

CANDIDATE OATH STATE AND LOCAL PARTISAN OFFICE WITH PARTY AFFILIATION

OFFICE USE ONLY

Candidate Oath

(Section 99.021(1)(a), Florida Statutes)

I, Mike Greenwell
(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box (see page 2 - Compound Last Names). No change can be made after the end of qualifying.)

am a candidate for the office of Lee County Commission, 5, 1
(Office) (District #) (Circuit #)

; my legal residence is Lee County County, Florida; I am a qualified elector
(Group or Seat #)

under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

Statement of Party

(Section 99.021(1)(b), Florida Statutes)

I am a member of the Republican Party; I have been a registered member of this political party, for which I am seeking nomination as a candidate, for 365 days before the beginning of qualifying preceding the general election for which I seek to qualify; and I have paid the assessment levied against me, if any, by the executive committee of the above-stated political party.

Candidate's Florida Voter Registration Number (located on your voter information card): 111437985

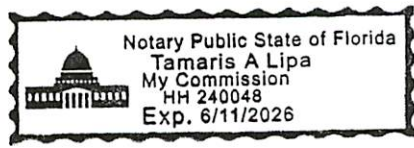
Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form):

X Mike Greenwell 239 707-1118 MGBLBFZ.COM
Signature of Candidate Telephone Number Email Address
16500 State Rd 31 Alva FL 33920
Address City State ZIP Code

STATE OF FLORIDA
COUNTY OF Lee

Tamaris A Lipa
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below:

Sworn to (or affirmed) and subscribed before me by means of
online notarization OR physical presence
this 28 day of JUNE, 2022
Personally Known OR Produced Identification
Type of Identification Produced: FL DL



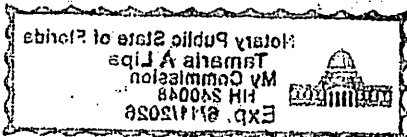
NOTARY PUBLIC STATE OF FLORIDA
NOTARY APPLICATION

Lee County Sheriff's Office
Lee County, Florida

Notary Public State of Florida
My Commission No. 11111111
Exp. 12/31/2025

Notary Public State of Florida
My Commission No. 11111111
Exp. 12/31/2025

Lee County Sheriff's Office
Lee County, Florida
Notary Public State of Florida
My Commission No. 11111111
Exp. 12/31/2025



Lee County Sheriff's Office
Lee County, Florida
Notary Public State of Florida
My Commission No. 11111111
Exp. 12/31/2025

OF FINANCIAL INTERESTS

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:

Greenwell Michael Lewis

MAILING ADDRESS:

18500 State Rd. 31

CITY :

Alva

ZIP :

33920

COUNTY :

Lee

NAME OF AGENCY :

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Lee County Commissioner - District 5

CHECK IF THIS IS A FILING BY A CANDIDATE

2021 JUNE 28 PM 04:44 SEC Lee Co FL

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2021 or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of \$16,380,000.00, 20 22 was \$ 16,380,000.00.

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effects (described above) is \$ 260,000.00

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
Jewelry	\$15,000.00
Vehicles	\$45,000.00
Furnishings	\$200,000.00

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
	0

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
	0

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 2021 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 2021 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2020 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	31 Produce	Big League Builders	Greenwell Investment Properties
ADDRESS OF BUSINESS ENTITY	18672 State Road 31	11260 Palm Beach Blvd.	18500 State Rd. 31
PRINCIPAL BUSINESS ACTIVITY	Farm/Agroturism	General Contractor	Property Rentals
POSITION HELD WITH ENTITY	Manager	Treasurer	President
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes	Yes	Yes
NATURE OF MY OWNERSHIP INTEREST	Farm Director	Treasurer	Investor

PART F - TRAINING

This section applies only to officers required to complete annual ethics training pursuant to section 112.3142, F.S. [See instructions p. 6]

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.


 SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA

COUNTY OF Lee

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 27th day of

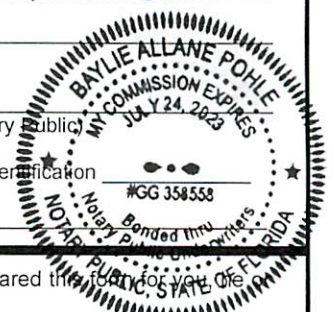
June, 20 22 by Mike Greenwell


 (Signature of Notary Public--State of Florida)

Baylie Pohle
 (Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known X OR Produced Identification

Type of Identification Produced _____



If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared the form, she must complete the following statement:

I, _____, prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

 Signature Date

Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.

IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE



U.S. Individual Income Tax Return

Filing Status [] Single [X] Married filing jointly [] Married filing separately (MFS) [] Head of household (HOH) [] Qualifying widow(er) (QW)

Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent

Personal information section including names (MICHAEL L., TRACY G.), social security numbers, home address (18500 STATE ROAD 31, ALVA), and state/zip code (FL 33920).

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? [] Yes [X] No
Standard Deduction [] Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: [] Were born before January 2, 1957 [] Are blind Spouse: [] Was born before January 2, 1957 [] Is blind

Table for dependents with columns for (1) First name, Last name, (2) Social security number, (3) Relationship to you, and (4) Child tax credit/Credit for other dependents.

Main income and deduction table with rows for wages (26,000), tax-exempt interest (3,533), dividends (21,600), IRA distributions, pensions (75,095), capital gain (976,802), other income (-2,759), total income (1,251,906), adjusted gross income (1,243,614), standard deduction (25,100), and taxable income (1,217,833).

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

STMT 5	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	16	226,277.
	17	Amount from Schedule 2, line 3	17	5,777.
	18	Add lines 16 and 17	18	232,054.
	19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	1,541.
	21	Add lines 19 and 20	21	1,541.
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	230,513.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	40,341.
	24	Add lines 22 and 23. This is your total tax	24	270,854.
	25	Federal income tax withheld from:		
	a	Form(s) W-2 SEE STATEMENT 6	25a	2,447.
	b	Form(s) 1099 SEE STATEMENT 8	25b	7,152.
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	9,599.
	26	2021 estimated tax payments and amount applied from 2020 return STATEMENT 7	26	47,600.
	27a	Earned income credit (EIC) Check here if you were born after January 1, 1998, and before January 2, 2004, and you satisfy all the other requirements for taxpayers who are at least age 18, to claim the EIC. See instr. <input type="checkbox"/>	27a	
	b	Nontaxable combat pay election 27b		
	c	Prior year (2019) earned income 27c		
	28	Refundable child tax credit or additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Recovery rebate credit. See instructions	30	
	31	Amount from Schedule 3, line 15	31	
	32	Add lines 27a and 28 through 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	57,199.
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	
	b	Routing number <input type="text"/>	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
	d	Account number <input type="text"/>		
	36	Amount of line 34 you want applied to your 2022 estimated tax	36	
Amount You Owe	37	Amount you owe . Subtract line 33 from line 24. For details on how to pay, see instructions	37	213,655.
	38	Estimated tax penalty (see instructions)	38	

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes. Complete below.** **No**

Designee's name **JONI L. NORTON** Phone no. **2394335554** Personal identification number (PIN) **33106**

Sign Here

Your signature Date Your occupation **SELF EMPLOYED** If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Spouse's signature. If a joint return, **both** must sign. Date Spouse's occupation **SELF EMPLOYED** If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. Email address

Paid Preparer Use Only

Preparer's name **JONI L. NORTON** Preparer's signature Date PTIN **P00109340** Check it: Self-employed

Firm's name **MARKHAM NORTON MOSTELLER WRIGHT & CO** Phone no. **2394335554**

8961 CONFERENCE DRIVE, SUITE 1

Firm's address **FORT MYERS, FL 33919** Firm's EIN

SCHEDULE 1
(Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment
Sequence No. **01**

Department of the Treasury
Internal Revenue Service

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

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

MICHAEL L. & TRACY G. GREENWELL

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions) ▶ _____		
3	Business income or (loss). Attach Schedule C	3	1,207.
4	Other gains or (losses). Attach Form 4797	4	-11,780.
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	-9,271.
6	Farm income or (loss). Attach Schedule F	6	17,085.
7	Unemployment compensation	7	
8	Other income:		
a	Net operating loss	8a	()
b	Gambling income	8b	
c	Cancellation of debt	8c	
d	Foreign earned income exclusion from Form 2555	8d	()
e	Taxable Health Savings Account distribution	8e	
f	Alaska Permanent Fund dividends	8f	
g	Jury duty pay	8g	
h	Prizes and awards	8h	
i	Activity not engaged in for profit income	8i	
j	Stock options	8j	
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k	
l	Olympic and Paralympic medals and USOC prize money (see instructions)	8l	
m	Section 951(a) inclusion (see instructions)	8m	
n	Section 951A(a) inclusion (see instructions)	8n	
o	Section 461(l) excess business loss adjustment	8o	
p	Taxable distributions from an ABLA account (see instructions)	8p	
z	Other income. List type and amount ▶ _____		
	_____	8z	
9	Total other income. Add lines 8a through 8z	9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10	-2,759.

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

Schedule 1 (Form 1040) 2021

Part II Adjustments to Income

11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	7,000.
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	1,292.
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
	b Recipient's SSN			
	c Date of original divorce or separation agreement (see instructions)			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
	a Jury duty pay (see instructions)	24a		
	b Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
	c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8l	24c		
	d Reforestation amortization and expenses	24d		
	e Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
	f Contributions to section 501(c)(18)(D) pension plans	24f		
	g Contributions by certain chaplains to section 403(b) plans	24g		
	h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
	i Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
	j Housing deduction from Form 2555	24j		
	k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
	z Other adjustments. List type and amount	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a		26	8,292.

SCHEDULE 2
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Taxes

▶ Attach to Form 1040, 1040-SR, or 1040-NR.
▶ Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2021
Attachment
Sequence No. **02**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

MICHAEL L. & TRACY G. GREENWELL

Your social security number

Part I Tax

1	Alternative minimum tax. Attach Form 6251	1	5,777.
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	3	5,777.

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE	4	2,584.
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	5	
6	Uncollected social security and Medicare tax on wages. Attach Form 8919	6	
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required	8	
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	
12	Net investment income tax. Attach Form 8960	12	37,757.
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	

(continued on page 2)

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

Schedule 2 (Form 1040) 2021

Part II Other Taxes *(continued)*

17	Other additional taxes:		
a	Recapture of other credits. List type, form number, and amount ▶ _____	17a	
b	Recapture of federal mortgage subsidy. If you sold your home in 2021, see instructions	17b	
c	Additional tax on HSA distributions. Attach Form 8889	17c	
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d	
e	Additional tax on Archer MSA distributions. Attach Form 8853	17e	
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f	
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g	
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h	
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i	
j	Section 72(m)(5) excess benefits tax	17j	
k	Golden parachute payments	17k	
l	Tax on accumulation distribution of trusts	17l	
m	Excise tax on insider stock compensation from an expatriated corporation	17m	
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n	
o	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17o	
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p	
q	Any interest from Form 8621, line 24	17q	
z	Any other taxes. List type and amount ▶ _____	17z	
18	Total additional taxes. Add lines 17a through 17z		18
19	Additional tax from Schedule 8812		19
20	Section 965 net tax liability installment from Form 965-A	20	
21	Add lines 4, 7 through 16, 18, and 19. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21
			40,341.

SCHEDULE 3
(Form 1040)

Additional Credits and Payments

OMB No. 1545-0074

2021

Attachment
Sequence No. **03**

Department of the Treasury
Internal Revenue Service

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

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

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

MICHAEL L. & TRACY G. GREENWELL

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	1,541.
2	Credit for child and dependent care expenses from Form 2441, line 11. 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	5	
6	Other nonrefundable credits:		
a	General business credit. Attach Form 3800	6a	
b	Credit for prior year minimum tax. Attach Form 8801	6b	
c	Adoption credit. Attach Form 8839	6c	
d	Credit for the elderly or disabled. Attach Schedule R	6d	
e	Alternative motor vehicle credit. Attach Form 8910	6e	
f	Qualified plug-in motor vehicle credit. Attach Form 8936	6f	
g	Mortgage interest credit. Attach Form 8396	6g	
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h	
i	Qualified electric vehicle credit. Attach Form 8834	6i	
j	Alternative fuel vehicle refueling property credit. Attach Form 8911	6j	
k	Credit to holders of tax credit bonds. Attach Form 8912	6k	
l	Amount on Form 8978, line 14. See instructions	6l	
z	Other nonrefundable credits. List type and amount ▶	6z	
7	Total other nonrefundable credits. Add lines 6a through 6z	7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20	8	1,541.

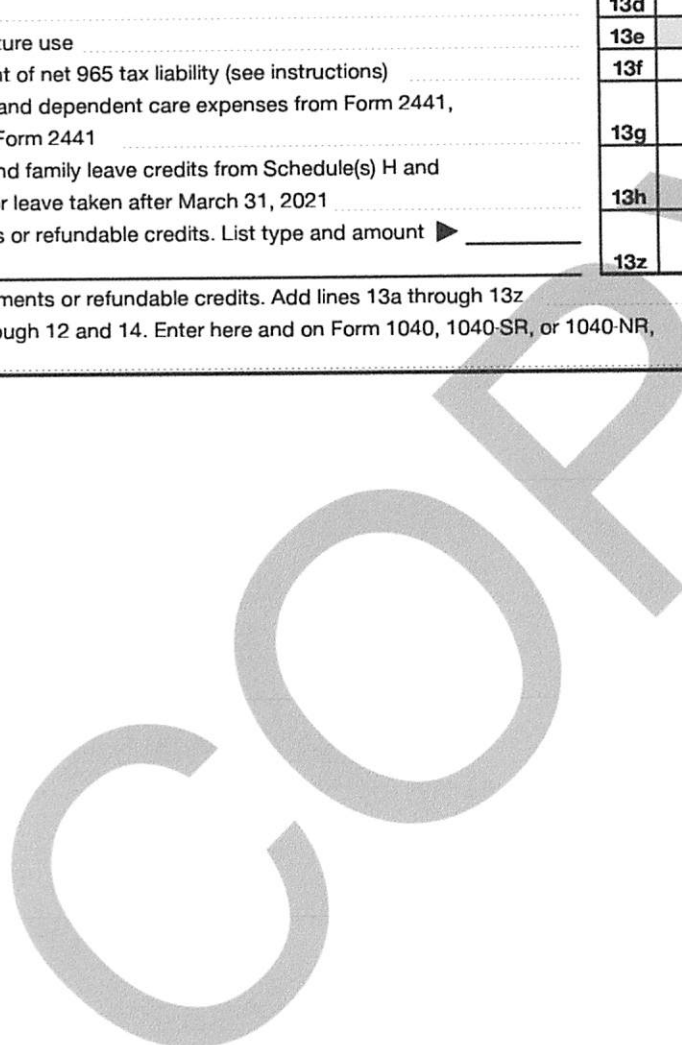
(continued on page 2)

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

Schedule 3 (Form 1040) 2021

Part II Other Payments and Refundable Credits

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	Other payments or refundable credits:		
a	Form 2439	13a	
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021	13b	
c	Health coverage tax credit from Form 8885	13c	
d	Credit for repayment of amounts included in income from earlier years	13d	
e	Reserved for future use	13e	
f	Deferred amount of net 965 tax liability (see instructions)	13f	
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441	13g	
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021	13h	
z	Other payments or refundable credits. List type and amount ▶	13z	
14	Total other payments or refundable credits. Add lines 13a through 13z		14
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 31		15



Recovery Rebate Credit Worksheet - Line 30

Name(s) shown on return

MICHAEL L. & TRACY G. GREENWELL

Your SSN

██████████

Before you begin: See the instructions for line 30 to find out if you can take this credit and for definitions and other information needed to fill out this worksheet.
 If you received Notice 1444-C, have it available.
 Don't include on line 13 any amount you received but later returned to the IRS.
 If you can't take the recovery rebate credit, you don't have to repay any amount of EIP 3 on Form 1040 or 1040-SR.

1. Can you be claimed as a dependent on another person's 2021 return? If filing a joint return, go to line 2.
 No. Go to line 2.
 Yes. Stop. You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on line 30.

2. Does your 2021 return include a social security number that was issued on or before the due date of your 2021 return (including extensions) for you and, if filing a joint return, your spouse?
 Yes. Go to line 6.
 No. If you are filing a joint return, go to line 3. If you aren't filing a joint return, go to line 5.

3. Was at least one of you a member of the U.S. Armed Forces at any time during 2021, and does at least one of you have a social security number that was issued on or before the due date of your 2021 return (including extensions)?
 Yes. Your credit is not limited. Go to line 6.
 No. Go to line 4.

4. Does one of you have a social security number that was issued on or before the due date of your 2021 return (including extensions)?
 Yes. Your credit is limited. Go to line 6.
 No. Go to line 5.

5. Do you have any dependents listed in the Dependents section on page 1 of Form 1040 or 1040-SR for whom you entered a social security number that was issued on or before the due date of your 2021 return (including extensions) or an adoption taxpayer identification number?
 Yes. Enter zero on line 6 and go to line 7.
 No. STOP You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on line 30.

6. Enter:
 • \$1,400 if single, head of household, married filing separately or qualifying widow(er),
 • \$1,400 if married filing jointly and you answered "Yes" to question 4, or
 • \$2,800 if married filing jointly and you answered "Yes" to question 2 or 3

6. 2,800.

7. Multiply \$1,400 by the number of dependents listed in the Dependents section on page 1 of Form 1040 or 1040-SR for whom you entered a social security number that was issued on or before the due date of your 2021 return (including extensions) or an adoption taxpayer identification number

7. _____

8. Add lines 6 and 7

8. 2,800.

9. Is the amount on line 11 of Form 1040 or 1040-SR more than the amount shown below for your filing status?
 • Single or Married filing separately - \$75,000
 • Married filing jointly or qualifying widow(er) - \$150,000
 • Head of household - \$112,500
 Yes. Enter the amount from line 11 of Form 1040 or 1040-SR and go to line 10
 No. Enter the amount from line 8 on line 12 and skip lines 10 and 11.

9. 1,243,614.

10. Is line 9 more than the amount shown below for your filing status?
 • Single or married filing separately - \$80,000
 • Married filing jointly or qualifying widow(er) - \$160,000
 • Head of household - \$120,000
 Yes. STOP You can't take the credit. Don't complete the rest of this worksheet and don't enter any amount on line 30.
 No. Subtract line 9 from the amount shown above for your filing status

10. _____

11. Divide line 10 by the amount shown below for your filing status. Enter the result as a decimal (rounded to at least 2 places).
 • Single or married filing separately - \$5,000
 • Married filing jointly or qualifying widow(er) - \$10,000
 • Head of household - \$7,500

11. _____

12. Multiply line 8 by line 11

12. _____

13. Enter the amount, if any, of EIP 3 that was issued to you. If filing a joint return, include the amount, if any, of your spouse's EIP 3. You may refer to Notice 1444-C or your tax account information at [IRS.gov/Account](https://www.irs.gov/Account) for the amount to enter here

13. _____

14. **Recovery rebate credit.** Subtract line 13 from line 12. If zero or less, enter -0-. If line 13 is more than line 12, you don't have to pay back the difference. Enter the result here and, if more than zero, on line 30 of Form 1040 or 1040-SR

14. _____

SCHEDULE B

(Form 1040)

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

Interest and Ordinary Dividends

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

Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

2021

Attachment Sequence No. 08

Your social security number

MICHAEL L. & TRACY G. GREENWELL

Part I

Interest

1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address SEE STATEMENT 9

Amount

153,974.

1

SUBTOTAL FOR LINE 1

153,974.

TAX-EXEMPT INTEREST

SEE STATEMENT 10

-3,533.

ABP ADJUSTMENT

SEE STATEMENT 11

-29.

2 Add the amounts on line 1

2

150,412.

3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815

3

4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b

4

150,412.

Note: If line 4 is over \$1,500, you must complete Part III.

Amount

Part II

Ordinary Dividends

5 List name of payer MORGAN STANLEY MORGAN STANLEY MORGAN STANLEY MORGAN STANLEY MORGAN STANLEY MORGAN STANLEY MORGAN STANLEY MORGAN STANLEY BLACKSTONE PRIVATE CREDIT

5

14. 9,223. 7,689. 5,034. 2,472. 101. 160. 193. 1,470.

Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b

6

26,356.

Note: If line 6 is over \$1,500, you must complete Part III.

Part III

Foreign Accounts and Trusts

Caution: If required, failure to file FinCEN Form 114 may result in substantial penalties. See instructions. 127501 11-04-21

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

Yes No

7a At any time during 2021, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions. If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements

X

b If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located

8 During 2021, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions

X

Interest and Dividend Summary

Name: MICHAEL L. & TRACY G. GREENWELL

FEIN/SSN:

	Payer	Interest	Interest on U.S. Savings Bonds	Tax-Exempt Interest	Private Activity Interest	Market Discount	Original Issue Discount (OID)	Ordinary Dividends	Qualified Dividends
A	KINSTIN	150,000.							
B	MORGAN STANLEY-OID						115.		
C	MORGAN STANLEY	157.							
D	MORGAN STANLEY-TAX EXEMPT			600.					
E	MORGAN STANLEY	1.							
F	MORGAN STANLEY	1.							
G	MORGAN STANLEY	121.							
H	MORGAN STANLEY-TAX EXEMPT			2,875.					
I	MORGAN STANLEY-TAX EXEMPT OID			58.					
J	MORGAN STANLEY-<\$1								
K	MORGAN STANLEY-<\$1								
Totals		150,326.		3,533.			115.	26,356.	21,600.

	Capital Gain Distributions	Unrecaptured Section 1250 Gain	Section 1202 Gain	Collectibles	Section 199A Dividends	Investment Expenses	Federal Tax Withheld	State Tax Withheld	Foreign Tax Paid
A									
B									
C									
D									
E									
F									
G									
H									
I									
J									
K									
Totals	1,326.	6.			1,631.	15.1			998.

Interest and Dividend Summary

Name: MICHAEL L. & TRACY G. GREENWELL

FEIN/SSN:

Payer	Interest	Interest on U.S. Savings Bonds	Tax-Exempt Interest	Private Activity Interest	Market Discount	Original Issue Discount (OID)	Ordinary Dividends	Qualified Dividends
A MORGAN STANLEY							14.	
B MORGAN STANLEY							9,223.	8,748.
C MORGAN STANLEY							7,689.	7,604.
D MORGAN STANLEY							5,034.	3,612.
E MORGAN STANLEY							2,472.	1,349.
F MORGAN STANLEY							101.	101.
G MORGAN STANLEY	1.							
H MORGAN STANLEY							160.	160.
I MORGAN STANLEY	2.							
J MORGAN STANLEY							193.	26.
K BLACKSTONE PRIVATE CREDIT							1,470.	
Totals								

	Capital Gain Distributions	Unrecaptured Section 1250 Gain	Section 1202 Gain	Collectibles	Section 199A Dividends	Investment Expenses	Federal Tax Withheld	State Tax Withheld	Foreign Tax Paid
A									
B					205.				478.
C	123.	6.			85.				155.
D	1,151.				1,331.				322.
E	52.				10.				43.
F									
G									
H									
I									
J									
K									
Totals						15.2			

Interest and Dividend Summary

Name: MICHAEL L. & TRACY G. GREENWELL

FEIN/SSN:

Payer	Interest	Interest on U.S. Savings Bonds	Tax-Exempt Interest	Private Activity Interest	Market Discount	Original Issue Discount (OID)	Ordinary Dividends	Qualified Dividends
A FROM K-1 - BIG LEAGUE BUILDERS, INC	43.							
B								
C								
D								
E								
F								
G								
H								
I								
J								
K								
Totals								

	Capital Gain Distributions	Unrecaptured Section 1250 Gain	Section 1202 Gain	Collectibles	Section 199A Dividends	Investment Expenses	Federal Tax Withheld	State Tax Withheld	Foreign Tax Paid
A									
B									
C									
D									
E									
F									
G									
H									
I									
J									
K									
Totals									

**SCHEDULE C
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

**Profit or Loss From Business
(Sole Proprietorship)**

▶ Go to www.irs.gov/ScheduleC for instructions and the latest information.
▶ Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.

OMB No. 1545-0074

2021

Attachment
Sequence No. **09**

Name of proprietor

TRACY G. GREENWELL

Social security number (SSN)

B Enter code from instructions
▶ **454390**

A Principal business or profession, including product or service (see instructions)

RETAILS SALES

D Employer ID number (EIN) (see instr.)

C Business name. If no separate business name, leave blank.

YOUNG LIVING ESSENTIAL OILS

E Business address (including suite or room no.) ▶

City, town or post office, state, and ZIP code

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) ▶

G Did you "materially participate" in the operation of this business during 2021? If "No," see instructions for limit on losses Yes No

H If you started or acquired this business during 2021, check here

I Did you make any payments in 2021 that would require you to file Form(s) 1099? See instructions Yes No

J If "Yes," did you or will you file required Form(s) 1099? Yes No

Part I Income

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	1,507.
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	1,507.
4	Cost of goods sold (from line 42)	4	300.
5	Gross profit. Subtract line 4 from line 3	5	1,207.
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7	Gross income. Add lines 5 and 6	7	1,207.

Part II Expenses. Enter expenses for business use of your home only on line 30.

8	Advertising	8		18	Office expense	18	
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		20a	Vehicles, machinery, and equipment	20a	
12	Depletion	12		20b	Other business property	20b	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	
16	Interest (see instructions):			24	Travel and meals:		
16a	Mortgage (paid to banks, etc.)	16a		24a	Travel	24a	
16b	Other	16b		24b	Deductible meals (see instructions)	24b	
17	Legal and professional services	17		25	Utilities	25	
				26	Wages (less employment credits)	26	
				27a	Other expenses (from line 48)	27a	
				27b	Reserved for future use	27b	

28 Total expenses before expenses for business use of home. Add lines 8 through 27a ▶ 28 0.

29 Tentative profit or (loss). Subtract line 28 from line 7 29 1,207.

30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions.
Simplified method filers only: Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____
Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30

31 Net profit or (loss). Subtract line 30 from line 29.

● If a profit, enter on both **Schedule 1 (Form 1040), line 3**, and on **Schedule SE, line 2**. (If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3**.

● If a loss, you must go to line 32.

31 1,207.

32 If you have a loss, check the box that describes your investment in this activity. See instructions.
● If you checked 32a, enter the loss on both **Schedule 1 (Form 1040), line 3**, and on **Schedule SE, line 2**. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on **Form 1041, line 3**.

● If you checked 32b, you must attach **Form 6198**. Your loss may be limited.

32a All investment is at risk.
32b Some investment is not at risk.

SCHEDULE D
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Capital Gains and Losses

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

▶ Go to www.irs.gov/ScheduleD for instructions and the latest information.
▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

OMB No. 1545-0074

2021

Attachment
Sequence No. **12**

Name(s) shown on return

Your social security number

MICHAEL L. & TRACY G. GREENWELL

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked	349,171.	366,714.	41.	<17,502.>
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6 ()
7 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				7 <17,502.>

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked	344,650.	217,554.		127,096.
9 Totals for all transactions reported on Form(s) 8949 with Box E checked	62,618.	53,236.		9,382.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	150,000.			150,000.
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 SEE STATEMENT 12				11 706,500.
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13 Capital gain distributions SEE STATEMENT 13				13 1,326.
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 ()
15 Net long-term capital gain or (loss) . Combine lines 8a through 14 in column (h). Then, go to Part III on page 2				15 994,304.

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

Schedule D (Form 1040) 2021

Part III Summary

<p>16 Combine lines 7 and 15 and enter the result</p> <ul style="list-style-type: none"> • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 	16	976,802.
<p>17 Are lines 15 and 16 both gains?</p> <p><input checked="" type="checkbox"/> Yes. Go to line 18.</p> <p><input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.</p>		
<p>18 If you are required to complete the 28% Rate Gain Worksheet(see instructions), enter the amount, if any, from line 7 of that worksheet</p>	18	
<p>19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet SEE STATEMENT 14</p>	19	
<p>20 Are lines 18 and 19 both zero or blank and are you not filing Form 4952?</p> <p><input checked="" type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16. Don't complete lines 21 and 22 below.</p> <p><input type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.</p>		
<p>21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of:</p> <ul style="list-style-type: none"> • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) } } <p>Note: When figuring which amount is smaller, treat both amounts as positive numbers.</p>	21	()
<p>22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?</p> <p><input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Forms 1040 and 1040-SR, line 16.</p> <p><input type="checkbox"/> No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.</p>		

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

MICHAEL L. & TRACY G. GREENWELL

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- [X] (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
[E] Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
[F] Long-term transactions not reported to you on Form 1099-B

Table with 8 columns: (a) Description of property, (b) Date acquired, (c) Date sold or disposed of, (d) Proceeds (sales price), (e) Cost or other basis, (f) Code(s), (g) Amount of adjustment, (h) Gain or (loss). Includes entries for MORGAN STANLEY COVERED with values like 133,448 and 70,529.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked)

344,650. 217,554. 127,096.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

MICHAEL L. & TRACY G. GREENWELL

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
(F) Long-term transactions not reported to you on Form 1099-B

Table with 8 columns: (a) Description of property, (b) Date acquired, (c) Date sold or disposed of, (d) Proceeds (sales price), (e) Cost or other basis, (f) Adjustment code(s), (g) Amount of adjustment, (h) Gain or (loss). Rows include MS FLOAT RT CPI, AMC NETWORKS, GIVAUDAN, L3 HARRIS, UNITEDHEALTH, HONEYWELL, MERCK, ORGANON, WEYERHAEUSER, LEE CO WTR, and a Totals row.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

MICHAEL L. & TRACY G. GREENWELL

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
						(f) Code(s)	(g) Amount of adjustment	
	BABCOCK PROPERTY-KINSTIN		09/22/21	150,000.	0.			150,000.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶								
				150,000.				150,000.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Qualified Dividends and Capital Gain Tax Worksheet - Line 16

Keep for Your Records

Name(s) shown on return MICHAEL L. & TRACY G. GREENWELL	Your SSN [REDACTED]
---	------------------------

Before you begin: ✓ See the earlier instructions for line 16 to see if you can use this worksheet to figure your tax.
 ✓ Before completing this worksheet, complete Form 1040 or 1040-SR through line 15.
 ✓ If you don't have to file Schedule D and you received capital gain distributions, be sure you checked the box on Form 1040 or 1040-SR, line 7.

1. Enter the amount from Form 1040 or 1040-SR, line 15. However, if you are filing Form 2555 (relating to foreign earned income), enter the amount from line 3 of the Foreign Earned Income Tax Worksheet	1. <u>1,217,833.</u>	
2. Enter the amount from Form 1040 or 1040-SR, line 3a*	2. <u>21,600.</u>	
3. Are you filing Schedule D?*		
<input checked="" type="checkbox"/> Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or 16 is blank or a loss, enter -0-.	3. <u>976,802.</u>	
<input type="checkbox"/> No. Enter the amount from Form 1040 or 1040-SR, line 7.		
4. Add lines 2 and 3	4. <u>998,402.</u>	
5. Subtract line 4 from line 1. If zero or less, enter -0-	5. <u>219,431.</u>	
6. Enter: \$ 40,400 if single or married filing separately, \$ 80,800 if married filing jointly or qualifying widow(er), \$ 54,100 if head of household.	6. <u>80,800.</u>	
7. Enter the smaller of line 1 or line 6	7. <u>80,800.</u>	
8. Enter the smaller of line 5 or line 7	8. <u>80,800.</u>	
9. Subtract line 8 from line 7. This amount is taxed at 0%	9. <u>0.</u>	
10. Enter the smaller of line 1 or line 4	10. <u>998,402.</u>	
11. Enter the amount from line 9	11. <u>0.</u>	
12. Subtract line 11 from line 10	12. <u>998,402.</u>	
13. Enter: \$ 445,850 if single, \$ 250,800 if married filing separately, \$ 501,600 if married filing jointly or qualifying widow(er), \$ 473,750 if head of household.	13. <u>501,600.</u>	
14. Enter the smaller of line 1 or line 13	14. <u>501,600.</u>	
15. Add lines 5 and 9	15. <u>219,431.</u>	
16. Subtract line 15 from line 14. If zero or less, enter -0-	16. <u>282,169.</u>	
17. Enter the smaller of line 12 or line 16	17. <u>282,169.</u>	
18. Multiply line 17 by 15% (0.15)	18. <u>42,325.</u>	
19. Add lines 9 and 17	19. <u>282,169.</u>	
20. Subtract line 19 from line 10	20. <u>716,233.</u>	
21. Multiply line 20 by 20% (0.20)	21. <u>143,247.</u>	
22. Figure the tax on the amount on line 5. If the amount on line 5 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 5 is \$100,000 or more, use the Tax Computation Worksheet	22. <u>40,705.</u>	
23. Add lines 18, 21, and 22	23. <u>226,277.</u>	
24. 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	24. <u>387,121.</u>	
25. Tax on all taxable income. Enter the smaller of line 23 or 24. Also include this amount on the entry space on Form 1040 or 1040-SR, line 16. If you are filing Form 2555, don't enter this amount on the entry space on Form 1040 or 1040-SR, line 16. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet	25. <u>226,277.</u>	

* If you are filing Form 2555, see the footnote in the Foreign Earned Income Tax Worksheet before completing this line.

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

MICHAEL L. & TRACY G. GREENWELL

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations - Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you must check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (f) on line 28 and attach Form 6198. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section Yes No

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
A	BIG LEAGUE BUILDERS, INC	S			X	
B						
C						
D						

Passive Income and Loss		Nonpassive Income and Loss		
(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss allowed (see Schedule K-1)	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A		9,271.		
B				
C				
D				
29a Totals		9,271.		
b Totals		9,271.		
30 Add columns (h) and (k) of line 29a				30
31 Add columns (g), (i), and (j) of line 29b				31 (9,271.)
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31				32 -9,271.

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A		
B		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A			
B			
34a Totals			
b Totals			
35 Add columns (d) and (f) of line 34a			35
36 Add columns (c) and (e) of line 34b			36 ()
37 Total estate and trust income or (loss). Combine lines 35 and 36			37

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5	41	-9,271.
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AD; and Schedule K-1 (Form 1041), box 14, code F. See instructions.	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2021

SCHEDULE E

Name MICHAEL L. GREENWELL

SSN/EIN [REDACTED]

Passthrough BIG LEAGUE BUILDERS, INC ID
S CORPORATION

TAXPAYER

NONPASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
SCHEDULE E, PAGE 2								
Ordinary business income (loss)	-9,271.							
Rental real estate income (loss)								
Other net rental income (loss)								
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments								
Section 179 and carryover								
Disallowed section 179 expense								
Excess farm loss								
Net income (loss)	-9,271.							-9,271.
First passive other								
Second passive other								
Cost depletion								
Percentage depletion								
Depletion carryover								
Disallowed due to 65% limitation								
Unreimbursed expenses (nonpassive)								
Nonpassive other								
Total Schedule E (page 2)	-9,271.							-9,271.
FORM 4797								
Section 1231 gain (loss)								
Section 179 recapture on disposition								
SCHEDULE D								
Net short-term cap. gain (loss)								
Net long-term cap. gain (loss)								
Section 1256 contracts & straddles ...								
FORM 4952								
Investment interest expense - Sch. A								
Other net investment income								
ITEMIZED DEDUCTIONS								
Charitable contributions								
Deductions related to portfolio income								
Other								

INCOME FROM PASSTHROUGH STATEMENT, PAGE 2

2021

SCHEDULE E

Name MICHAEL L. GREENWELL

SSN/EIN [REDACTED]

Passthrough BIG LEAGUE BUILDERS, INC ID
S CORPORATION

TAXPAYER

NONPASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
INTEREST AND DIVIDENDS								
Interest income	43.							43.
Interest from U.S. bonds								
Ordinary dividends								
Qualified dividends								
Tax-exempt interest income								
FORM 6251								
Depreciation adjustment after 12/31/86								
Adjusted gain or loss								
Beneficiary's AMT adjustment								
Depletion (other than oil)								
Other								
MISCELLANEOUS								
Self-employment earnings (loss)/Wages								
Gross farming & fishing inc								
Royalties								
Royalty expenses/depletion								
Undistributed capital gains credit								
Backup withholding								
Credit for estimated tax								
Cancellation of debt								
Medical insurance - 1040								
Dependent care benefits								
Retirement plans								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL								
Other taxes/recapture of credits								
Credits								
Casualty and theft loss								
FORM 8995								
Qualified business income	-9,271.							-9,271.
Qualified service income								
Section 199A W-2 wages	26,703.							26,703.
Section 199A unadjusted basis	40,544.							40,544.

SCHEDULE F

(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Farming

▶ Attach to Form 1040, Form 1040-SR, Form 1040-NR, Form 1041, or Form 1065.

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

OMB No. 1545-0074

2021
Attachment
Sequence No. **14**

Name of proprietor **31 PRODUCE, LLC** Social security number (SSN) XXXXXXXXXX

A Principal crop or activity **PRODUCE** B Enter code from Part IV **111210** C Accounting method: Cash Accrual D Employer ID number (EIN)

E Did you "materially participate" in the operation of this business during 2021? If "No," see instructions for limit on passive losses Yes No

F Did you make any payments in 2021 that would require you to file Form(s) 1099? see instructions Yes No

G If "Yes," did you or will you file required Form(s) 1099? Yes No

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

1a	Sales of purchased livestock and other resale items (see instructions)	1a	953,499.	
b	Cost or other basis of purchased livestock or other items reported on line 1a	1b		
c	Subtract line 1b from line 1a	1c	953,499.	
2	Sales of livestock, produce, grains, and other products you raised	2		
3a	Cooperative distributions (Form(s) 1099-PATR)	3a		3b Taxable amount
4a	Agricultural program payments (see instructions)	4a		4b Taxable amount
5a	Commodity Credit Corporation (CCC) loans reported under election	5a		
b	CCC loans forfeited	5b		5c Taxable amount
6	Crop insurance proceeds and federal crop disaster payments (see instructions):			
a	Amount received in 2021	6a		6b Taxable amount
c	If election to defer to 2022 is attached, check here <input type="checkbox"/>	6c		6d Amount deferred from 2020
7	Custom hire (machine work) income	7		
8	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) STMT 17	8	360.	
9	Gross income. Add amounts in the right column (lines 1c, 2, 3b, 4b, 5a, 5c, 6b, 6d, 7, and 8). If you use the accrual method, enter the amount from Part III, line 50	9	953,859.	

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

10	Car and truck expenses (see instructions). Also attach Form 4562	10		23	Pension and profit-sharing plans	23	
11	Chemicals	11		24	Rent or lease (see instructions):		
12	Conservation expenses (see instructions)	12		a	Vehicles, machinery, equipment	24a	
13	Custom hire (machine work)	13		b	Other (land, animals, etc.)	24b	
14	Depreciation and section 179 expense (see instructions)	14	18,172.	25	Repairs and maintenance	25	21,934.
15	Employee benefit programs other than on line 23	15		26	Seeds and plants	26	54,202.
16	Feed	16		27	Storage and warehousing	27	
17	Fertilizers and lime	17		28	Supplies	28	11,835.
18	Freight and trucking	18		29	Taxes	29	28,013.
19	Gasoline, fuel, and oil	19	12,884.	30	Utilities	30	16,345.
20	Insurance (other than health)	20	6,572.	31	Veterinary, breeding, and medicine	31	
21	Interest (see instructions):			32	Other expenses (specify):		
a	Mortgage (paid to banks, etc.)	21a		a	SEE STATEMENT 15	32a	524,198.
b	Other	21b		b		32b	
22	Labor hired (less employment credits)	22	268,688.	c		32c	
				d		32d	
				e		32e	
				f		32f	
33	Total expenses. Add lines 10 through 32f. If line 32f is negative, see instructions	33	962,843.				
34	Net farm profit or (loss). Subtract line 33 from line 9 If a profit, stop here and see instructions for where to report. If a loss, complete line 36.	34	-8,984.				

35 Reserved for future use.
36 Check the box that describes your investment in this activity and see instructions for where to report your loss:
a All investment is at risk. b Some investment is not at risk.

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Schedule F (Form 1040) 2021

SCHEDULE F

(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Farming

▶ Attach to Form 1040, Form 1040-SR, Form 1040-NR, Form 1041, or Form 1065.

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

OMB No. 1545-0074

2021

Attachment
Sequence No. **14**

Name of proprietor

MIKE GREENWELL

Social security number (SSN)

A Principal crop or activity
COWS

B Enter code from Part IV
▶ **112111**

C Accounting method:
 Cash Accrual

D Employer ID number (EIN)

E Did you "materially participate" in the operation of this business during 2021? If "No," see instructions for limit on passive losses Yes No

F Did you make any payments in 2021 that would require you to file Form(s) 1099? see instructions Yes No

G If "Yes," did you or will you file required Form(s) 1099? Yes No

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

1a Sales of purchased livestock and other resale items (see instructions)	1a	76,755.	
b Cost or other basis of purchased livestock or other items reported on line 1a	1b		
c Subtract line 1b from line 1a		SEE STATEMENT 18	1c 76,755.
2 Sales of livestock, produce, grains, and other products you raised			2
3a Cooperative distributions (Form(s) 1099-PATR)	3a		3b Taxable amount 3b
4a Agricultural program payments (see instructions)	4a	3,228.	4b Taxable amount 4b 3,228.
5a Commodity Credit Corporation (CCC) loans reported under election			5a
b CCC loans forfeited	5b		5c Taxable amount 5c
6 Crop insurance proceeds and federal crop disaster payments (see instructions):			
a Amount received in 2021	6a		6b Taxable amount 6b
c If election to defer to 2022 is attached, check here <input type="checkbox"/>		▶	6d Amount deferred from 2020 6d
7 Custom hire (machine work) income			7
8 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)			8
9 Gross income. Add amounts in the right column (lines 1c, 2, 3b, 4b, 5a, 5c, 6b, 6d, 7, and 8). If you use the accrual method, enter the amount from Part III, line 50			g 79,983.

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

10 Car and truck expenses (see instructions). Also attach Form 4562	10		23 Pension and profit-sharing plans	23
11 Chemicals	11		24 Rent or lease (see instructions):	
12 Conservation expenses (see instructions)	12		a Vehicles, machinery, equipment	24a
13 Custom hire (machine work)	13		b Other (land, animals, etc.)	24b
14 Depreciation and section 179 expense (see instructions)	14	1,216.	25 Repairs and maintenance	25 782.
15 Employee benefit programs other than on line 23	15		26 Seeds and plants	26
16 Feed	16	5,864.	27 Storage and warehousing	27
17 Fertilizers and lime	17		28 Supplies	28 426.
18 Freight and trucking	18		29 Taxes	29
19 Gasoline, fuel, and oil	19		30 Utilities	30
20 Insurance (other than health)	20		31 Veterinary, breeding, and medicine	31
21 Interest (see instructions):			32 Other expenses (specify):	
a Mortgage (paid to banks, etc.)	21a		a SHARED REVENUE	32a
b Other	21b		b ARRANGEMENT	32b 45,626.
22 Labor hired (less employment credits)	22		c	32c
33 Total expenses. Add lines 10 through 32f. If line 32f is negative, see instructions			d	32d
34 Net farm profit or (loss). Subtract line 33 from line 9 If a profit, stop here and see instructions for where to report. If a loss, complete line 36.			e	32e
35 Reserved for future use.			f	32f
36 Check the box that describes your investment in this activity and see instructions for where to report your loss:				
a <input type="checkbox"/> All investment is at risk.	b <input type="checkbox"/> Some investment is not at risk.			
				33 53,914.
				34 26,069.

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Schedule F (Form 1040) 2021

2021 DEPRECIATION AND AMORTIZATION REPORT

MIKE GREENWELL

SCHEDULE F- 1

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	(D) CATTLE	02/11/13	150DB	5.00	HY	17	13,513.				13,513.	13,513.		0.	13,513.
	(D) LAND IMPROVEMENTS-ROAD	01/04/13	150DB	15.00	HY	17	17,600.				17,600.	9,805.		520.	10,325.
	(D) FENCE POST	02/09/13	150DB	15.00	HY	17	5,457.				5,457.	3,040.		161.	3,201.
	(D) TRUSSES FOR BARN	03/06/13	SL	39.00	MM	17	10,602.				10,602.	2,119.		193.	2,312.
	(D) PIPE	03/06/13	150DB	15.00	HY	17	4,500.				4,500.	2,508.		133.	2,641.
	(D) BULL	07/01/17	150DB	5.00	HY	17	2,500.				2,500.	1,875.		209.	2,084.
	TOTAL SCH F DEPRECIATION						54,172.				54,172.	32,860.		1,216.	34,076.

**SCHEDULE SE
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Self-Employment Tax

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

OMB No. 1545-0074

2021

Attachment
Sequence No. **17**

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

MICHAEL L. GREENWELL

Social security number of person
with self-employment income ▶

Part I Self-Employment Tax

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

A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I

Skip lines 1a and 1b if you use the farm optional method in Part II. See instructions. **SEE STATEMENT 19**

1a Net farm profit or (loss) from Sch. F, line 34, and farm partnerships, Sch. K-1 (Form 1065), box 14, code A 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	1a	17,085.
2 Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order	2	
3 Combine lines 1a, 1b, and 2	3	17,085.
4a If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3 Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions	4a	15,778.
4b If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
4c Combine lines 4a and 4b. If less than \$400, stop; you don't owe self-employment tax. Exception: If less than \$400 and you had church employee income, enter -0- and continue ▶	4c	15,778.
5a Enter your church employee income from Form W-2. See instructions for definition of church employee income	5a	
5b Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-	5b	
6 Add lines 4c and 5b	6	15,778.
7 Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2021	7	142,800
8a Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$142,800 or more, skip lines 8b through 10, and go to line 11	8a	26,000.
8b Unreported tips subject to social security tax from Form 4137, line 10	8b	
8c Wages subject to social security tax from Form 8919, line 10	8c	
8d Add lines 8a, 8b, and 8c	8d	26,000.
9 Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11 ▶	9	116,800.
10 Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	1,956.
11 Multiply line 6 by 2.9% (0.029)	11	458.
12 Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4	12	2,414.
13 Deduction for one-half of self-employment tax. Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040), line 15	13	1,207.

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

Farm Optional Method. You may use this method only if (a) your gross farm income ¹ wasn't more than \$8,820, or (b) your net farm profits ² were less than \$6,367.		
14 Maximum income for optional methods	14	5,880
15 Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$5,880. Also, include this amount on line 4b above	15	
Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits ³ were less than \$6,367 and also less than 72.189% of your gross nonfarm income ⁴ , and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. Caution: You may use this method no more than five times.		
16 Subtract line 15 from line 14	16	
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 From Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.

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

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

⁴ From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.

**SCHEDULE SE
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Self-Employment Tax

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

OMB No. 1545-0074

2021

Attachment
Sequence No. **17**

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

TRACY G. GREENWELL

Social security number of person
with self-employment income ▶

Part I Self-Employment Tax

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

A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I

Skip lines 1a and 1b if you use the farm optional method in Part II. See instructions.

1a Net farm profit or (loss) from Sch. F, line 34, and farm partnerships, Sch. K-1 (Form 1065), box 14, code A If you received social security retirement or disability benefits, enter the amount of Conservation Reserve	1a	
b Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AH	1b	
Skip line 2 if you use the nonfarm optional method in Part II. See instructions.		
2 Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order SEE STATEMENT 20	2	1,207.
3 Combine lines 1a, 1b, and 2	3	1,207.
4a If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3 Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions	4a	1,115.
b 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 less than \$400 and you had church employee income, enter -0- and continue ▶	4c	1,115.
5a Enter your church employee income from Form W-2. See instructions for definition of church employee income	5a	
b Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-	5b	
6 Add lines 4c and 5b	6	1,115.
7 Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2021	7	142,800
8a Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$142,800 or more, skip lines 8b through 10, and go to line 11	8a	
b Unreported tips subject to social security tax from Form 4137, line 10	8b	
c Wages subject to social security tax from Form 8919, line 10	8c	
d 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	142,800.
10 Multiply the smaller of line 6 or line 9 by 12.4% (0.124)	10	138.
11 Multiply line 6 by 2.9% (0.029)	11	32.
12 Self-employment tax. Add lines 10 and 11. Enter here and on Schedule 2 (Form 1040), line 4	12	170.
13 Deduction for one-half of self-employment tax. Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040), line 15	13	85.

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

Farm Optional Method. You may use this method only if (a) your gross farm income ¹ wasn't more than \$8,820, or (b) your net farm profits ² were less than \$6,367.		
14 Maximum income for optional methods	14	5,880
15 Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$5,880. Also, include this amount on line 4b above	15	
Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits ³ were less than \$6,367 and also less than 72.189% of your gross nonfarm income ⁴ , and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. Caution: You may use this method no more than five times.		
16 Subtract line 15 from line 14	16	
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 From Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.

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

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

⁴ From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.

Foreign Tax Credit
 (Individual, Estate, or Trust)

2021

Attachment
 Sequence No. **19**

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

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

Name **MICHAEL L. & TRACY G. GREENWELL** Identifying number as shown on page 1 of your tax return XXXXXXXXXX

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a Section 951A category income c Passive category income e Section 901(j) income g Lump-sum distributions
 b Foreign branch category income d General category income f 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 above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
i Enter the name of the foreign country or U.S. possession ▶ OC				
1a Gross income from sources within country shown above and of the type checked above: _____	8,382.			1a 8,382.
b Check if line 1a is 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 ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related :				
a Certain itemized deductions or standard deduction	25,100.			
b Other deductions (attach statement)				
c Add lines 3a and 3b	25,100.			
d Gross foreign source income	8,382.			
e Gross income from all sources	2,310,877.			
f Divide line 3d by line 3e003627194			
g Multiply line 3c by line 3f	91.			
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	91.			6 91.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶				7 8,291.

Part II Foreign Taxes Paid or Accrued

SEE STATEMENT 21

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued						(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))
		In foreign currency			In U.S. dollars				
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	(p) Other foreign taxes paid or accrued	(q) Dividends		
A	1099 TAX					998.			998.
B									
C									
8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 ▶									8 998.

LHA For Paperwork Reduction Act Notice, see instructions.

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	998.	
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year SEE STATEMENT 22 (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10	2,403.	
11	Add lines 9 and 10	11	3,401.	
12	Reduction in foreign taxes	12		
13	Taxes reclassified under high tax kickout	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	3,401.	
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	8,291.	
16	Adjustments to line 15	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	8,291.	
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18	1,217,833.	
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19	.00681	
20	Individuals: Enter the total of Form 1040, 1040-SR or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16 Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions.	20	226,277.	
21	Multiply line 20 by line 19 (maximum amount of credit)	21	1,541.	
22	Increase in limitation (section 960(c))	22		
23	Add lines 21 and 22	23	1,541.	
24	Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV	24	1,541.	

Part IV Summary of Credits From Separate Parts III

25	Credit for taxes on section 951A category income	25	
26	Credit for taxes on foreign branch category income	26	
27	Credit for taxes on passive category income	27	
28	Credit for taxes on general category income	28	
29	Credit for taxes on section 901(j) income	29	
30	Credit for taxes on certain income re-sourced by treaty	30	
31	Credit for taxes on lump-sum distributions	31	
32	Add lines 25 through 31	32	
33	Enter the smaller of line 20 or line 32	33	1,541.
34	Reduction of credit for international boycott operations	34	
35	Subtract line 34 from line 33. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a	35	1,541.

**SCHEDULE B
Form 1116**

December 2021
Department of the Treasury
Internal Revenue Service
OMB No. 1545-0121

Foreign Tax Carryover Reconciliation Schedule
For calendar year 2021, or other tax year beginning _____, and ending _____

▶ See separate instructions.
▶ Attach to Form 1116.

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

Identifying number as shown
on page 1 of your tax return
[REDACTED]

MICHAEL L. & TRACY G. GREENWELL

Use a separate Schedule B (Form 1116) for each applicable category of income listed below. See instructions. Check only one box on each schedule. Check the box for the same separate category code as that shown on the Form 1116 to which this Schedule B is attached.

- a Reserved for future use c Passive category income e Section 901(j) income g Lump-sum distributions
b Foreign branch category income d General category income f Certain income re-sourced by treaty
- h If box e is checked, enter the country code for the sanctioned country. See instructions _____
i If box f is checked, enter the country code for the treaty country. See instructions _____

Foreign Tax Carryover Reconciliation	(i) 10th Preceding Tax Year	(ii) 9th Preceding Tax Year	(iii) 8th Preceding Tax Year	(iv) 7th Preceding Tax Year	(v) 6th Preceding Tax Year	(vi) 5th Preceding Tax Year	(vii) Subtotal (add columns (i) through (vi))
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 6 of the worksheet in the instructions)				391.	386.		777.
2 Adjustments to line 1 (enter description - see instructions):							
a Carryback adjustment (see instructions)							
Adjustments for section 905(c)							
b redeterminations (see instructions)							
c							
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2)				391.	386.		777.
4 Foreign tax carryover used in current tax year (enter as a negative number)				-391.	-152.		-543.
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year							
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8 Foreign tax carryover to the following tax year. Combine lines 3 through 7.	-0-			0.	234.		234.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule B (Form 1116) (12-2021)

Foreign Tax Carryover Reconciliation	(viii) Subtotal from page 1 (enter the amounts from column (vii) on page 1)	(ix) 4th Preceding Tax Year	(x) 3rd Preceding Tax Year	(xi) 2nd Preceding Tax Year	(xii) 1st Preceding Tax Year	(xiii) Current Tax Year	(xiv) Totals (add columns (vii) through (xiii))
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 6 of the worksheet in the instructions)	777.	985.	641.				2,403.
2 Adjustments to line 1 (enter description - see instructions):							
a Carryback adjustment (see instructions)							
Adjustments for section 905(c)							
b redeterminations (see instructions)							
c							
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1116, Part III, line 10.	777.	985.	641.				2,403.
4 Foreign tax carryover used in current tax year (enter as a negative number)	-543.						-543.
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year							
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8 Foreign tax carryover to the following tax year. Combine lines 3 through 7.	234.	985.	641.			0.	1,860.

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

Department of the Treasury
Internal Revenue Service

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4797 for instructions and the latest information.

Attachment
Sequence No. **27**

Name(s) shown on return

Identifying number

MICHAEL L. & TRACY G. GREENWELL

1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20

1a

b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets

1b

c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets

1c

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
3	Gain, if any, from Form 4684, line 39						3
4	Section 1231 gain from installment sales from Form 6252, line 26 or 37						4
5	Section 1231 gain or (loss) from like-kind exchanges from Form 8824						5
6	Gain, if any, from line 32, from other than casualty or theft						6
7	Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.						7
8	Nonrecaptured net section 1231 losses from prior years. See instructions STATEMENT 24						8
9	Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions						9

Part II Ordinary Gains and Losses (see instructions)

10	Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): SEE STATEMENT 23						34,475.	54,155.	-19,680.
11	Loss, if any, from line 7						11	()	
12	Gain, if any, from line 7 or amount from line 8, if applicable						12		
13	Gain, if any, from line 31						13	7,900.	
14	Net gain or (loss) from Form 4684, lines 31 and 38a						14		
15	Ordinary gain from installment sales from Form 6252, line 25 or 36						15		
16	Ordinary gain or (loss) from like-kind exchanges from Form 8824						16		
17	Combine lines 10 through 16						17	-11,780.	
18	For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.								
a	If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions						18a		
b	Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4						18b	-11,780.	

LHA For Paperwork Reduction Act Notice, see separate instructions.

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

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A	CATTLE	02/11/13	09/22/21
B	BULL	07/01/17	09/22/21
C			
D			
These columns relate to the properties on lines 19A through 19D.		Property A	Property B
20	Gross sales price (Note: See line 1a before completing.)	7,500.	816.
21	Cost or other basis plus expense of sale	13,513.	2,500.
22	Depreciation (or depletion) allowed or allowable	13,513.	2,084.
23	Adjusted basis. Subtract line 22 from line 21		416.
24	Total gain. Subtract line 23 from line 20	7,500.	400.
25 If section 1245 property:			
25a	a Depreciation allowed or allowable from line 22	13,513.	2,084.
25b	b Enter the smaller of line 24 or 25a	7,500.	400.
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.			
26a	a Additional depreciation after 1975. See instructions		
26b	b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions		
26c	c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e		
26d	d Additional depreciation after 1969 and before 1976		
26e	e Enter the smaller of line 26c or 26d		
26f	f Section 291 amount (corporations only)		
26g	g Add lines 26b, 26e, and 26f		
27 If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.			
27a	a Soil, water, and land clearing expenses		
27b	b Line 27a multiplied by applicable percentage		
27c	c Enter the smaller of line 24 or 27b		
28 If section 1254 property:			
28a	a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions		
28b	b Enter the smaller of line 24 or 28a		
29 If section 1255 property:			
29a	a Applicable percentage of payments excluded from income under section 126. See instructions		
29b	b Enter the smaller of line 24 or 29a. See instructions		

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

30	Total gains for all properties. Add property columns A through D, line 24	30	7,900.
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	7,900.
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

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

	(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	
34	Recomputed depreciation. See instructions	
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Your social security number

MICHAEL L. & TRACY G. GREENWELL

Part I Alternative Minimum Taxable Income

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 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the result here. (If less than zero, enter as a negative amount.)	1	1,217,833.
2a	If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040 or 1040-SR, line 12a	2a	25,100.
b	Tax refund from Schedule 1 (Form 1040), line 1 or line 8z	2b	
c	Investment interest expense (difference between regular tax and AMT)	2c	
d	Depletion (difference between regular tax and AMT)	2d	
e	Net operating loss deduction from Schedule 1 (Form 1040), line 8a. Enter as a positive amount	2e	
f	Alternative tax net operating loss deduction	2f	
g	Interest from specified private activity bonds exempt from the regular tax	2g	
h	Qualified small business stock, see instructions	2h	
i	Exercise of incentive stock options (excess of AMT income over regular tax income)	2i	
j	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	2j	
k	Disposition of property (difference between AMT and regular tax gain or loss)	2k	
l	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	2l	
m	Passive activities (difference between AMT and regular tax income or loss)	2m	
n	Loss limitations (difference between AMT and regular tax income or loss)	2n	
o	Circulation costs (difference between regular tax and AMT)	2o	
p	Long-term contracts (difference between AMT and regular tax income)	2p	
q	Mining costs (difference between regular tax and AMT)	2q	
r	Research and experimental costs (difference between regular tax and AMT)	2r	
s	Income from certain installment sales before January 1, 1987	2s	
t	Intangible drilling costs preference	2t	
3	Other adjustments, including income-based related adjustments	3	
4	Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$752,800, see instructions.)	4	1,242,933.

Part II Alternative Minimum Tax (AMT)

5	Exemption. IF your filing status is ... AND line 4 is not over ... THEN enter on line 5 ... Single or head of household \$523,600 \$73,600 Married filing jointly or qualifying widow(er) 1,047,200 114,600 STMT 25 Married filing separately 523,600 57,300 If line 4 is over the amount shown above for your filing status, see instructions.	5	65,667.
6	Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9, and 11, and go to line 10	6	1,177,266.
7	• If you are filing Form 2555, see instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here. • All others: If line 6 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result.	7	232,077.
8	Alternative minimum tax foreign tax credit (see instructions)	8	1,564.
9	Tentative minimum tax. Subtract line 8 from line 7	9	230,513.
10	Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result Schedule 3 (Form 1040), line 1 and any negative amount reported on Form 8978, line 14 (treated as a positive number). If zero or less, enter -0-. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line. See instructions	10	224,736.
11	AMT. Subtract line 10 from line 9. If zero or less, enter -0-. Enter here and on Schedule 2 (Form 1040), line 1	11	5,777.

Part III Tax Computation Using Maximum Capital Gains Rates

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

12	Enter the amount from Form 6251, line 6. If you are filing Form 2555, enter the amount from line 3 of the worksheet in the instructions for line 7	12	1,177,266.
13	Enter the amount from line 4 of the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040 or the amount from line 13 of the Schedule D Tax Worksheet in the Instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, necessary). See instructions. If you are filing Form 2555, see instructions for the amount to enter	13	998,402.
14	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary). See instructions. If you are filing Form 2555, see instructions for the amount to enter	14	
15	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see instructions for the amount to enter	15	998,402.
16	Enter the smaller of line 12 or line 15	16	998,402.
17	Subtract line 16 from line 12	17	178,864.
18	If line 17 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result	18	46,505.
19	Enter: <ul style="list-style-type: none"> • \$80,800 if married filing jointly or qualifying widow(er), • \$40,400 if single or married filing separately, or • \$54,100 if head of household. 	19	80,800.
20	Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 14 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter	20	219,431.
21	Subtract line 20 from line 19. If zero or less, enter -0-	21	0.
22	Enter the smaller of line 12 or line 13	22	998,402.
23	Enter the smaller of line 21 or line 22. This amount is taxed at 0%	23	0.
24	Subtract line 23 from line 22	24	998,402.
25	Enter: <ul style="list-style-type: none"> • \$445,850 if single, • \$250,800 if married filing separately, • \$501,600 if married filing jointly or qualifying widow(er), or • \$473,750 if head of household. 	25	501,600.
26	Enter the amount from line 21	26	0.
27	Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter	27	219,431.
28	Add line 26 and line 27	28	219,431.
29	Subtract line 28 from line 25. If zero or less, enter -0-	29	282,169.
30	Enter the smaller of line 24 or line 29	30	282,169.
31	Multiply line 30 by 15% (0.15)	31	42,325.
32	Add lines 23 and 30 If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33.	32	282,169.
33	Subtract line 32 from line 22	33	716,233.
34	Multiply line 33 by 20% (0.20) If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35.	34	143,247.
35	Add lines 17, 32, and 33	35	
36	Subtract line 35 from line 12	36	
37	Multiply line 36 by 25% (0.25)	37	
38	Add lines 18, 31, 34, and 37	38	232,077.
39	If line 12 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 12 by 26% (0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result	39	325,636.
40	Enter the smaller of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7	40	232,077.

ALTERNATIVE MINIMUM TAX RECONCILIATION REPORT

Name(s) MICHAEL L. & TRACY G. GREENWELL	Social Security Number <div style="background-color: black; width: 100px; height: 20px;"></div>
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Form Name	Description	Income	Adjustment					
			Form 6251, Line 2k	Form 6251, Line 2l	Form 6251, Line 2m	Form 6251, Line 2n	Form 6251 Other Adjustment	
K1-	BIG LEAGUE BUILDERS, INC							
	* REGULAR INCOME	-9,271.						
	* AMT NET INCOME	-9,271.						
4797	BULL							
	* REGULAR INCOME	400.						
	TOTAL REGULAR DEPR	-2,084.	-2,084.					
	AMT ACCUMULATE DEP	1,875.	1,875.					
	AMT CURRENT DEPR	209.	209.					
	* AMT NET INCOME	400.						
4797	ABANDONED LAND IMPROVEMENTS							
	* REGULAR INCOME	-19,680.						
	TOTAL REGULAR DEPR	-18,479.	-18,479.					
	AMT ACCUMULATE DEP	17,472.	17,472.					
	AMT CURRENT DEPR	1,007.	1,007.					
	* AMT NET INCOME	-19,680.						

ALTERNATIVE MINIMUM TAX DEPRECIATION REPORT

Asset No.	Description	Date Acquired	AMT Method	AMT Life	AMT Cost Or Basis	AMT Accumulated	Regular Depreciation	AMT Depreciation	AMT Adjustment
	MIKE GREENWELL								
	LAND IMPROVEMENTS-ROAD	010413	150DB	15.00	17,600.	9,805.	520.	520.	0.
	FENCE POST	020913	150DB	15.00	5,457.	3,040.	161.	161.	0.
	TRUSSES FOR BARN	030613	SL	39.00	10,602.	2,119.	193.	193.	0.
	PIPE	030613	150DB	15.00	4,500.	2,508.	133.	133.	0.
	BULL	070117	150DB	5.00	2,500.	1,875.	209.	209.	0.
	** SUBTOTAL **				40,659.	19,347.	1,216.	1,216.	0.
	*** GRAND TOTAL ***				40,659.	19,347.	1,216.	1,216.	0.

**ALTERNATIVE MINIMUM TAX
Foreign Tax Credit**

OMB No. 1545-0121

Form **1116**

Department of the Treasury
Internal Revenue Service (99)

(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.

2021

Attachment
Sequence No. **19**

Name **MICHAEL L. & TRACY G. GREENWELL** Identifying number as shown on page 1 of your tax return XXXXXXXXXX

MICHAEL L. & TRACY G. GREENWELL

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a Section 951A category income c Passive category income e Section 901(j) income g Lump-sum distributions
b Foreign branch category income d General category income f 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 above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
i Enter the name of the foreign country or U.S. possession ▶ OC				
1a Gross income from sources within country shown above and of the type checked above: _____	8,382.			8,382.
b Check if line 1a is 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 ▶ <input type="checkbox"/>				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 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	8,382.			
e Gross income from all sources	2,310,877.			
f Divide line 3d by line 3e003627194			
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5				6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				8,382.

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued										
		In foreign currency				In U.S. dollars						
		Taxes withheld at source on:				Taxes withheld at source on:				(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))	
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	(p) Other foreign taxes paid or accrued	(q) Dividends	(r) Rents and royalties	(s) Interest			
A		1099 TAX					998.				998.	
B												
C												
8 Add lines A through C, column (u). Enter the total here and on line 9, page 2											8	998.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2021)

ALTERNATIVE MINIMUM TAX

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	998.	
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year SEE STATEMENT 26 (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10	4,421.	
11	Add lines 9 and 10	11	5,419.	
12	Reduction in foreign taxes	12		
13	Taxes reclassified under high tax kickout	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	5,419.	
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I	15	8,382.	
16	Adjustments to line 15	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	8,382.	
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18	1,242,933.	
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19	.00674	
20	Individuals: Enter the total of Form 1040, 1040-SR or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16 Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions.	20	232,077.	
21	Multiply line 20 by line 19 (maximum amount of credit)	21	1,564.	
22	Increase in limitation (section 960(c))	22		
23	Add lines 21 and 22	23	1,564.	
24	Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV	24	1,564.	

Part IV Summary of Credits From Separate Parts III

25	Credit for taxes on section 951A category income	25		
26	Credit for taxes on foreign branch category income	26		
27	Credit for taxes on passive category income	27		
28	Credit for taxes on general category income	28		
29	Credit for taxes on section 901(j) income	29		
30	Credit for taxes on certain income re-sourced by treaty	30		
31	Credit for taxes on lump-sum distributions	31		
32	Add lines 25 through 31	32		
33	Enter the smaller of line 20 or line 32	33	1,564.	
34	Reduction of credit for international boycott operations	34		
35	Subtract line 34 from line 33. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a	35	1,564.	

AMT
SCHEDULE B
Form 1116

December 2021)
 Department of the Treasury
 Internal Revenue Service

Foreign Tax Carryover Reconciliation Schedule
 For calendar year 2021, or other tax year beginning _____, and ending _____

▶ See separate instructions.
 ▶ Attach to Form 1116.

OMB No. 1545-0121

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

Identifying number as shown
 on page 1 of your tax return

MICHAEL L. & TRACY G. GREENWELL

Use a separate Schedule B (Form 1116) for each applicable category of income listed below. See instructions. Check only one box on each schedule.
 Check the box for the same separate category code as that shown on the Form 1116 to which this Schedule B is attached.

- a Reserved for future use c Passive category income e Section 901(j) income g Lump-sum distributions
 b Foreign branch category income d General category income f Certain income re-sourced by treaty

h If box e is checked, enter the country code for the sanctioned country. See instructions
 i If box f is checked, enter the country code for the treaty country. See instructions

Foreign Tax Carryover Reconciliation	(i) 10th Preceding Tax Year	(ii) 9th Preceding Tax Year	(iii) 8th Preceding Tax Year	(iv) 7th Preceding Tax Year	(v) 6th Preceding Tax Year	(vi) 5th Preceding Tax Year	(vii) Subtotal (add columns (i) through (vi))
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 6 of the worksheet in the instructions)				1,083.	1,241.	22.	2,346.
2 Adjustments to line 1 (enter description - see instructions):							
a Carryback adjustment (see instructions)							
b redeterminations (see instructions)							
c							
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2)				1,083.	1,241.	22.	2,346.
4 Foreign tax carryover used in current tax year (enter as a negative number)				-566.			-566.
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year							
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8 Foreign tax carryover to the following tax year. Combine lines 3 through 7.	-0-			517.	1,241.	22.	1,780.

▶ Paperwork Reduction Act Notice, see the separate instructions.

Schedule B (Form 1116) (12-2021)

Foreign Tax Carryover Reconciliation	(viii) Subtotal from page 1 (enter the amounts from column (vi) on page 1)	(ix) 4th Preceding Tax Year	(x) 3rd Preceding Tax Year	(xi) 2nd Preceding Tax Year	(xii) 1st Preceding Tax Year	(xiii) Current Tax Year	(xiv) Totals (add columns (vii) through (xiii))
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 6 of the worksheet in the instructions)	2,346.	985.	1,090.				4,421.
2 Adjustments to line 1 (enter description - see instructions):							
a Carryback adjustment (see instructions)							
Adjustments for section 905(c)							
b redeterminations (see instructions)							
c							
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1116, Part III, line 10.	2,346.	985.	1,090.				4,421.
4 Foreign tax carryover used in current tax year (enter as a negative number)	-566.						-566.
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year							
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8 Foreign tax carryover to the following tax year. Combine lines 3 through 7.	1,780.	985.	1,090.			0.	3,855.

Health Savings Accounts (HSAs)

2021

Department of the Treasury
Internal Revenue Service

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

▶ Go to www.irs.gov/Form8889 for instructions and the latest information.

Attachment
Sequence No. 52

Name(s) shown on Form 1040, 1040-SR, or 1040-NR

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions ▶

MICHAEL L. GREENWELL

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part I HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse.

1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021. See instructions	▶	<input type="checkbox"/> Self-only	<input checked="" type="checkbox"/> Family
2	HSA contributions you made for 2021 (or those made on your behalf), including those made from January 1, 2022, through April 15, 2022, that were for 2021. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions	2		7,000.
3	If you were under age 55 at the end of 2021 and, on the first day of every month during 2021, you were, or were considered, an eligible individual with the same coverage, enter \$3,600 (\$7,200 for family coverage). All others, see the instructions for the amount to enter	3		7,200.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also include any amount contributed to your spouse's Archer MSAs	4		
5	Subtract line 4 from line 3. If zero or less, enter -0-	5		7,200.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2021, see the instructions for the amount to enter	6		7,200.
7	If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage under an HDHP at any time during 2021, enter your additional contribution amount. See instructions	7		1,000.
8	Add lines 6 and 7	8		8,200.
9	Employer contributions made to your HSAs for 2021	9		
10	Qualified HSA funding distributions	10		
11	Add lines 9 and 10	11		
12	Subtract line 11 from line 8. If zero or less, enter -0-	12		8,200.
13	HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13	13		7,000.
Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions.				

Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.

14a	Total distributions you received in 2021 from all HSAs (see instructions)	14a		805.
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions	14b		
c	Subtract line 14b from line 14a	14c		805.
15	Qualified medical expenses paid using HSA distributions (see instructions)	15		805.
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8e	16		0.
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here	▶	<input type="checkbox"/>	
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c	17b		

Part III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse.

18	Last-month rule	18	
19	Qualified HSA funding distribution	19	
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8z, and enter "HSA" and the amount on the dotted line	20	
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d	21	

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

Department of the Treasury
Internal Revenue Service

▶ **Attach to your tax return.**

▶ **Go to www.irs.gov/Form8995A for instructions and the latest information.**

Name(s) shown on return

Your taxpayer identification number

MICHAEL L. & TRACY G. GREENWELL

Note: You can claim the qualified business income deduction **only** if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions. Use this form if your taxable income, before your qualified business income deduction, is above \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

Part I Trade, Business, or Aggregation Information

Complete Schedules A, B, and/or C (Form 8995-A), as applicable, before starting Part I. Attach additional worksheets when needed. See instructions.

1	(a) Trade, business, or aggregation name	(b) Check if specified service	(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if patron
A		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
B		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
C		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

Part II Determine Your Adjusted Qualified Business Income

	A	B	C
2 Qualified business income from the trade, business, or aggregation. See instructions	2		
3 Multiply line 2 by 20% (0.20). If your taxable income is \$164,900 or less (\$164,925 if married filing separately; \$329,800 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13	3		
4 Allocable share of W-2 wages from the trade, business, or aggregation	4		
5 Multiply line 4 by 50% (0.50)	5		
6 Multiply line 4 by 25% (0.25)	6		
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property	7		
8 Multiply line 7 by 2.5% (0.025)	8		
9 Add lines 6 and 8	9		
10 Enter the greater of line 5 or line 9	10		
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10	11		
12 Phased-in reduction. Enter the amount from line 26, if any	12		
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	13		
14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any. See instructions	14		
15 Qualified business income component. Subtract line 14 from line 13	15		
16 Total qualified business income component. Add all amounts reported on line 15	16		

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

Form **8995-A** (2021)

Part III Phased-in Reduction

Complete Part III only if your taxable income is more than \$164,900 but not \$214,900 (\$164,925 and \$214,925 if married filing separately; \$329,800 and \$429,800 if married filing jointly) and line 10 is less than line 3. Otherwise, skip Part III.

		A	B	C
17	Enter the amounts from line 3	17		
18	Enter the amounts from line 10	18		
19	Subtract line 18 from line 17	19		
20	Taxable income before qualified business income deduction	20		
21	Threshold. Enter \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly)	21		
22	Subtract line 21 from line 20	22		
23	Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	23		
24	Phase-in percentage. Divide line 22 by line 23	24	%	
25	Total phase-in reduction. Multiply line 19 by line 24	25		
26	Qualified business income after phase-in reduction. Subtract line 25 from line 17. Enter this amount here and on line 12, for the corresponding trade or business	26		

Part IV Determine Your Qualified Business Income Deduction

27	Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16	27		
28	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions SEE STATEMENT 27	28	1,631.	
29	Qualified REIT dividends and PTP (loss) carryforward from prior years	29	()	
30	Total qualified REIT dividends and PTP income. Combine lines 28 and 29. If less than zero, enter -0-	30	1,631.	
31	REIT and PTP component. Multiply line 30 by 20% (0.20)	31	326.	
32	Qualified business income deduction before the income limitation. Add lines 27 and 31	32		326.
33	Taxable income before qualified business income deduction	33	1,218,159.	
34	Net capital gain. See instructions	34	998,402.	
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		219,757.
36	Income limitation. Multiply line 35 by 20% (0.20)	36		43,951.
37	Qualified business income deduction before the domestic production activities deduction (DPAD) under section 199A(g). Enter the smaller of line 32 or line 36	37		326.
38	DPAD under section 199A(g) allocated from an agricultural or horticultural cooperative. Don't enter more than line 33 minus line 37	38		
39	Total qualified business income deduction. Add lines 37 and 38	39		326.
40	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-	40	()	

**SCHEDULE C
(Form 8995-A)**

Department of the Treasury
Internal Revenue Service

Loss Netting and Carryforward

▶ Attach to Form 8995-A.

▶ Go to www.irs.gov/Form8995A for instructions and the latest information.

OMB No. 1545-2294

2021

Attachment
Sequence No. **55D**

Name(s) shown on return

Your taxpayer identification number

MICHAEL L. & TRACY G. GREENWELL

If you have more than three trades, businesses, or aggregations, complete and attach as many Schedules C as needed. See instructions.

1	Trade, business, or aggregation name	(a) Qualified business income/(loss)	(b) Reduction for loss netting (see instructions)	(c) Adjusted qualified business income (Combine (a) and (b). If zero or less, enter -0-.)
	SEE STATEMENT 28		()	
			()	
			()	
2	Qualified business net (loss) carryforward from prior years. See instructions SEE STATEMENT 29			2 (171,396)
3	Total of the trades, businesses, or aggregations losses. Combine the negative amounts on lines 1, column (a), and 2 for all trades, businesses, or aggregations			3 (189,651)
4	Total of the trades, businesses, or aggregations income. Add the positive amounts on line 1, column (a), for all trades, businesses, or aggregations			4 14,204.
5	Losses netted with income of other trades, businesses, or aggregations. Enter in the parentheses on line 5 the smaller of the absolute value of line 3 or line 4. Allocate this amount to each of the trades, businesses, or aggregations on line 1, column (b).			5 (14,204)
6	Qualified business net (loss) carryforward. Subtract line 5 from line 3. If zero or more, enter -0-			6 (175,447)

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

Schedule C (Form 8995-A) 2021

Qualified Business Income After Deductions

Activity: **MIKE GREENWELL**

1.	Qualified business income before deductions		<u>14,289.</u>
2.	Deductible part of self-employment income:		
	a. Net income subject to self-employment tax from this activity	<u>26,069.</u>	
	b. Total income subject to self-employment tax	<u>27,276.</u>	
	c. Line 2a divided by line 2b (not greater than 1.000)	<u>.955748643</u>	
	d. Amount from Schedule 1 (Form 1040), line 15	<u>1,292.</u>	
	e. Line 2c times line 2d. This is the allocated deductible part of self-employment tax for this activity		<u>1,235.</u>
3.	Self-employed SEP, SIMPLE and qualified plans:		
	a. Net income subject to self-employment tax from this activity		
	b. Net earnings from		
	c. Line 3a divided by line 3b (not greater than 1.000)		
	d. Amount from Schedule 1 (Form 1040), line 16		
	e. Line 3c times line 3d. This is the allocated self-employed SEP, SIMPLE and qualified plans amount for this activity		
4.	Self-employed health insurance deduction:		
	a. Health insurance payments from this activity		
	b. Health insurance limits for activity above		
	c. Lesser of line 4a or line 4b		
	d. Reserved		
	e. Reserved		
	f. Amount from line 4c. This is the allocated SE health insurance deduction for this activity		
5.	Line 1 minus lines 2e, 3e and 4f. This is the qualified business income after deductions		<u>13,054.</u>

Activity: **YOUNG LIVING ESSENTIAL OILS**

1.	Qualified business income before deductions		<u>1,207.</u>
2.	Deductible part of self-employment income:		
	a. Net income subject to self-employment tax from this activity	<u>1,207.</u>	
	b. Total income subject to self-employment tax	<u>27,276.</u>	
	c. Line 2a divided by line 2b (not greater than 1.000)	<u>.044251357</u>	
	d. Amount from Schedule 1 (Form 1040), line 15	<u>1,292.</u>	
	e. Line 2c times line 2d. This is the allocated deductible part of self-employment tax for this activity		<u>57.</u>
3.	Self-employed SEP, SIMPLE and qualified plans:		
	a. Net income subject to self-employment tax from this activity		
	b. Net earnings from		
	c. Line 3a divided by line 3b (not greater than 1.000)		
	d. Amount from Schedule 1 (Form 1040), line 16		
	e. Line 3c times line 3d. This is the allocated self-employed SEP, SIMPLE and qualified plans amount for this activity		
4.	Self-employed health insurance deduction:		
	a. Health insurance payments from this activity		
	b. Health insurance limits for activity above		
	c. Lesser of line 4a or line 4b		
	d. Reserved		
	e. Reserved		
	f. Amount from line 4c. This is the allocated SE health insurance deduction for this activity		
5.	Line 1 minus lines 2e, 3e and 4f. This is the qualified business income after deductions		<u>1,150.</u>

Installment Sale Income

Form **6252**

Department of the Treasury
Internal Revenue Service

▶ Attach to your tax return.
▶ Use a separate form for each sale or other disposition of property on the installment method.
▶ Go to www.irs.gov/Form6252 for the latest information.

2021

Attachment
Sequence No. **67**

Name(s) shown on return: **MICHAEL L. & TRACY G. GREENWELL**
Identifying number: [REDACTED]

1 Description of property ▶ **4 - LAND SR 31-SW FL 1B, LLC-FINAL**
2a Date acquired (mm/dd/yyyy) ▶ **06/01/06** b Date sold (mm/dd/yyyy) ▶ **09/26/07**
3 Was the property sold to a related party after May 14, 1980? If "No," skip line 4 Yes No
4 Was the property you sold to a related party a marketable security? If "Yes," complete Part III. If "No," complete Part III for the year of sale and the 2 years after the year of sale Yes No

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

5	Selling price including mortgages and other debts. Don't include interest, whether stated or unstated	5	7,007,500.
6	Mortgages, debts, and other liabilities the buyer assumed or took the property subject to	6	
7	Subtract line 6 from line 5	7	7,007,500.
8	Cost or other basis of property sold	8	4,029,926.
9	Depreciation allowed or allowable	9	
10	Adjusted basis. Subtract line 9 from line 8	10	4,029,926.
11	Commissions and other expenses of sale	11	80,199.
12	Income recapture from Form 4797, Part III	12	
13	Add lines 10, 11, and 12	13	4,110,125.
14	Subtract line 13 from line 5. If zero or less, don't complete the rest of this form	14	2,897,375.
15	If the property described on line 1 above was your main home, enter the amount of your excluded gain. Otherwise, enter -0-	15	0.
16	Gross profit. Subtract line 15 from line 14	16	647,375.
17	Subtract line 13 from line 6. If zero or less, enter -0-	17	0.
18	Contract price. Add line 7 and line 17	18	7,007,500.

Part II Installment Sale Income. Complete this part for all years of the installment agreement.

19	Gross profit percentage (expressed as a decimal amount). Divide line 16 by line 18. (For years after the year of sale, see instructions.)	19	.28260
20	If this is the year of sale, enter the amount from line 17. Otherwise, enter -0-	20	0.
21	Payments received during year. Don't include interest, whether stated or unstated	21	2,500,000.
22	Add lines 20 and 21	22	2,500,000.
23	Payments received in prior years. Don't include interest, whether stated or unstated	23	4,507,500.
24	Installment sale income. Multiply line 22 by line 19	24	706,500.
25	Enter the part of line 24 that is ordinary income under the recapture rules	25	
26	Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797	26	706,500.

Part III Related Party Installment Sale Income. Don't complete if you received the final payment this tax year.

27 Name, address, and taxpayer identifying number of related party ▶

28 Did the related party resell or dispose of the property ("second disposition") during this tax year? Yes No

29 If the answer to question 28 is "Yes," complete lines 30 through 37 below unless one of the following conditions is met.

Check the box that applies.

- a The second disposition was more than 2 years after the first disposition (other than dispositions of marketable securities). If this box is checked, enter the date of disposition (mm/dd/yyyy) ▶
- b The first disposition was a sale or exchange of stock to the issuing corporation.
- c The second disposition was an involuntary conversion and the threat of conversion occurred after the first disposition.
- d The second disposition occurred after the death of the original seller or buyer.
- e It can be established to the satisfaction of the IRS that tax avoidance wasn't a principal purpose for either of the dispositions. If this box is checked, attach an explanation.

30	Selling price of property sold by related party	30	
31	Enter contract price from line 18 for year of first sale	31	
32	Enter the smaller of line 30 or line 31	32	
33	Total payments received by the end of your 2021 tax year	33	
34	Subtract line 34 from line 32. If zero or less, enter -0-	34	
35	Multiply line 34 by the gross profit percentage on line 19 for year of first sale	35	
36	Enter the part of line 35 that is ordinary income under the recapture rules	36	
37	Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797	37	

INSTALLMENT SALE

MICHAEL L. & TRACY G. GREENWELL

SCHEDULE OF RECEIPTS

MO. DA. YR.	PRINCIPAL RECEIVED	TOTAL GAIN	ORDINARY GAIN	SEC. 1231/OR CAPITAL GAIN	UNRECAP. SEC. 1250 GAIN
09/26/07	4,500,000.	2,188,640.		2,188,640.	
12/01/11	7,500.	2,120.		2,120.	
09/22/21	2,500,000.	706,500.		706,500.	
Cumulative					
Total	7,007,500.	2,897,260.		2,897,260.	

Net Investment Income Tax - Individuals, Estates, and Trusts

2021

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form8960 for instructions and the latest information.

Attachment
Sequence No. **72**

Name(s) shown on your tax return
MICHAEL L. & TRACY G. GREENWELL

Your social security number or EIN
[REDACTED]

Part I Investment Income

Section 6013(g) election (see instructions)

Section 6013(h) election (see instructions)

Regulations section 1.1411-10(g) election (see instructions)

1 Taxable interest (see instructions)			150,412.
2 Ordinary dividends (see instructions)			26,356.
3 Annuities (see instructions)			
4a Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a	-9,271.	
b Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions) STATEMENT 30	4b	9,271.	
c Combine lines 4a and 4b			0.
5a Net gain or loss from disposition of property (see instructions)	5a	965,022.	
b Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b	11,780.	
c Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c		
d Combine lines 5a through 5c			976,802.
6 Adjustments to investment income for certain CFCs and PFICs (see instructions)			
7 Other modifications to investment income (see instructions)			
8 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			1,153,570.

Part II Investment Expenses Allocable to Investment Income and Modifications

9a Investment interest expenses (see instructions)	9a		
b State, local, and foreign income tax (see instructions)	9b		
c Miscellaneous investment expenses (see instructions)	9c		
d Add lines 9a, 9b, and 9c			9d
10 Additional modifications (see instructions)			10
11 Total deductions and modifications. Add lines 9d and 10			11

Part III Tax Computation

12 Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. Estates and trusts, complete lines 18a-21. If zero or less, enter -0-			1,153,570.
Individuals:			
13 Modified adjusted gross income (see instructions)	13	1,243,614.	
14 Threshold based on filing status (see instructions)	14	250,000.	
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	993,614.	
16 Enter the smaller of line 12 or line 15			993,614.
17 Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include on your tax return (see instructions)			37,757.
Estates and Trusts:			
18a Net investment income (line 12 above)	18a		
b Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b		
c Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c		
19a Adjusted gross income (see instructions)	19a		
b Highest tax bracket for estates and trusts for the year (see instructions)	19b		
c Subtract line 19b from line 19a. If zero or less, enter -0-	19c		
20 Enter the smaller of line 18c or line 19c			20
21 Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and include on your tax return (see instructions)			21

Lines 5a-5d - Net Gains and Losses Worksheet

Keep for Your Records

	(A) Capital gains/(losses) Form 1040, Line 7, or Form 1041, Line 4	(B) Ordinary gains/(losses) Sch. 1 (1040), Line 4, or Form 1041, Line 7	Total of columns (A) + (B)
1. Beginning Net Gains and Losses	976,802.	-11,780.	Enter this amount on line 5a 965,022.
2. Gains and Losses excluded from Net Investment Income, use current year amounts for lines 2a-2g and 2i.			
(a) Enter net gains from the disposition of property used in a non-section 1411 trade or business (enter as negative amounts):			
Name of Trade or Business	Amount		
CATTLE	(7,500.)	(7,900.)	
BULL	(400.)		
(b) Enter net losses from the disposition of property used in a non-section 1411 trade or business (enter as positive amounts):			
Name of Trade or Business	Amount		
ABANDONED LAND		19,680.	
IMPROVEMENTS	19,680.		
(c) Enter net losses from a former passive activity (FPA) allowed by reason of section 469(f)(1)(A)			
(d) Gains recognized in the current year for payments received on an installment sale obligation or private annuity for the disposition of property used in a non-section 1411 trade or business			
(e) Enter the net gain attributable to the net unrealized appreciation (NUA) in employer securities			
(f) In the case of a QEF (other than a QEF held in a section 1411 trade or business) with respect to which a section 1.1411-10(g) election is not in effect, enter the amount treated as long-term capital gain for regular income tax purposes under section 1293(a)(1)(B)			
(g) Enter any other gains and losses included in net investment income that are not otherwise reported on Form 8960 and any other gains and losses excluded from net investment income reported on line 5a (enter excluded gains as a negative number and excluded losses as a positive number)			
(h) Enter the amount reported on line 2(i) of this worksheet from your prior tax year return calculations. Enter as a positive no.			
(i) If you do not have a capital loss carryover to next year, then skip this line and go to line 2(j). Otherwise, enter the lesser of (i)(1) or (i)(2) as a negative number			
(i)(1) If the sum of the amounts reported on lines 2(a)-2(h) and line 3(d), column (A), is greater than zero, enter that amount here. Otherwise, enter -0- on line 2(i) and go to line 2(j)			
OR			
(i)(2) The amount of capital loss carried over to next year (Schedule D (Form 1040), line 16, less the amount allowed as a current deduction on Schedule D (Form 1040), line 21) entered as a positive number			
(j) Sum of lines 2(a)-2(i)		11,780.	Enter this amount on line 5b 11,780.
3. Adjustment for Gains and Losses attributable to the disposition of interests in partnerships and S corporations			Enter this amount on line 5c
Add lines 1, 2(j) and 3	976,802.	0.	Enter this amount on line 5d 976,802.

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2021

Attachment Sequence No. 179

Attach to your tax return. SCHEDULE F- 2

Go to www.irs.gov/Form4562 for instructions and the latest information.

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

Business or activity to which this form relates

Identifying number

MICHAEL L. & TRACY G. GREENWELL

31 PRODUCE, LLC

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 main rows for Part I. Line 1: 1,050,000. Line 2: Total cost. Line 3: 2,620,000. Line 4: Reduction in limitation. Line 5: Dollar limitation. Line 6-7: Description and cost of property. Line 8: Total elected cost. Line 9: Tentative deduction. Line 10: Carryover of disallowed deduction. Line 11: Business income limitation. Line 12: Section 179 expense deduction. Line 13: Carryover of disallowed deduction to 2022.

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

Table with 3 rows for Part II. Line 14: Special depreciation allowance for qualified property placed in service during the tax year. Line 15: Property subject to section 168(f)(1) election. Line 16: Other depreciation (including ACRS).

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

Section A

Table with 2 rows for Section A. Line 17: MACRS deductions for assets placed in service in tax years beginning before 2021. Line 18: If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here.

Section B - Assets Placed in Service During 2021 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows include 3-year, 5-year, 7-year, 10-year, 15-year, 20-year, 25-year property, Residential rental property, and Nonresidential real property.

Section C - Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System

Table with 6 columns: (a) Class life, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows include 12-year, 30-year, and 40-year property.

Part IV Summary (See instructions.)

Table with 3 rows for Part IV. Line 21: Listed property. Line 22: Total. Line 23: For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost. Includes rows 25-29.

Section B - Information on Use of Vehicles

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

Table with 6 columns: (a) Vehicle, (b) Vehicle, (c) Vehicle, (d) Vehicle, (e) Vehicle, (f) Vehicle. Includes rows 30-36.

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

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

Table with 2 columns: Yes, No. Includes rows 37-41.

Part VI Amortization

Table with 6 columns: (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year. Includes rows 42-44.

**S Corporation Shareholder Stock and
Debt Basis Limitations**

2021

Attachment
Sequence No. **203**

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form7203 for instructions and the latest information.

Name(s) shown on return MICHAEL L. GREENWELL	Identifying number [REDACTED]
Name of S corporation BIG LEAGUE BUILDERS, INC	Employer identification number

Stock block (see instructions) ▶

Part I Shareholder Stock Basis

1 Stock basis at the beginning of the corporation's tax year		1	115,583.
2 Basis from any capital contributions made or additional stock acquired during the tax year		2	
3a Ordinary business income (enter losses in Part III)	3a		
b Net rental real estate income (enter losses in Part III)	3b		
c Other net rental income (enter losses in Part III)	3c		
d Interest income	3d	43.	
e Ordinary dividends	3e		
f Royalties	3f		
g Net capital gains (enter losses in Part III)	3g		
h Net section 1231 gain (enter losses in Part III)	3h		
i Other income (enter losses in Part III)	3i		
j Excess depletion adjustment	3j		
k Tax-exempt income	3k	2,729.	
l Recapture of business credits	3l		
m Other items that increase stock basis	3m		
4 Add lines 3a through 3m		4	2,772.
5 Stock basis before distributions. Add lines 1, 2, and 4		5	118,355.
6 Distributions (excluding dividend distributions) Note: If line 6 is larger than line 5, subtract line 5 from line 6 and report the result as a capital gain on Form 8949 and Schedule D. See instructions.		6	40,252.
7 Stock basis after distributions. Subtract line 6 from line 5. If the result is zero or less, enter -0-, skip lines 8 through 14, and enter -0- on line 15		7	78,103.
8a Nondeductible expenses	8a		
b Depletion for oil and gas	8b		
c Business credits (sections 50(c)(1) and (5))	8c		
9 Add lines 8a through 8c		9	
10 Stock basis before loss and deduction items. Subtract line 9 from line 7. If the result is zero or less, enter -0-, skip lines 11 through 14, and enter -0- on line 15		10	78,103.
11 Allowable loss and deduction items. Enter the amount from line 47, column (c)		11	9,271.
12 Debt basis restoration (see net increase in instructions for line 23)		12	
13 Other items that decrease stock basis		13	
14 Add lines 11, 12, and 13		14	9,271.
15 Stock basis at the end of the corporation's tax year. Subtract line 14 from line 10. If the result is zero or less, enter -0-		15	68,832.

Part II Shareholder Debt Basis

Section A - Amount of Debt (If more than three debts, see instructions.)

Description	Debt 1		Debt 2		Debt 3		Total
	<input type="checkbox"/> Formal note <input type="checkbox"/> Open account debt		<input type="checkbox"/> Formal note <input type="checkbox"/> Open account debt		<input type="checkbox"/> Formal note <input type="checkbox"/> Open account debt		
16 Loan balance at the beginning of the corporation's tax year		94,278.					94,278.
17 Additional loans (see instructions)							
18 Loan balance before repayment. Combine lines 16 and 17		94,278.					94,278.
19 Principal portion of debt repayment (this line doesn't include interest)							
20 Loan balance at the end of the corporation's tax year. Combine lines 18 and 19		94,278.					94,278.

Part II Shareholder Debt Basis (continued)

Section B - Adjustments to Debt Basis

Description	Debt 1	Debt 2	Debt 3	Total
21 Debt basis at the beginning of the corporation's tax year	94,278.			94,278.
22 Enter the amount, if any, from line 17				
23 Debt basis restoration (see instructions)				
24 Debt basis before repayment. Combine lines 21, 22, and 23	94,278.			94,278.
25 Divide line 24 by line 18	1.000000			1.000000
26 Nontaxable debt repayment. Multiply line 25 by line 19				
27 Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24	94,278.			94,278.
28 Nondeductible expenses and oil and gas depletion deductions in excess of stock basis				
29 Debt basis before losses and deductions. Subtract line 28 from line 27. If the result is zero or less, enter -0-	94,278.			94,278.
30 Allowable losses in excess of stock basis. Enter the amount from line 47, column (d)	0.			
31 Debt basis at the end of the corporation's tax year. Subtract line 30 from line 29. If the result is zero or less, enter -0-	94,278.			94,278.

Section C - Gain on Loan Repayment

32 Repayment. Enter the amount from line 19				
33 Nontaxable repayments. Enter the amount from line 26				
34 Reportable gain. Subtract line 33 from line 32				

Part III Shareholder Allowable Loss and Deduction Items

Description	(a) Current year losses and deductions	(b) Carryover amounts (column (e)) from the previous year	(c) Allowable loss from stock basis	(d) Allowable loss from debt basis	(e) Carryover amounts
35 Ordinary business loss	9,271.		9,271.		
36 Net rental real estate loss					
37 Other net rental loss					
38 Net capital loss					
39 Net section 1231 loss					
40 Other loss					
41 Section 179 deductions					
42 Charitable contributions					
43 Investment interest expense					
44 Section 59(e)(2) expenditures					
45 Other deductions					
46 Foreign taxes paid or accrued					
47 Total loss. Combine lines 35 through 46 for each column. Enter the total loss in column (c) on line 11 and enter the total loss in column (d) on line 30	9,271.		9,271.		

**ALTERNATIVE MINIMUM TAX
S Corporation Shareholder Stock and
Debt Basis Limitations**

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form7203 for instructions and the latest information.

Name(s) shown on return MICHAEL L. GREENWELL	Identifying number [REDACTED]
Name of S corporation BIG LEAGUE BUILDERS, INC	Employer identification number

Stock block (see instructions) ▶

Part I Shareholder Stock Basis

1 Stock basis at the beginning of the corporation's tax year		1	115,583.
2 Basis from any capital contributions made or additional stock acquired during the tax year		2	
3a Ordinary business income (enter losses in Part III)	3a		
b Net rental real estate income (enter losses in Part III)	3b		
c Other net rental income (enter losses in Part III)	3c		
d Interest income	3d	43.	
e Ordinary dividends	3e		
f Royalties	3f		
g Net capital gains (enter losses in Part III)	3g		
h Net section 1231 gain (enter losses in Part III)	3h		
i Other income (enter losses in Part III)	3i		
j Excess depletion adjustment	3j		
k Tax-exempt income	3k	2,729.	
l Recapture of business credits	3l		
m Other items that increase stock basis	3m		
4 Add lines 3a through 3m		4	2,772.
5 Stock basis before distributions. Add lines 1, 2, and 4		5	118,355.
6 Distributions (excluding dividend distributions) Note: If line 6 is larger than line 5, subtract line 5 from line 6 and report the result as a capital gain on Form 8949 and Schedule D. See instructions.		6	40,252.
7 Stock basis after distributions. Subtract line 6 from line 5. If the result is zero or less, enter -0-, skip lines 8 through 14, and enter -0- on line 15		7	78,103.
8a Nondeductible expenses	8a		
b Depletion for oil and gas	8b		
c Business credits (sections 50(c)(1) and (5))	8c		
9 Add lines 8a through 8c		9	
10 Stock basis before loss and deduction items. Subtract line 9 from line 7. If the result is zero or less, enter -0-, skip lines 11 through 14, and enter -0- on line 15		10	78,103.
11 Allowable loss and deduction items. Enter the amount from line 47, column (c)		11	9,271.
12 Debt basis restoration (see net increase in instructions for line 23)		12	
13 Other items that decrease stock basis		13	
14 Add lines 11, 12, and 13		14	9,271.
15 Stock basis at the end of the corporation's tax year. Subtract line 14 from line 10. If the result is zero or less, enter -0-		15	68,832.

Part II Shareholder Debt Basis

Section A - Amount of Debt (If more than three debts, see instructions.)

Description	Debt 1		Debt 2		Debt 3		Total
	<input type="checkbox"/> Formal note <input type="checkbox"/> Open account debt		<input type="checkbox"/> Formal note <input type="checkbox"/> Open account debt		<input type="checkbox"/> Formal note <input type="checkbox"/> Open account debt		
16 Loan balance at the beginning of the corporation's tax year		94,278.					94,278.
17 Additional loans (see instructions)							
18 Loan balance before repayment. Combine lines 16 and 17		94,278.					94,278.
19 Principal portion of debt repayment (this line doesn't include interest)							
20 Loan balance at the end of the corporation's tax year. Combine lines 18 and 19		94,278.					94,278.

Part II Shareholder Debt Basis (continued)

Section B - Adjustments to Debt Basis

Description	Debt 1	Debt 2	Debt 3	Total
21 Debt basis at the beginning of the corporation's tax year	94,278.			94,278.
22 Enter the amount, if any, from line 17				
23 Debt basis restoration (see instructions)				
24 Debt basis before repayment. Combine lines 21, 22, and 23	94,278.			94,278.
25 Divide line 24 by line 18	1.000000			1.000000
26 Nontaxable debt repayment. Multiply line 25 by line 19				
27 Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24	94,278.			94,278.
28 Nondeductible expenses and oil and gas depletion deductions in excess of stock basis				
29 Debt basis before losses and deductions. Subtract line 28 from line 27. If the result is zero or less, enter -0-	94,278.			94,278.
30 Allowable losses in excess of stock basis. Enter the amount from line 47, column (d)	0.			
31 Debt basis at the end of the corporation's tax year. Subtract line 30 from line 29. If the result is zero or less, enter -0-	94,278.			94,278.

Section C - Gain on Loan Repayment

32 Repayment. Enter the amount from line 19				
33 Nontaxable repayments. Enter the amount from line 26				
34 Reportable gain. Subtract line 33 from line 32				

Part III Shareholder Allowable Loss and Deduction Items

Description	(a) Current year losses and deductions	(b) Carryover amounts (column (e)) from the previous year	(c) Allowable loss from stock basis	(d) Allowable loss from debt basis	(e) Carryover amounts
35 Ordinary business loss	9,271.		9,271.		
36 Net rental real estate loss					
37 Other net rental loss					
38 Net capital loss					
39 Net section 1231 loss					
40 Other loss					
41 Section 179 deductions					
42 Charitable contributions					
43 Investment interest expense					
44 Section 59(e)(2) expenditures					
45 Other deductions					
46 Foreign taxes paid or accrued					
47 Total loss. Combine lines 35 through 46 for each column. Enter the total loss in column (c) on line 11 and enter the total loss in column (d) on line 30	9,271.		9,271.		

Form 1116

U.S. and Foreign Source Income Summary

NAME

MICHAEL L. & TRACY G. GREENWELL

INCOME TYPE	TOTAL	U.S.	FOREIGN PASSIVE
Compensation	26,000.	26,000.	
Dividends/Distributions	SEE STATEMENT 31	17,974.	8,382.
Interest	150,412.	150,412.	
Capital Gains	997,965.	997,965.	
Business/Profession	1,035,049.	1,035,049.	
Rent/Royalty			
State/Local Refunds			
Partnership/S Corporation			
Trust/Estate			
Other Income	75,095.	75,095.	
Gross Income	<u>2,310,877.</u>	<u>2,302,495.</u>	<u>8,382.</u>
Less:			
Section 911 Exclusion			
Capital Losses	21,163.	21,163.	
Capital Gains Tax Adjustment			
Total Income - Form 1116	<u>2,289,714.</u>	<u>2,281,332.</u>	<u>8,382.</u>
Deductions:			
Business/Profession Expenses	1,016,757.	1,016,757.	
Rent/Royalty Expenses			
Partnership/S Corporation Losses	9,271.	9,271.	
Trust/Estate Losses			
Capital Losses			
Non-capital Losses	11,780.	11,780.	
Individual Retirement Account			
Moving Expenses			
Self-employment Tax Deduction	1,292.	1,292.	
Self-employment Health Insurance			
Keogh Contributions			
Alimony			
Forfeited Interest			
Foreign Housing Deduction			
Other Adjustments	7,000.	7,000.	
Capital Gains Tax Adjustment			
Total Deductions	<u>1,046,100.</u>	<u>1,046,100.</u>	
Adjusted Gross Income	<u>1,243,614.</u>	<u>1,235,232.</u>	<u>8,382.</u>
Less Itemized Deductions:			
Specifically Allocated			
Home Mortgage Interest			
Other Interest			
Ratably Allocated	25,100.	25,009.	91.
Charitable Deduction if taking Standard Deduction	355.	355.	
Total Adjustments to Adjusted Gross Income	<u>25,455.</u>	<u>25,364.</u>	<u>91.</u>
Taxable Income	<u>1,218,159.</u>	<u>1,209,868.</u>	<u>8,291.</u>

Election to Capitalize Carrying Costs

Michael L. & Tracy G. Greenwell
18500 State Road 31
Alva, FL 33920

Taxpayer Identification Number: [REDACTED]

For the Year Ending December 31, 2021

Michael L. & Tracy G. Greenwell hereby elect, pursuant to IRC Sec. 266 and Reg. Sec. 1.266-1(b)(1)(ii), to capitalize the following charges incurred for the development or construction of real property prior to completion.

Description of Expenditure	Date Paid or Incurred	Amount
real estate taxes -sr 31	12/27/21	1,938
zoning costs- sr 31	Various	131,202

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

Michael L. & Tracy G. Greenwell
18500 State Road 31
Alva, FL 33920

Taxpayer Identification Number: [REDACTED]

For the Year Ending December 31, 2021

Michael L. & Tracy G. Greenwell are making the de minimis safe harbor election under Reg. Sec. 1.263(a)-1(f).

COPY



FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 1

T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
T BIG LEAGUE BUILDERS INC	26,000.	2,447.			1,612.	377.
TOTALS	26,000.	2,447.			1,612.	377.

FORM 1040 TAX-EXEMPT INTEREST STATEMENT 2

NAME OF PAYER	AMOUNT
MORGAN STANLEY-TAX EXEMPT	600.
MORGAN STANLEY-TAX EXEMPT	2,875.
MORGAN STANLEY-TAX EXEMPT OID	58.
TOTAL TO FORM 1040, LINE 2A	3,533.

FORM 1040 QUALIFIED DIVIDENDS STATEMENT 3

NAME OF PAYER	ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS
MORGAN STANLEY	9,223.	8,748.
MORGAN STANLEY	7,689.	7,604.
MORGAN STANLEY	5,034.	3,612.
MORGAN STANLEY	2,472.	1,349.
MORGAN STANLEY	101.	101.
MORGAN STANLEY	160.	160.
MORGAN STANLEY	193.	26.
TOTAL INCLUDED IN FORM 1040, LINE 3A		21,600.



FORM 1040 PENSIONS AND ANNUITIES STATEMENT 4

STATE STREET RETIREE SERVICES

AMOUNT RECEIVED THIS YEAR	75,095.	
NONTAXABLE AMOUNT		
CAPITAL GAIN DISTRIBUTION REPORTED ON SCH D		
		75,095.
TOTAL INCLUDED IN FORM 1040, LINE 5B		75,095.

FORM 1040 TAX STATEMENT 5

DESCRIPTION	AMOUNT
FROM QUALIFIED DIVIDENDS AND CAPITAL GAIN WORKSHEET	226,277.
TOTAL TO FORM 1040, LINE 16	226,277.

FORM 1040 FEDERAL INCOME TAX WITHHELD - FORM(S) W-2 STATEMENT 6

T S DESCRIPTION	AMOUNT
T BIG LEAGUE BUILDERS INC	2,447.
TOTAL TO FORM 1040, LINE 25A	2,447.

FORM 1040 CURRENT YEAR ESTIMATES AND AMOUNT APPLIED FROM PREVIOUS YEAR STATEMENT 7

DESCRIPTION	AMOUNT
1ST QTR ESTIMATE PAYMENT - JOINT	11,900.
2ND QTR ESTIMATE PAYMENT - JOINT	11,900.
3RD QTR ESTIMATE PAYMENT - JOINT	11,900.
4TH QTR ESTIMATE PAYMENT - JOINT	11,900.
TOTAL TO FORM 1040, LINE 26	47,600.

FORM 1040 FEDERAL INCOME TAX WITHHELD - FORM(S) 1099 STATEMENT 8

T S DESCRIPTION	AMOUNT
T STATE STREET RETIREE SERVICES	7,152.
TOTAL TO FORM 1040, LINE 25B	7,152.

SCHEDULE B INTEREST INCOME STATEMENT 9

NAME OF PAYER	AMOUNT
KINSTIN	150,000.
MORGAN STANLEY-OID	115.
MORGAN STANLEY	157.
MORGAN STANLEY-TAX EXEMPT	600.
MORGAN STANLEY	1.
MORGAN STANLEY	1.
MORGAN STANLEY	121.
MORGAN STANLEY-TAX EXEMPT	2,875.
MORGAN STANLEY-TAX EXEMPT OID	58.
MORGAN STANLEY-<\$1	
MORGAN STANLEY-<\$1	
MORGAN STANLEY	1.
MORGAN STANLEY	2.
FROM K-1 - BIG LEAGUE BUILDERS, INC	43.
TOTAL TO SCHEDULE B, LINE 1	153,974.

SCHEDULE B TAX-EXEMPT INTEREST STATEMENT 10

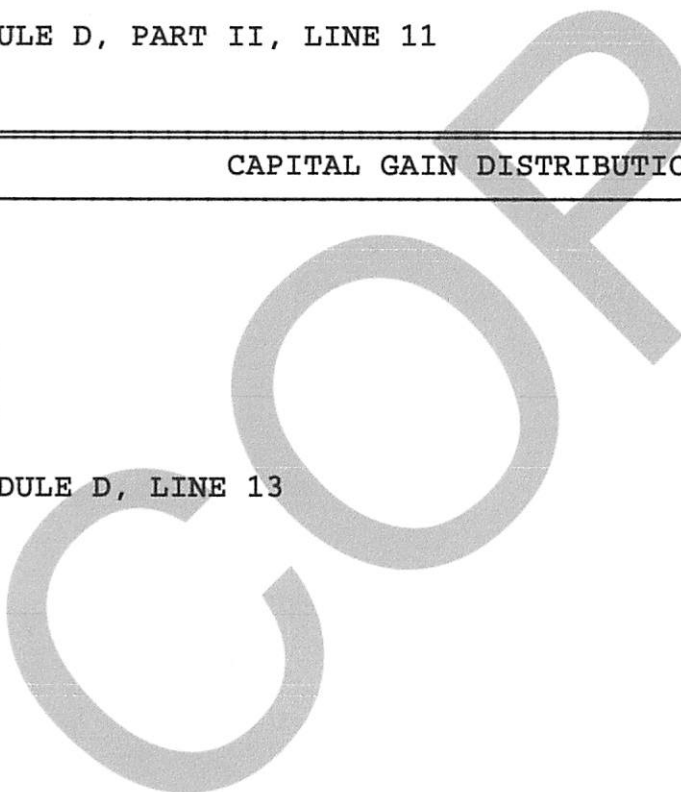
NAME OF PAYER	AMOUNT
MORGAN STANLEY-TAX EXEMPT	600.
MORGAN STANLEY-TAX EXEMPT	2,875.
MORGAN STANLEY-TAX EXEMPT OID	58.
TOTAL TAX-EXEMPT INTEREST TO SCHEDULE B, LINE 1	3,533.



SCHEDULE B		AMORTIZABLE BOND PREMIUM ADJUSTMENT	STATEMENT 11
NAME OF PAYER			AMOUNT
MORGAN STANLEY-TAX EXEMPT			29.
TOTAL ABP ADJUSTMENT TO SCHEDULE B, LINE 1			29.

SCHEDULE D		NET LONG-TERM GAIN OR LOSS FROM FORMS 4797, 2439, 6252, 4684, 6781 AND 8824	STATEMENT 12
DESCRIPTION OF PROPERTY	GAIN OR LOSS	28% GAIN	
INSTALLMENT SALE NO. 3	706,500.		
TOTAL TO SCHEDULE D, PART II, LINE 11		706,500.	

SCHEDULE D		CAPITAL GAIN DISTRIBUTIONS	STATEMENT 13
NAME OF PAYER	TOTAL CAPITAL GAIN	28% GAIN	
MORGAN STANLEY	123.		
MORGAN STANLEY	1,151.		
MORGAN STANLEY	52.		
TOTALS TO SCHEDULE D, LINE 13		1,326.	



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
3. 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"
6. ADD LINES 3 THROUGH 5
7. ENTER THE SMALLER OF LINE 6 OR THE GAIN FROM FORM 4797, LINE 7
8. ENTER THE AMOUNT, IF ANY, FROM FORM 4797, LINE 8
9. 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, REAL ESTATE INVESTMENT TRUST, OR MUTUAL FUND (OR OTHER REGULATED INVESTMENT COMPANY) OR IN CONNECTION WITH A FORM 1099-R
12. ENTER THE TOTAL OF ANY UNRECAPTURED SECTION 1250 GAIN FROM SALES (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 4797 FOR THE YEAR OF SALE
13. ADD LINES 9 THROUGH 12
14. IF YOU HAD ANY SECTION 1202 GAIN 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 ZERO OR A GAIN ENTER -0- -17,502.
16. ENTER YOUR LONG-TERM CAPITAL LOSS CARRYOVERS FROM SCHEDULE D, LINE 14, AND SCHEDULE K-1 (FORM 1041), BOX 11, CODE D
17. 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- 17,502.
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, LINE 19 0.

SCHEDULE F	OTHER EXPENSES	STATEMENT 15
DESCRIPTION		
	AMOUNT	
ACCOUNTING AND LEGAL		6,294.
BANK FEES		25,230.
LICENSES & PERMITS		2,688.
OFFICE SUPPLIES		2,351.
ADVERTISING		12,613.
CONTRACT LABOR		2,801.
MISCELLANEOUS RESALE ITEMS		463,212.
TELEPHONE EXPENSE		3,663.
PEST CONTROL		1,699.
POSTAGE AND SHIPPING		168.
PAYROLL SERVICE FEES		1,750.
SMALL TOOLS AND EQUIPMENT		1,500.
BUSINESS MEALS		229.
TOTAL TO SCHEDULE F, PART II, LINE 32		524,198.

SCHEDULE F	SALES OF LIVESTOCK AND OTHER ITEMS BOUGHT FOR RESALE			STATEMENT 16
DESCRIPTION	AMOUNT RECEIVED	COST	PROFIT/(LOSS)	
PRODUCE SALES	301,620.		301,620.	
MISC RETAIL SALES	651,879.		651,879.	
TOTALS TO SCHEDULE F, PART I	953,499.		953,499.	

SCHEDULE F	OTHER INCOME - CASH METHOD	STATEMENT 17
DESCRIPTION		
	AMOUNT	
SALES TAX COMMISSION		360.
CORONAVIRUS FOOD ASSISTANCE PROGRAM INCOME		
TOTAL TO SCHEDULE F, PART I, LINE 8		360.

SCHEDULE F SALES OF LIVESTOCK AND OTHER ITEMS BOUGHT FOR RESALE STATEMENT 18

DESCRIPTION	AMOUNT RECEIVED	COST	PROFIT/(LOSS)
CATTLE	76,755.		76,755.
TOTALS TO SCHEDULE F, PART I	76,755.		76,755.

SCHEDULE SE FARM INCOME STATEMENT 19

DESCRIPTION	AMOUNT
COWS	26,069.
PRODUCE	-8,984.
TOTAL TO SCHEDULE SE, LINE 1A	17,085.

SCHEDULE SE NON-FARM INCOME STATEMENT 20

DESCRIPTION	AMOUNT
RETAILS SALES	1,207.
TOTAL TO SCHEDULE SE, LINE 2	1,207.



PASSIVE INCOME

NAME OF COUNTRY IMPOSING TAX

DATE PAID	DATE ACCRUED	AMT/FOREIGN CURRENCY	AMOUNT IN U.S. DOLLARS			
			DIVIDENDS	RENT/ROYALTY	INTEREST	OTHER
OC						
1099 TAX		0.	478.			
OC						
1099 TAX		0.	155.			
OC						
1099 TAX		0.	322.			
OC						
1099 TAX		0.	43.			
OC						
OC						
			998.			

TOTAL TO FORM 1116, PART II, LINE 8 998.

PRIOR YEAR TAXES PAID IN THE CURRENT YEAR:

	FOREIGN AMT	CONV. RATE	U.S. AMT
2020			
2019			
2018			
2017			
2016			

TOTAL PRIOR YEAR TAXES PAID IN THE CURRENT YEAR _____

FORM 1116

FOREIGN TAX CREDIT CARRYOVER / CARRYBACK

STATEMENT 22

PASSIVE INCOME

YEAR OF FOREIGN TAX CREDIT	TOTAL FOREIGN TAXES PAID	FOREIGN TAX CR CLAIMED	FOREIGN TAX ADJUSTMENTS	BALANCE AVAILABLE
2020	785.	785.	0.	0.
2019	794.	794.	0.	0.
2018	1,090.	449.	0.	641.
2017	985.	0.	0.	985.
2016	995.	995.	0.	0.
2015	1,241.	855.	0.	386.
2014	1,872.	1,481.	0.	391.
2013	1,634.	1,634.	0.	0.
2012	1,734.	1,734.	0.	0.
2011	1,940.	1,940.	0.	0.
FOREIGN TAX CR CARRYBACK TO 2021				0.
TOTAL TO FORM 1116, PART III, LINE 10				2,403.

FORM 4797

ORDINARY GAINS AND LOSSES

STATEMENT 23

DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
3 DOOR GLASS FREEZER	12/21/12	07/30/21		2,996.	2,996.	0.
TAYLOR 794 ICE CREAM MACHINE	06/13/13	06/30/21		6,500.	6,500.	0.
TAYLOR 794 ICE CREAM MACHINE	07/02/13	06/30/21		6,500.	6,500.	0.
ABANDONED LAND IMPROVEMENTS	01/04/13	09/22/21		18,479.	38,159.	-19,680.
TOTAL TO 4797, PART II, LINE 10				34,475.	54,155.	-19,680.



FORM 4797

NONRECAPTURED NET SECTION 1231 LOSSES
FROM PRIOR YEARS

STATEMENT 24

<u>TAX YEAR</u>	<u>SECTION 1231 LOSSES</u>	<u>SECTION 1231 LOSSES RECAPTURED</u>	<u>NONRECAPTURED SECTION 1231 LOSSES</u>
2016			
2017			
2018			
2019			
2020	95.		95.
TOTAL TO FORM 4797, LINE 8	95.		95.

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1	ENTER: \$73,600 IF SINGLE OR HEAD OF HOUSEHOLD; \$114,600 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$57,300 IF MARRIED FILING SEPARATELY		114,600.
2	ENTER YOUR ALTERNATIVE MINIMUM TAXABLE INCOME (AMTI) FORM 6251, LINE 4	1,242,933.	
3	ENTER: \$523,600 IF SINGLE OR HEAD OF HOUSEHOLD; \$1,047,200 IF MARRIED FILING JOINTLY OR QUALIFYING WIDOW(ER); \$523,600 IF MARRIED FILING SEPARATELY	1,047,200.	
4	SUBTRACT LINE 3 FROM LINE 2. IF ZERO OR LESS ENTER -0-	<u>195,733.</u>	
5	MULTIPLY LINE 4 BY 25% (.25)		48,933.
6	SUBTRACT LINE 5 FROM LINE 1. IF ZERO OR LESS, ENTER -0-. ENTER THIS AMOUNT ON FORM 6251, LINE 5, AND GO TO FORM 6251, LINE 6		<u><u>65,667.</u></u>

COPY



FORM 1116 ALTERNATIVE MINIMUM TAX FOREIGN TAX CREDIT STATEMENT 26
CARRYOVER/CARRYBACK

PASSIVE INCOME

YEAR OF FOREIGN TAX CREDIT	TOTAL FOREIGN TAXES PAID	FOREIGN TAX CR CLAIMED	FOREIGN TAX ADJUSTMENTS	BALANCE AVAILABLE
2020	785.	785.	0.	0.
2019	794.	794.	0.	0.
2018	1,090.	0.	0.	1,090.
2017	985.	0.	0.	985.
2016	995.	973.	0.	22.
2015	1,241.	0.	0.	1,241.
2014	1,872.	693.	0.	1,083.
2013	1,634.	1,634.	0.	0.
2012	1,734.	1,734.	0.	0.
2011	1,940.	1,940.	0.	0.
FOREIGN TAX CR CARRYBACK TO 2021				0.
TOTAL TO FORM 1116 (AMT), PART III, LINE 10				4,421.

FORM 8995-A QUALIFIED REIT DIVIDENDS AND PTP INCOME STATEMENT 27

NAME OF ENTITY/ACTIVITY	REIT DIVIDENDS	PTP INCOME
MORGAN STANLEY	205.	
MORGAN STANLEY	85.	
MORGAN STANLEY	1,331.	
MORGAN STANLEY	10.	
TOTAL TO FORM 8995-A, LINE 28		1,631.

FORM 8995-A QUALIFIED BUSINESS INCOME STATEMENT 28
SCHEDULE C

ACTIVITY NAME	INCOME	LOSS REDUCTION	ADJUSTED QBI
MIKE GREENWELL	13,054.	13,054.	0.
YOUNG LIVING ESSENTIAL OILS	1,150.	1,150.	0.
BIG LEAGUE BUILDERS, INC	-9,271.		
31 PRODUCE, LLC	-8,984.		



FORM 8995-A SCHEDULE C QUALIFIED BUSINESS NET LOSS CARRYOVER FROM PRIOR YEARS STATEMENT 29

TRADE OR BUSINESS NAME	AMOUNT
TOTAL QUALIFIED BUSINESS LOSS FROM PRIOR YEARS	171,396.
TOTAL TO FORM 8995-A SCHEDULE C, LINE 2	171,396.

FORM 8960 TRADE OR BUSINESS INCOME STATEMENT 30

BIG LEAGUE BUILDERS, INC	9,271.
AMOUNT TO FORM 8960, LINE 4B	9,271.

FORM 1116 U.S. AND FOREIGN SOURCE INCOME SUMMARY FOREIGN DIVIDEND INCOME STATEMENT 31

DESCRIPTION	AMOUNT
MORGAN STANLEY	4,453.
MORGAN STANLEY	1,257.
MORGAN STANLEY	1,533.
MORGAN STANLEY	1,026.
MORGAN STANLEY	101.
MORGAN STANLEY	12.
TOTAL FOREIGN DIVIDEND INCOME	8,382.

FORM 1116 U.S. AND FOREIGN SOURCE INCOME SUMMARY TOTAL PARTNERSHIP/S-CORPORATION INCOME/LOSS STATEMENT 32

DESCRIPTION	INCOME	LOSS
BIG LEAGUE BUILDERS, INC		-9,271.
TOTAL PARTNERSHIP/S-CORPORATION INCOME/LOSS		-9,271.

2021 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - MICHAEL L. & TRACY G. GREENWELL

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	(D) CATTLE	021113	150DB	5.00	17	13,513.			13,513.	13,513.		0.
	(D) LAND IMPROVEMENTS-ROAD	010413	150DB	15.00	17	17,600.			17,600.	9,805.		520.
	(D) FENCE POST	020913	150DB	15.00	17	5,457.			5,457.	3,040.		161.
	(D) TRUSSES FOR BARN	030613	SL	39.00	17	10,602.			10,602.	2,119.		193.
	(D) PIPE	030613	150DB	15.00	17	4,500.			4,500.	2,508.		133.
	(D) BULL	070117	150DB	5.00	17	2,500.			2,500.	1,875.		209.
	TOTAL SCH F DEPRECIATION					54,172.			54,172.	32,860.		1,216.

2022 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - MICHAEL L. & TRACY G. GREENWELL

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	TOTAL SCH F DEPRECIATION				0.		0.	0.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone