attach statement) c Add lines 3a and 3b d Gross foreign source income 233 021 Gross income from all sources 000141618 f Divide line 3d by line 3e g Multiply line 3c by line 3f Pro rata share of interest expense: a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) b Other Interest expense Losses from foreign sources 3 Add lines 2, 3g, 4a, 4b, and 5 30. Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 Part II Foreign Taxes Paid or Accrued Credit is claimed Foreign taxes paid or accrued for taxes in U.S. dollars In foreign currency (you must check one) (t) Other (u) Total foreign (p) Other Taxes withheld at source on: Taxes withheld at source on: taxes paid or

toreign

taxes paid or

accrued

(q) Dividends

5.

LHA For Paperwork Reduction Act Notice, see instructions.

(n) Rents and

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2

(O) Interest

Form 1116 (2019)

accrued (add cols.

(q) through (t))

foreign

taxes paid or

accrued

(s) Interest

В c (j) X Paid

(I) Date paid or accrued

Accrue

(M) Dividends

(r) Rents and rovalties

5.

5.

Form 1116 (2019)

ALTERNATIVE MINIMUM TAX Foreign Tax Credit

(Individual, Estate, or Trust)

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

➤ Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0121

Name				identifying numb	6L #2 #pows or	page 1 or your tax return
SCOTT F. & AMY A. MITCHELL				***_**		
Use a separate Form 1116 for each category of income listed belo	w. See Categorie	s of income in	the instruction	s. Check only one	OUX OIL CAUL	orm 1116, Report all
amounts in U.S. dollars except where specified in Part II below.				-		
a Section 951A category Income c X Passive of	ategory income	e Sect	ion 901(j) inco	me	g 🗀 Li	ump-sum distributions
b Foreign branch category income d General of	ategory income	f Certz	aln income re-	sourced by treaty	٨	
					\leftarrow	
h Resident of (name of country) > UNITED STATE						
Note: If you paid taxes to only one foreign country or U.S. more than one foreign country or U.S. possession, use a					ou paid taxe	s to
Part Taxable Income or Loss From Sources Out						
1 det : Taxable modifie of Edga From Courses Suc		Foreign Count			}	Total
	A		В	1_\X.X		Add cols. A, B, and C.)
i Enter the name of the foreign country or U.S.	OTHER				7	
possession	COUNTRIE	S				
1a Gross income from sources within country shown above			N. C.			
and of the type checked above;		İ				
			_W	(
		33.	- Land		<u>1a</u>	33.
b Check if line 1a is compensation for personal services as			TO S	7		
an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to						
determine its source (see instructions)				j		
Deductions and losses (Caution: See instructions.):			A		- -	1
•	Control of the Contro				**************************************	
2 Expenses definitely related to the income on line 1a (attach statement)		<u></u>				
3 Pro rata share of other deductions not definitely related;					المندم البينينيليك	
a Certain itemized deductions or standard deduction	-//					
b Other deductions (attach statement)	(5//			. 		
c Add lines 3a and 3b	4	33.		 		
d Gross foreign source income	233,0			<u> </u>		
e Gross Income from all sources f Divide line 3d by line 3e	000141				-	
g Multiply line 3c by line 3f	77	<u> </u>		 		
4 Pro rata share of interest expense:					424-244-4	
a Home mortgage interest (use the Worksheet for	7					
Home Mortgage Interest in the instructions)	1/					
b Other interest expense	/			ļ <u>-</u>		
5 Losses from foreign sources				.		
6 Add lines 2, 3g, 4a, 4b, and 5	<u> </u>			.1	6	22
7 Subtract line 6 from line 1a, Enter the result here and on line Part II Foreign Taxes Paid or Accrued	15, page 2				<u> ▶ 7</u>	33.
Gredit is claimed	Foreig	n taxes paid o	or accrued			
for taxes		,, <u>, , , , , , , , , , , , , , , , , ,</u>		in U.S. doli:	ırs	
Vou must	/-> OIL				(t) Othe	r (u)Total foreign
Taxes withheld at source on:	(p) Other foreign	Taxes	withheld at so	urce on:	foreign	
Accrued	taxes paid or				taxes paid	
(I) Date paid (m) Dividends (n) Rents and (o) Interest	accrued	(q) Dividende	(r) Rents and royalties	(3) Interest	accrued	(4)
A	-	5.				5.
B C	<u> </u>		<u> </u>			
	I' 0	l	L	1		8 5.
8 Add lines A through C, column (u). Enter the total here and LHA For Paperwork Reduction Act Notice, see instruc			*******************			Form 1116 (2019)

Department of the Treasury Internal Revenue Service (99)

LHA For Paperwork Reduction Act Notice, see instructions.

ALTERNATIVE MINIMUM TAX

For	m 1116 (2019) SCOTT F. & AMY A. MITCHELL art III Figuring the Credit	* * *	_**.	Page 2
	Enter the amount from line 8. These are your total foreign taxes paid or accrued	Т	T	
¥	and the state of t	.	1	
	for the category of income checked above Part I	1		
10	Carryback or carryover (attach detailed computation)			
10	(if your income was section 951A category income (box a above Part I), leave	1	i	
	line 10 blank.)		1	
44	A448 040 5			
1.1	Add lines 9 and 10	4		
40	Reduction in foreign taxes	1	ł	
12	Reduction in foreign taxes	치		
	Tayon realizabilish under high tay biskaut	. A		
10	Taxes reclassified under high tax kickout	¥à.		
	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	12	∱	5.
	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the	1	1-7	
10	1 1 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
	United States (before adjustments) for the category of income checked above Part I	Ή		
40	Adjustments to line 45			
	Adjustments to line 15	-[
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income.	1	1	
	(If the result is zero or less, you have no foreign tax credit for the category of income		ŀ	
	you checked above Part I. Skip lines 18 through 22. However, if you are filling more than one Form 1116, you must complete line 20.)			
		H		
18	Individuals: Enter the amount from Form 1040 or 1040-SR, line 11b; or			
	Form 1040-NR, line 41. Estates and trusts: Enter your taxable income without the deduction for your exemption 232,902			
	the deduction for your exemption 232,902 Caution; If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	4	1	
	<i>f</i> N	1,0		.00014
	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19	 	100014
20	individuals: Enter the total of Form 1040 or 1040-SR, line 12a, and Schedule 2 (Form 1040 or 1040-SR), line 2.			
	if you are a nonresident alien, enter the total of Form 1040-NR, lines 42 and 44. Estates and trusts: Enter the			
	amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 41, 42, and 44. Foreign estates			30,631.
	and trusts should enter the amount from Form 1040-NR, line 42	20	 	30,0311
٠	Caution: If you are completing line 20 for separate category g (lump-sum distributions), see instructions.		İ	4.
	Multiply line 20 by line 19 (maximum amount of credit) Enter the smaller of line 14 or line 21. If this is the only Form 1146 you are filing, skip lines 23 through 30 and enter this	21	 	
22		22		4.
P	amount on line 31. Otherwise, complete the appropriate line in Part IV Summary of Credits From Separate Parts [III]	122	<u> </u>	**
		\top		
20	Credit for taxes on section 951A category income Credit for taxes on foreign branch category income 23 24	1		
	Credit for taxes on passive category income	┪		
	Credit for taxes on general category income	┪ .		
		1		
	- constant and the control of the co	1		
		1		
	11000 1100 1100 1100 1100 1100 1100 11	30	1	
3U 3-	Add lines 23 through 29	31		4.
	Enter the smaller of line 20 or line 30	32		<u></u>
	Reduction of credit for international boycott operations Subtract line 32 from line 31. This is your foreign tax credit. Enter here and on Schedule 3 (Form 1040 or	عدا		
చ	1040-SR), line 1; Form 1040-NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 46a	33		4.
	ווויסידער שוווי יון אוויסידער שוווי אין אוויסידער שווויסידער שוויסידער שווויסידער שווויס	100	1	Form 1116 (2019)

Form 8995

Qualified Business Income Deduction Simplified Computation

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

➤ Attach to your tax return.

► Go to www.irs.gov/Form8995 for instructions and the latest information. Your taxpayer identification number Name(s) shown on return ***_*: SCOTT F. & AMY A. MITCHELL (c) Qualified business (b) Taxpayer 1 (a) Trade, business, or aggregation name identification number income or (loss) iii iv Total qualified business income or (loss). Combine lines 1i through 1v. 2 column (c) Qualified business net (loss) carryforward from the prior year Total qualified business income. Combine lines 2 and 3. If zero or less, enter 5 Qualified business income component. Multiply line 4 by 20% (0.20) Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) 289. (see instructions) SEE STATEMENT Qualified REIT dividends and qualified PTP (loss) carryforward from the prior 7 7 Total qualified REIT dividends and PTP income. Combine lines 6 and 7 if zero 8 289 or less, enter -0-9 58. REIT and PTP component. Multiply line 8 by 20% (0.20) 58. 10 Qualified business income deduction before the income limitation. Add lines 5 and 9 10 208,560. Taxable income before qualified business income deduction 11 8,023. Net capital gain (see instructions) 12 200,537. Subtract line 12 from line 11, if zero or less, enter-0-13 40,107. 14 Income limitation. Multiply line 13 by 20% (0.20) 14 Qualified business income deduction. Enter the lessen of Jiho 10 or line 14. Also enter this amount on 15 58. the applicable line of your return

Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-15 16 16 Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than 17

Form 8995 (2019)

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

Form 1116	U.S. and Foreig	gn Source Income Summa	ry	
NAME				
COTT F. & AMY A. MI	TCHELL			***_** FOREIGN
INCOME TYPE		TOTAL	U.S	PASSIVE
Compensation		219,421.	219,421.	
Dividends/Distributions	SEE STATEMENT 7		7,960.	33.
Interest	DUD DILLEMINA	1,077.	1,077.	
Capital Gains		30.	30.	
Business/Profession		•••		
Rent/Royalty			Λ	
State/Local Refunds			11	
Partnership/S Corporation			Z) /	
Trust/Estate				>
Other Income		4,500.	4,500.	Fac
Grass Income		233,021.	₹ 232%/988.	33
Less:		((,))	
Section 911 Exclusion				
Capital Losses		()		
Capital Gains Tax Adjustment		233,021.	232,988.	33
otal Income - Form 1116		233,021.	1 232,300+	
		_		
Deductions:		//		
Business/Profession Expenses				
Rent/Royalty Expenses		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
Partnership/S Corporation Losses				
Trust/Estate Losses				
Capital Losses	,			
Non-capital Losses				
Individual Retirement Account		// /s		
Moving Expenses				
Self-employment Tax Deduction		61.	61.	
Self-employment Health Insurance		<u>></u>		
Keogh Contributions		>*		
Alimony				
Forfeited Interest				
Foreign Housing Deduction	((})			
Other Adjustments				
Capital Gains Tax Adjustment Total Deductions		61.	61.	
1 626) Maddanian				
Adjusted Gross Income		232,960.	232,927.	33
ess Itemized Deductions:				
Specifically Allocated				
Home Mortgage Interest				
Other Interest		64 466	0.4 0.00	3
Ratably Allocated		24,400.	24,397. 24,397.	3
Total Adjustments to Adjusted Gross Incom	ie	24,400.	24,397.	
Taxable Income		208,560.	208,530.	30
I DAGGIG HIGGING				

Form	4	1	4	۵
- CAPTER	- 1		- 1	О

Foreign Tax Credit Carryover Statement (Page 1 of 2)

NAME

SCOTT F. & AMY A. MITCHELL



D		0014	0015	2016	2017	2018	2019
Regul		2014	2015	2010	2011	2010	5
	Foreign tax paid/accrued						
Z.	FTC carryback to 2019						
	for amended returns			ļ	<u> </u>	<u> </u>	
3.	Reduction in foreign					[A	
	taxes			ļ		Cather 7	5
	Foreign tax available			 		75.11	<u>5</u>
5.	Maximum credit allowable	····		<u></u>	 	** +	
8.	Unused foreign tax (+)				1	[]]	
	or excess of limit (-)			<u> </u>			
	Foreign tax carryback				 		-
						1. N/	
	Foreign tax carryforward					1	
	Foreign tax or excess				(()		
	Foreign tax or excess limit remaining)	
	Foreign tax or excess	tilable years to be ca	urrled to next year				
	Foreign tax or excess limit remaining	tilable years to be ca	<u></u>		//		
	Foreign tax or excess Ilmit remaining	tilable years to be ca	urled to next year	2010	201)	2012	2013
9.	Foreign tax or excess limit remaining	tilable years to be ca	<u></u>		//	2012	2013
9.	Foreign tax or excess Ilmit remaining	į	<u></u>		//	2012	2013
9. - 1. 2.	Foreign tax or excess Ilmit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns	į	<u></u>		//	2012	2013
9. 1. 2.	Foreign tax or excess Ilmit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns Reduction in foreign		<u></u>		//	2012	2013
9. 1. 2.	Foreign tax or excess Ilmit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns Reduction in foreign taxes		<u></u>		//	2012	2013
9. 1. 2.	Foreign tax or excess Ilmit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns Reduction in foreign taxes Foreign tax available		<u></u>		//	2012	2013
9. 1. 2. 3.	Foreign tax or excess Ilmit remaining		<u></u>		//	2012	2013
9. 1. 2. 3.	Foreign tax or excess Ilmit remaining		<u></u>		//	2012	2013
9. 1. 2. 3. 4. 5. 6.	Foreign tax or excess Ilmit remaining		<u></u>		//	2012	2013
9. 1. 2. 3. 4. 5. 6.	Foreign tax or excess Ilmit remaining		<u></u>		//	2012	2013
9. 1. 2. 3. 4. 5. 6.	Foreign tax or excess Ilmit remaining		<u></u>		//	2012	2013
9. 1. 2. 3. 4. 5. 6.	Foreign tax or excess Ilmit remaining		<u></u>		//	2012	2013

Form 1116

Foreign Tax Credit Carryover Statement (Page 2 of 2)

NAME

SCOTT F. & AMY A. MITCHELL

***_**

MT	[2014	2015	2018	2017	2018	2019
1.		2014	2013	2010	2017	2010	5
	FTC carryback to 2019						
۷.	for amended returns						
7	Reduction in foreign					A	
٥.	taxes					13	
4.						7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5
5.							4
6.						~\	
٧.	or excess of limit (-)]		[<i>]]</i> [1
7	Foreign tax carryback						
В.						$\sqrt{2}$	
٠.					11	1	
Я	FOREIGN TAX OF EXCESS						
9.					(\))	1
9.	limit remaining	ilable vears to be ca	urried to next year			<i>)</i>	1 1
9.		illable years to be ca	urried to next year				1
9,	limit remaining	ilable years to be ca	urried to next year	2010	201)	2012	2013
9.	limit remaining Total foreign taxes from all ava	ilable years to be ca			///	2012	2013
	Imit remaining Total foreign taxes from all ava Foreign tax paid/accrued				///	2012	2013
1.	Imit remaining				///	2012	2013
1.	Imit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns				///	2012	2013
1.	Imit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns Reduction in foreign				///	2012	2013
1. 2. 3.	Imit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns Reduction in foreign taxes				///	2012	2013
1. 2. 3.	Imit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns Reduction in foreign taxes Foreign tax available				///	2012	2013
1. 2. 3.	Imit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns Reduction in foreign taxes Foreign tax available Maximum credit allowable				///	2012	2013
1. 2. 3. 4. 5.	Imit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns Reduction in foreign taxes Foreign tax available Maximum credit allowable Unused foreign tax (+)				///	2012	2013
1. 2. 3. 4. 5. 6.	Imit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns Reduction in foreign taxes Foreign tax available Maximum credit allowable				///	2012	2013
1. 2. 3. 4. 5. 6. 7.	Imit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns Reduction in foreign taxes Foreign tax available Maximum credit allowable Unused foreign tax (+) or excess of limit (-)				///	2012	2013
1. 2. 3. 4. 5. 6. 7. 8.	Imit remaining Total foreign taxes from all ava Foreign tax paid/accrued FTC carryback to 2019 for amended returns Reduction in foreign taxes Foreign tax available Maximum credit allowable Unused foreign tax (+) or excess of limit (-) Foreign tax carryback				///	2012	2013

FORM 1040		WAGES RECEI	VED AND TAX	ES WITHHE	LD	STATE	MENT 1
T S EMPLOYER'S NAME		AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
S CRONIN & MAXWELL, T STATE OF FLORIDA CHIEF FINANCIAL	PL	77,626.			Α.	5,036.	
OFFICER		141,795.	20,316.		1	8,240.	2,122.
TOTALS		219,421.	33,599.			13.7276.	3,300.
FORM 1040		QUA	LIFIED DIVI	DENDS		STATE	MENT 2
NAME OF PAYER				OR PT	DINARY VIDENDS		LIFIED I DEND S
PRINCIPAL FINANCIAL COMPUTERSHARE CHARLES SCHWAB	GRO	OUP INC. C/C) /2		218. 7,775.		218. 7,775.
TOTAL INCLUDED IN FO	RM	1040, LINE	3A				7,993.
		<		> `			
SCHEDULE D		CAPITAL	GAIN, ÓISTRI	BUTIONS		STATE	MENT 3
NAME OF PAYER			7	C:	TOTAL APITAL GA	IN 28	% GAIN
CHARLES SCHWAB					/ 3	0.	
TOTALS TO SCHEDULE I), I	INE 13			3	0.	

SCH	DULE D UNRECAPTURED SECTION 1250 GAIN S	TATEMENT	4
1.	IF YOU HAVE A SECTION 1250 PROPERTY IN PART III OF FORM 4797 FOR WHICH YOU MADE AN ENTRY IN PART I OF FORM 4797, ENTER THE SMALLER OF LINE 22 OR LINE 24 OF FORM 4797 FOR THAT PROPERTY. IF YOU DID NOT HAVE ANY SUCH PROPERTY, GO TO LINE 4		
2.	ENTER THE AMOUNT FROM FORM 4797, LINE 26G, FOR THE PROPERTY FOR WHICH YOU MADE AN ENTRY ON LINE 1		
	SUBTRACT LINE 2 FROM LINE 1		
4.	ENTER THE TOTAL UNRECAPTURED SECTION 1250 GAIN INCLUDED ON LINE 26 OR LINE 37 OF FORM(S) 6252 FROM INSTALLMENT SALES OF TRADE OR BUSINESS PROPERTY HELD MORE THAN 1 YEAR		
5.	ENTER THE TOTAL OF ANY AMOUNTS REPORTED TO YOU ON A SCHEDULE K-1 FROM A PARTNERSHIP OR AN S CORPORATION AS "UNRECAPTURED SECTION 1250 GAIN"		
	ADD LINES 3 THROUGH 5 ENTER THE SMALLER OF LINE 6 OR THE GAIN FROM FORM 4797, LINE 7		
8.	ENTER THE AMOUNT, IF ANY, FROM FORM 4797,		
	SUBTRACT LINE 8 FROM LINE 7. IF ZERO OR LESS, ENTER -0-		
10.	ENTER THE AMOUNT OF ANY GAIN FROM THE SALE OR EXCHANGE OF AN INTEREST IN A PARTNERSHIP ATTRIBUTABLE TO UNRECAPTURED SECTION 1250 GAIN		
11.	ENTER THE TOTAL OF ANY AMOUNTS REPORTED TO YOU ON A SCHEDULE K-1, FORMS 1099-DIV, OR FORM 2439 AS "UNRECAPTURED SECTION 1250 GAIN" FROM AN ESTATE, TRUST, RÉAL ESTATE INVESTMENT TRUST, OR MUTUAL FUND (OR-OTHER REGULATED		
4.0	INVESTMENT COMPANY)	7 6	8.
12.	ENTER THE TOTAL OF ANY UNRECAPTORED SECTION 1250 GAIN FROM SAL (INCLUDING INSTALLMENT SALES) OR OTHER DISPOSITIONS OF SECTION 1250 PROPERTY HELD MORE THAN 1 YEAR FOR WHICH YOU DID NOT MAKE AN ENTRY IN PART I OF FORM 1797 FOR THE YEAR OF SALE		
13.	ADD LINES 9 THROUGH 12		8.
14.	IF YOU HAD ANY SECTION 1202 GAIM OR COLLECTIBLE GAIN OR (LOSS), ENTER THE TOTAL OF LINES 1 THROUGH 4 OF THE 28% RATE GAIN WORKSHEET		
15.	ENTER THE (LOSS), IF ANY, FROM SCH D, LINE 7. IF SCH D, LINE 7, IS VERO OR A GAIN ENTER -0- 0.		
16.	ENTER YOUR LONG-TERM CAPITAL LOSS CARRYOVERS FROM SCHEDULE D, LINE 14, AND SCHEDULE K-1 (FORM 1041),		
17.	BOX 11, CODE C COMBINE LINES 14 THROUGH 16. IF THE RESULT IS A (LOSS), ENTER IT AS A POSITIVE AMOUNT. IF THE RESULT IS ZERO OR A GAIN, ENTER -0-		0.
18.	SUBTRACT LINE 17 FROM LINE 13. IF ZERO OR LESS, ENTER -0 IF MORE THAN ZERO, ENTER THE RESULT HERE AND ON SCHEDULE D,		

10226.01

SCHEDULE SE	NON-FARM INCOME	STATEMENT 5
DESCRIPTION		AMOUNT
FIDUCIARY FEES		4,500.
TOTAL TO SCHEDULE	SE, LINE 2	4,500.
FORM 8995	QUALIFIED REIT DIVIDENDS AND PTP IN	COME STATEMENT 6
NAME OF ENTITY/AC	TIVITY REIT DI	VIDENDS PTP INCOME
CHARLES SCHWAB)) 289.
TOTAL TO FORM 899	5, LINE 6	289.
FORM 1116	U.S. AND FOREIGN SOURCE INCOME SUMMAR FOREIGN DIVIDEND INCOME	RY STATEMENT 7
DESCRIPTION		AMOUNT
CHARLES SCHWAB		33.
TOTAL FOREIGN DIV	IDEND INCOME	33.

Tax Return Carryovers to 2020

	Tax Return Carryovers	10 2020			
NAME: SCOT	T F. & AMY A. MITCHELL	Originating	ID Entity/	Numbe L St/	
Disallowing Form	Description	Originating Form	Entity/ Activity	St/ City	Amount
116AMT	PASSIVE INC C/O FROM 2019	1116 AMT			1
	A TABLET AND CY O ENGLE BOLD	1110			
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912541 04-01-19

Two-Year Comparison Worksheet Name(s) as shown on return Social security number ***_** SCOTT F. & AMY A. MITCHELL 2018 Filing Status MARRIED FILING JOINT 2019 Filing Status MARRIED FILING JOINT 2018 Tax Bracket 24.0% 2019 Tax Bracket 24.0% Tax Year Tax Year Increase Description 2018 2019 (Decrease) -45,308. WAGES, SALARIES, AND TIPS 264,729. 219,421. 1,077. 1,077. SCHEDULE B - TAXABLE INTEREST 0. 7,9,9\9. 7,783. 210. SCHEDULE B - QUALIFIED DIVIDENDS SCHEDULE B - ORDINARY DIVIDENDS 518. 7,993. 7,475. -3,0, SCHEDULE D (CAPITAL GAIN/LOSS) 0. 30. 500\ 3,500. 1,000. OTHER INCOME 021. TOTAL INCOME 268,747. -35,726. 47. 61. 14. DEDUCTIBLE PART OF SE TAX 61. 47. 14. TOTAL ADJUSTMENTS 268,700. 3/2,960. -35,740.ADJUSTED GROSS INCOME 24, Ø Ø Ő 24,400. 400. STANDARD DEDUCTION **DUALIFIED BUSINESS INCOME DEDUCTION** 58. 58. ω. 24,000 24,458. 458. TOTAL DEDUCTIONS 244,700 -36,198. 208,502. TAXABLE INCOME -9,621. 入289. 37,668. TAX 47,,289. TAX BEFORE CREDITS 37,668. -9,621. 5. 5. FORM 1116 (FOREIGN TAX CREDIT) 0. **3**,205. -3,205. 0. FORM 5695 (RESIDENTIAL ENERGY CR.) -6,421. 44,084. 37,663. TAX AFTER NON-REFUNDABLE CREDITS 121. 27. 94. SCHEDULE SE (SELF-EMPLOYMENT TAX) 245. 0. -245. FORM 8959 (ADDITIONAL MEDICARE TAX FORM 8960 (NET INVEST. INCOME TAX) 0. -20. 20. -6,659. 44,443. 37,784. TOTAL TAX 33,599. -9,925. 43,524. FEDERAL INCOME TAX WITHHELD 3,530. -3,530.ESTIMATED TAX PAYMENTS 0. 33,599. -13,455. 47,054. TOTAL PAYMENTS 0. -2,611.2,611. TAX OVERPAID -2,611. 2,611. 0. AMOUNT REFUNDED 14. 14. FORM 2210/2210F (EST. TAX PENALTY) 0. 0. 4,199. 4,199. BALANCE DUE (INCLUDING 2210/2210F)