FORM 6 — FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS — 2021

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

FOR OFFICE USE ONLY:

LAST NAME — FIRST NAME — MIDDLE NAME:
Fisher-Lamar-Paul

MAILING ADDRESS:
290 S.E. 5th Terrace

CITY: Pompano Beach | ZIP: 33060 | COUNTY: Broward

NAME OF AGENCY:

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
Broward County Commissioner-District 4

CHECK IF THIS IS A FILING BY A CANDIDATE ☑

PROCESSED
FLORIDA COMMISSION ON ETHICS
JUN 20 2022
RECEIVED
71304

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 December 31, 20 21 was $ $4,987,000.00.

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 $ _____

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
See attached statement of financial condition	

PART C -- LIABILITIES

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

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Centennial Bank: Building & Parking Lot (100%): 2112 E. Atl. Blvd., Pompano Bch., FL	$230,605.99
Private Building Mortgage (33.3%): 18 S. Fed. Hwy., Pompano Bch., FL	$200,000.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY

PART D -- INCOME

Identify each separate source and amount of income which exceeded $1,000 during the year, including secondary sources of income. Or attach a complete copy of your 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	Fisher Auction Co., Inc.	Fisher Auctions, LLC	Fisher McClellan RE, LLC
ADDRESS OF BUSINESS ENTITY	2112 E. Atl. Blvd., PB, FL	290 SE 5 Terr., PB, FL	2112 E. Atl. Blvd., PB, FL
PRINCIPAL BUSINESS ACTIVITY	Real Estate Brokerage	Real Estate Brokerage	Real Estate Brokerage
POSITION HELD WITH ENTITY	President / CEO	Principal Broker	Managing Member
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	100%	100%	50%
NATURE OF MY OWNERSHIP INTEREST	Own & Operate Firm	Own & Operate Firm	Manage Firm

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 Broward

Sworn to (or affirmed) and subscribed before me by means of ☑ physical presence or ☐ online notarization, this 9th day of June, 2022 by Lamar Paul Fisher.

(Signature of Notary Public--State of Florida)

Andre' LaBauve
(Print, Type, or Stamp Commissioned Name of Notary Public)

ANDRE' LABAUVE
Commission # GG 249904
Expires October 15, 2022
Bonded Thru Troy Fain Insurance 800-385-7019

Personally Known ✓ 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 this form for you, he or 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 ☐

CE FORM 6 - Effective June 2, 2022
Incorporated by reference in Rule 34-8.002(1), F.A.C.

FORM 6 – FULL AND PUBLIC DISCLOSURE OF FINANCIAL INTERESTS

PART B – ASSETS: See attached Stocks and Bonds Statements

-Fisher Auction Company, Inc.: Common Stock valued at $800,000.00 (Own 100%)
-Centennial Bank: Stock valued at $25,000.00 in the Profit Sharing of Fisher Auction Company, Inc.
-Residence: 290 S.E. 5th Terrace, Pompano Beach, FL valued at $1,200,000.00 (Own Jointly with Wife)
-Cooperative Apartment: 1041 Hillsboro Mile, E20, Hillsboro Beach, FL valued at $230,000.00 (Own Jointly with Wife-Stock Certificate)
-Building and Parking Lot: 2112 E. Atlantic Boulevard & 20 S. Federal Highway, Pompano Beach, FL valued at $800,000.00 (100% Ownership through Fisher Auctions, LLC)
-Building: 18 .S Federal Highway, Pompano Beach, FL valued at $750,000.00 (Own 1/3 through 18 S Federal LLC or $350,000.00)

PART C – LIABILITIES: (Additional)

-Mercedes Auto Lease: $1,665.57 Per Month
-Lexus Auto Lease: $578.05 Per Month
-Ford F150 Truck: $500.00 Per Month (Owing Balance $13,000)

PART E – INTERESTS IN SPECIFIED BUSINESSES

Fisher Real Estate Services, LLC
2112 E. Atlantic Boulevard, Pompano Beach, FL 33062
Real Estate Brokerage
Principal Broker
100%
Own and Operate Firm

LAMAR P. AND SUZAN P. FISHER
STATEMENT OF FINANCIAL CONDITION
December 31, 2021

ASSETS:

Cash	$637,000
Investment in closely held corporations:	
Common Stock, Fisher Auction Co., Inc., 100% owned	$800,000
Individual retirement accounts;	$25,000
Profit Sharing Plan & Trust;	$825,000
Other assets:	
Personal Resident (Jointly Owned with Wife)	$1,200,000
Cooperative Apartment (Jointly Owned with Wife)	$230,000
Equity in Vehicles	$75,000
Furniture, jewelry, collectibles and other personal property	$45,000
Fisher Auctions, LLC	
Office Building & Vacant Lot	$800,000
18 S Federal LLC	
33% ownership of building valued at $750K	$350,000
Total Assets	**$4,987,000**

LIABILITIES AND NET WORTH

LIABILITIES:

Mortgage note payable on Office Building & Vacant Lot	$230,606
Mortgage note payable on 18 S Federal LLC 33% Liability	$200,000
Total Liabilities	$430,606

NET WORTH

Net Worth	$4,556,394
Total liabilities and net worth	**$4,987,000**

Lamar P. Fisher

LAMAR FISHER [redacted] **As of December 31, 2021 | Reporting Currency: USD**

Product/ Security Description	Quantity	Avg. Unit Cost ($)/ Total Cost ($)	Price ($)	MKT VAL ($)	Unrealized Gain/Loss ($)	Accrued Income ($)	Estimated Annual Income ($)	Current Yield (%)/ Yield on Cost (%)	% of Portfolio
Cash, MMF and Bank Deposits		-		**835.32**	-	-	**0.04**		**4.02**
BANK DEPOSIT PROGRAM	835.32	-	1.000	835.32	-	-	0.04	-	4.02
		-						-	
Symbol: BDPS									
Unit Investment Trusts		**18,823.11**		**19,923.55**	**1,100.44**	-	**508.26**		**95.98**
UNIT MORGAN STANLEY	869.00	12.11	12.837	11,155.30	630.58	-	492.36	-	53.74
STOCKS FOR2023		10,524.72						-	
Symbol: MSEQ23, Div$: 0.07									
UNIT MORGAN STANLEY	783.00	10.60	11.198	8,768.25	469.86	-	15.90	-	42.24
SEEKING THE NEXT FAANGS 2		8,298.39						-	
Symbol: MSSNF2, Div$: 0.03									
Total Portfolio:		**18,823.11**		**20,758.87**	**1,100.44**	-	**508.30**		**100.00**

Although price is displayed only to three decimal places, calculation of Market Value is computed using the full price in our database, which may carry out beyond three decimal places. Unrealized Gain/Loss value does not reflect interest and dividend accruals. Unrealized Gain/Loss totals only reflect positions that have both Cost Basis and Market Value/ Total Value information available.

LAMAR FISHER [redacted] **As of December 31, 2021 | Reporting Currency: USD**

Product/ Security Description	Quantity	Avg. Unit Cost ($)/ Total Cost ($)	Price ($)	MKT VAL ($)	Unrealized Gain/Loss ($)	Accrued Income ($)	Estimated Annual Income ($)	Current Yield (%)/ Yield on Cost (%)	% of Portfolio
Annuities and Insurance		-		**192,680.35**	-	-	-		**100.00**
ALLIANZ VISION	150,000.00	-	-	192,680.35	-	-	-	-	100.00
		-						-	
Cusip: 018817155, Net Invested Premium($): 150000.0000, Gross Accumulated Value: 192680.3499									
Total Portfolio:		-		**192,680.35**	-	-	-		**100.00**

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FISHER AUCTION CO., INC [redacted] **As of December 31, 2021 | Reporting Currency: USD**

Product/ Security Description	Quantity	Avg. Unit Cost ($)/ Total Cost ($)	Price ($)	MKT VAL ($)	Unrealized Gain/Loss ($)	Accrued Income ($)	Estimated Annual Income ($)	Current Yield (%)/ Yield on Cost (%)	% of Portfolio
Cash, MMF and Bank Deposits		-		**4,431.02**	-	-	**0.15**		**0.61**
Cash	303.49	-	1.000	303.49	-	-	-	-	0.04
		-						-	
BANK DEPOSIT PROGRAM	4,127.53	-	1.000	4,127.53	-	-	0.15	-	0.57
		-						-	
Symbol: BDPS									
Exchange Traded/ Closed End Funds		**87,517.52**		**118,563.32**	**31,045.80**	-	**1,974.82**		**16.32**
ISHARES INC MSCI JAPAN ETF	315.00	62.91	66.960	21,092.40	1,276.18	-	438.00	2.08	2.90
		19,816.22						2.21	
Symbol: EWJ, Curr Yield: 2.080%, Div$: 1.39									
ISHARES CORE MSCI EAFE ETF	229.00	61.89	74.640	17,092.56	2,919.80	-	308.12	3.31	2.35
		14,172.76						3.99	
Symbol: IEFA, Curr Yield: 3.310%, Div$: 2.48									
ISHARES CORE MSCI EMERGING	247.00	52.53	59.860	14,785.42	1,810.17	-	452.00	3.06	2.03
		12,975.25						3.49	
Symbol: IEMG, Curr Yield: 3.060%, Div$: 1.83									
ISHARES RUSSELL 1000 VALUE ETF	225.00	119.11	167.930	37,784.25	10,984.26	-	632.05	1.62	5.20
		26,799.99						2.28	
Symbol: IWD, Curr Yield: 1.620%, Div$: 2.73									
ISHARES RUSSELL 1000 GRW ETF	91.00	151.14	305.590	27,808.69	14,055.39	-	144.65	0.49	3.83
		13,753.30						0.99	
Symbol: IWF, Curr Yield: 0.490%, Div$: 1.51									
Mutual Funds		**571,348.79**		**603,652.55**	**32,303.79**	-	**11,731.49**		**83.07**
BLACKSTONE ALT MULT-STRAT INST	5,678.58	10.80	10.600	60,192.94	-1,134.95	-	-	3.01	8.28
		61,327.89						2.95	
Symbol: BXMIX, Div$: 0.32									
COHEN & STEERS GLB RLTY FOC I	237.32	58.81	66.480	15,777.23	1,820.25	-	536.00	3.39	2.17
		13,956.98						3.83	
Symbol: CSSPX, Div$: 2.26									
E V INCOME FUND OF BOSTON I	2,525.58	5.77	5.600	14,143.23	-438.87	-	793.13	5.33	1.95
		14,582.09						5.17	
Symbol: EIBIX, Div$: 0.30									
E V ATLANTA CAP SMID CAP I	349.57	41.93	41.240	14,416.39	-240.52	-	-	-	1.98
		14,656.92						-	
Symbol: EISMX									

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FISHER AUCTION CO., INC [redacted] - [redacted]..

As of December 31, 2021 | Reporting Currency: USD

Product/ Security Description	Quantity	Avg. Unit Cost ($)/ Total Cost ($)	Price ($)	MKT VAL ($)	Unrealized Gain/Loss ($)	Accrued Income ($)	Estimated Annual Income ($)	Current Yield (%)/ Yield on Cost (%)	% of Portfolio
Mutual Funds (Continued)		**571,348.79**		**603,652.55**	**32,303.79**	-	**11,731.49**		**83.07**
GOLDMAN SACHS ABSLT RET TRCK I *Symbol: GJRTX*	6,130.65	10.32 63,275.97	9.800	60,080.38	-3,195.58	-	-	- -	8.27
JOHN HANCOCK INTL GROWTH I *Symbol: GOGIX, Div$: 0.29*	450.34	29.44 13,256.40	34.850	15,694.45	2,438.06	-	130.00	0.82 0.97	2.16
ABERDEEN US SMALL CAP EQ INST *Symbol: GSCIX*	484.53	46.87 22,710.93	44.400	21,513.27	-1,197.66	-	-	- -	2.96
COLUMBIA DIVIDEND INCOME INST *Symbol: GSFTX, Div$: 0.46*	485.34	22.70 11,017.10	31.620	15,346.29	4,329.19	-	243.09	1.46 2.03	2.11
GOLDMAN SACHS GQG INTL OPP I *Symbol: GSIMX, Div$: 0.44*	1,231.53	15.26 18,793.20	19.600	24,138.07	5,344.87	-	539.00	2.23 2.86	3.32
JPMORGAN VALUE ADVANTAGE I *Symbol: JVASX, Div$: 0.40*	372.30	34.65 12,901.92	39.870	14,843.56	1,941.64	-	148.00	0.99 1.14	2.04
LOOMIS GROWTH Y *Symbol: LSGRX*	762.21	16.85 12,845.56	26.210	19,977.39	7,131.83	-	-	- -	2.75
BLACKROCK TOTAL RET I *Symbol: MAHQX, Div$: 0.24*	7,868.10	11.93 93,858.98	11.840	93,158.26	-700.72	-	1,941.38	2.02 2.01	12.82
OAKMARK INTERNATIONAL INST *Symbol: OANIX, Div$: 0.42*	780.59	25.36 19,796.20	28.040	21,887.83	2,091.63	-	331.00	1.51 1.67	3.01
PIMCO COMM REAL RET STRAT I2 *Symbol: PCRPX, Div$: 0.15*	3,556.27	4.78 16,992.52	6.310	22,440.04	5,447.53	-	3,393.57	2.31 3.05	3.09
PIMCO SHORT TERM I2 *Symbol: PTSPX, Div$: 0.05*	7,225.86	9.84 71,120.16	9.770	70,596.63	-523.53	-	521.20	0.53 0.53	9.72
HARTFORD SCHRODER EM MKT EQ I	1,432.90	15.51 22,227.68	19.070	27,325.42	5,097.74	-	330.00	1.20 1.48	3.76

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FISHER AUCTION CO., INC [redacted] - [redacted] As of December 31, 2021 | Reporting Currency: USD

Product/ Security Description	Quantity	Avg. Unit Cost ($)/ Total Cost ($)	Price ($)	MKT VAL ($)	Unrealized Gain/Loss ($)	Accrued Income ($)	Estimated Annual Income ($)	Current Yield (%)/ Yield on Cost (%)	% of Portfolio
Mutual Funds (Continued)		**571,348.79**		**603,652.55**	**32,303.79**	-	**11,731.49**		**83.07**
Symbol: SEMNX, Div$: 0.23									
TORTOISE MLP & PIPELINE INST	1,398.50	9.98 13,956.99	11.230	15,705.11	1,748.12	-	809.44	4.28 4.82	2.16
Symbol: TORIX, Div$: 0.48									
WESTERN ASSET CORE PLUS BD I	6,410.74	11.55 74,071.30	11.920	76,416.06	2,344.76	-	2,015.68	2.45 2.53	10.52
Symbol: WACPX, Div$: 0.29									
Total Portfolio:		**658,866.31**		**726,646.89**	**63,349.59**	-	**13,706.46**		**100.00**

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a Employee's SSN [redacted]	b Employer identification number (EIN) [redacted]			OMB No. 1545-0008
c Employer's name, address, and ZIP code FISHER AUCTION CO. FISHER AUCTION CO., INC. 2112 E. ATLANTIC BLVD. POMPANO BEACH FL 33062-5208	1 Wgs, tips, other compn 221690.00	2 Fed inc tax withheld 115625.42	3 Social security wages 142800.00	Form **W-2** Wage and Tax Statement **2021**
	4 SS tax withheld 8853.60	5 Medicare wages & tips 247690.00	6 Medicare tax withheld 4020.72	
	7 Social security tips	8 Allocated tips	9	
d Control number	10 Depdnt care benefits	11 Nonqualified plans	12a D 26000.00	
e Employee's name, address, and ZIP code Suff. LAMAR P FISHER, SR 290 SE 5TH TERRACE POMPANO BEACH FL 33060	13 Statutory employee ☐ Retirement plan ☒ Third-party sick pay ☐	14 Other	12b 12c 12d	Copy B To Be Filed with Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service.

15 State	Employer's state ID number	16 State wages, tips, etc	17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name

REV 12/17/21 QBDT — Department of the Treasury — IRS

a Employee's SSN [redacted]	b Employer identification number (EIN) [redacted]			OMB No. 1545-0008
c Employer's name, address, and ZIP code FISHER AUCTION CO. FISHER AUCTION CO., INC. 2112 E. ATLANTIC BLVD. POMPANO BEACH FL 33062-5208	1 Wgs, tips, other compn 15080.00	2 Fed inc tax withheld 312.00	3 Social security wages 15080.00	Form **W-2** Wage and Tax Statement **2021**
	4 SS tax withheld 934.96	5 Medicare wages & tips 15080.00	6 Medicare tax withheld 218.66	
	7 Social security tips	8 Allocated tips	9	
d Control number	10 Depdnt care benefits	11 Nonqualified plans	12a	
e Employee's name, address, and ZIP code Suff. SUZAN P FISHER 290 SE 5 TERRACE POMPANO BEACH FL 33060	13 Statutory employee ☐ Retirement plan ☐ Third-party sick pay ☐	14 Other	12b 12c 12d	Copy B To Be Filed with Employee's FEDERAL Tax Return This information is being furnished to the Internal Revenue Service.

15 State	Employer's state ID number	16 State wages, tips, etc	17 State income tax	18 Local wages, tips, etc	19 Local income tax	20 Locality name

REV 12/17/21 QBDT — Department of the Treasury — IRS

Form **W-2 Wage and Tax Statement** 2021

	7 Social security tips	1 Wages, tips, other comp. 107987.47	2 Federal income tax withheld 19015.40
c Employer's name, address, and ZIP code BROWARD CTY GOVT 115 S. ANDREWS AVENUE FORT LAUDERDALE FL 33301-4800	8 Allocated tips	3 Social security wages 111142.70	4 Social security tax withheld 6890.85
	9	5 Medicare wages and tips 111142.70	6 Medicare tax withheld 1611.57
	10 Dependent care benefits	11 Nonqualified plans	12a W 2500.00
e Employee's name, address, and ZIP code LAMAR P FISHER 290 SE 5 TERR POMPANO BEACH FL 33060	13 Statutory employee: Retirement plan: X; Third-party sick pay	14 Other FRS EE 3155.23 Relief 100.00	12b DD 22964.76
	b Employer identification number (EIN) [redacted]		12c
	a Employee's social security no. [redacted]		12d

15 State	Employer's state I.D. no.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return — L67 — OMB No. 1545-0008 — 5206 — Dept. of the Treasury - IRS

Form **1040** Department of the Treasury - Internal Revenue Service (99) **U.S. Individual Income Tax Return** **2021** OMB No. 1545-0074 IRS Use Only - Do not write or staple in this space.

Filing Status ☐ Single ☒ 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 ▶

Your first name and middle initial	Last name
LAMAR P.	FISHER
If joint return, spouse's first name and middle initial	Last name
SUZAN P.	FISHER

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.
290 S.E. 5TH TERRACE

City, town, or post office. If you have a foreign address, also complete spaces below. State ZIP code
POMPANO BEACH FL 33060

Foreign country name | Foreign province/state/county | Foreign postal code

Presidential Election Campaign Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund. ☒ You ☐ Spouse

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent
☐ 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

Dependents (see instructions): If more than four dependents, see instr. and check here ▶☐

(1) First name Last name	(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see instructions): Child tax credit	Credit for other dependents

Attach Sch. B if required.

1	Wages, salaries, tips, etc. Attach Form(s) W-2			STMT 1	1	344,757.
2a	Tax-exempt interest	2a		b Taxable interest	2b	854.
3a	Qualified dividends	3a		b Ordinary dividends	3b	
4a	IRA distributions	4a		b Taxable amount	4b	
5a	Pensions and annuities	5a		b Taxable amount	5b	
6a	Social security benefits	6a		b Taxable amount	6b	
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶☐				7	
8	Other income from Schedule 1, line 10				8	417,158.
9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income** ▶				9	762,769.
10	Adjustments to income from Schedule 1, line 26				10	
11	Subtract line 10 from line 9. This is your **adjusted gross income** ▶				11	762,769.
12a	**Standard deduction or itemized deductions** (from Schedule A)	12a	59,123.			
b	Charitable contributions if you take the standard deduction (see instr.)	12b				
c	Add lines 12a and 12b				12c	59,123.
13	Qualified business income deduction from Form 8995 or Form 8995-A				13	73,709.
14	Add lines 12c and 13				14	132,832.
15	**Taxable income.** Subtract line 14 from line 11. If zero or less, enter -0-				15	629,937.

Standard Deduction for -
- Single or Married filing separately, $12,550
- Married filing jointly or Qualifying widow(er), $25,100
- Head of household, $18,800
- If you checked any box under Standard Deduction, see instructions.

LHA **For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.** Form **1040** (2021)

113921 12-10-21

16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐			16	169,599.
17	Amount from Schedule 2, line 3			17	
18	Add lines 16 and 17			18	169,599.
19	Nonrefundable child tax credit or credit for other dependents from Schedule 8812			19	
20	Amount from Schedule 3, line 8			20	
21	Add lines 19 and 20			21	
22	Subtract line 21 from line 18. If zero or less, enter -0-			22	169,599.
23	Other taxes, including self-employment tax, from Schedule 2, line 21			23	1,147.
24	Add lines 22 and 23. This is your **total tax** ▶			24	170,746.
25	Federal income tax withheld from:				
a	Form(s) W-2 SEE STATEMENT 2	25a	134,952.		
b	Form(s) 1099	25b			
c	Other forms (see instructions) SEE STATEMENT 3	25c	429.		
d	Add lines 25a through 25c			25d	135,381.
26	2021 estimated tax payments and amount applied from 2020 return			26	
27a	Earned income credit (EIC)	27a			
	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. ▶ ☐				
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	6,891.		
32	Add lines 27a and 28 through 31. These are your **total other payments and refundable credits** ▶			32	6,891.
33	Add lines 25d, 26, and 32. These are your **total payments** ▶			33	142,272.
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 ▶ ☐			35a	
b	▶ Routing number ▶ c Type: ☐ Checking ☐ Savings				
d	▶ Account number				
36	Amount of line 34 you want **applied to your 2022 estimated tax** ▶	36			
37	**Amount you owe.** Subtract line 33 from line 24. For details on how to pay, see instructions ▶			37	28,474.
38	Estimated tax penalty (see instructions) ▶	38			

Refund — Direct deposit? See instructions.

Amount You Owe

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 ▶ JOSEPH D. LEO | Phone no. ▶ 954-771-0896 | Personal identification number (PIN) ▶ [redacted]

Sign Here

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

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) ▶
		EXECUTIVE	
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) ▶
		HOMEMAKER	

Joint return? See instructions. Keep a copy for your records.

Phone no. 954-942-0917 | Email address

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if:
JOSEPH D. LEO	JOSEPH D. LEO	04/13/22	P00425026	☐ Self-employed

Firm's name ▶ KEEFE, MCCULLOUGH & CO., LLP, C.P.A.'S | Phone no. 954-771-0896

Firm's address ▶ 6550 N FEDERAL HIGHWAY, SUITE 410, FT. LAUDERDALE, FL 33308 | Firm's EIN ▶ 59-1363792

SCHEDULE 1 (Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

▶ 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. **01**

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

LAMAR P. & SUZAN P. FISHER

Your social security number

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	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E			5	417,158.
6	Farm income or (loss). Attach Schedule F			6	
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 ABLE 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	417,158.

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

Schedule 1 (Form 1040) 2021

114141 12-08-21

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	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
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	

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

LAMAR P. & SUZAN P. FISHER

Your social security number

Part I Tax

1	Alternative minimum tax. Attach Form 6251	1	0.
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	0.

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE			4	
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	1,115.
12	Net investment income tax. Attach Form 8960			12	32.
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)

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	1,147.

Schedule 2 (Form 1040) 2021

SCHEDULE 3
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Credits and Payments

▶ 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. 03

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
LAMAR P. & SUZAN P. FISHER

Your social security number

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required		1	
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	0.

(continued on page 2)

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 STMT 4			11	6,891.
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	6,891.

Recovery Rebate Credit Worksheet - Line 30

Name(s) shown on return	Your SSN
LAMAR P. & SUZAN P. FISHER	

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.
   - [X] **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?
   - [X] **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
   - [X] **Yes.** Enter the amount from line 11 of Form 1040 or 1040-SR and go to line 10 ..... **9.** 762,769.
   - [ ] **No.** Enter the amount from line 8 on line 12 and skip lines 10 and 11.
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
    - [X] **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* 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.**

Form **2210**

Department of the Treasury
Internal Revenue Service

Underpayment of Estimated Tax by Individuals, Estates, and Trusts

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

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

OMB No.1545-0140

2021

Attachment Sequence No. 06

Name(s) shown on tax return

LAMAR P. & SUZAN P. FISHER

Identifying number

Do You Have To File Form 2210?

Complete lines 1 through 7 below. Is line 4 or line 7 less than $1,000? — Yes → **Don't file Form 2210.** You don't owe a penalty.

No ↓

Complete lines 8 and 9 below. Is line 6 equal to or more than line 9? — Yes → You **don't** owe a penalty. **Don't** file Form 2210 unless **box E** in Part II applies, then file page 1 of Form 2210.

No ↓

You may owe a penalty. Does any box in Part II below apply? — Yes → You **must** file Form 2210. Does box **B, C,** or **D** in Part II apply?

No ↓

Don't file Form 2210. You aren't required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III as a worksheet and enter your penalty amount on your tax return, but **don't file Form 2210.**

No → You **aren't** required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III as a worksheet and enter your penalty amount on your tax return, but **file only page 1 of Form 2210.**

Yes → You must figure your penalty.

Part I Required Annual Payment

1	Enter your 2021 tax after credits from Form 1040, 1040-SR, or 1040-NR, line 22. (See the instructions if not filing Form 1040.)	1	169,599.
2	Other taxes, including self-employment tax and, if applicable, Additional Medicare Tax and/or Net Investment Income Tax (see instructions)	2	1,147.
3	Other payments and refundable credits (see instructions)	3	( )
4	Current year tax. Combine lines 1, 2, and 3. If less than $1,000, **stop;** you don't owe a penalty. **Don't** file Form 2210	4	170,746.
5	Multiply line 4 by 90% (0.90) — 5: 153,671.	6	142,272.
6	Withholding taxes. **Don't** include estimated tax payments. See instructions	7	28,474.
7	Subtract line 6 from line 4. If less than $1,000, **stop;** you don't owe a penalty. **Don't** file Form 2210	8	77,061.
8	Maximum required annual payment based on prior year's tax (see instructions)	9	77,061.
9	**Required annual payment.** Enter the **smaller** of line 5 or line 8		

Next: Is line 9 more than line 6?

☐ **No.** You **don't** owe a penalty. **Don't** file Form 2210 unless box E below applies.

☐ **Yes.** You may owe a penalty, but **don't** file Form 2210 unless one or more boxes in Part II below applies.

- If box **B, C,** or **D** applies, you must figure your penalty and file Form 2210.
- If box **A** or **E** applies (but not **B, C,** or **D**), file only page 1 of Form 2210. You **aren't** required to figure your penalty; the IRS will figure it and send you a bill for any unpaid amount. If you want to figure your penalty, you may use Part III as a worksheet and enter your penalty on your tax return, but **file only page 1 of Form 2210.**

Part II Reasons for Filing. Check applicable boxes. If none apply, **don't** file Form 2210.

A ☐ You request a **waiver** (see instructions) of your entire penalty. You must check this box and file page 1 of Form 2210, but you aren't required to figure your penalty.

B ☐ You request a **waiver** (see instructions) of part of your penalty. You must figure your penalty and waiver amount and file Form 2210.

C ☐ Your income varied during the year and your penalty is reduced or eliminated when figured using the **annualized income installment method.** You must figure the penalty using Schedule AI and file Form 2210.

D ☐ Your penalty is lower when figured by treating the federal income tax withheld from your income as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210.

E ☐ You filed or are filing a joint return for either 2020 or 2021, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 2210, but you **aren't** required to figure your penalty (unless box **B, C,** or **D** applies).

SCHEDULE A (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Itemized Deductions

▶ Go to www.irs.gov/ScheduleA for instructions and the latest information.
▶ Attach to Form 1040 or 1040-SR.
Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

2021

Attachment Sequence No. **07**

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

Your social security number

LAMAR P. & SUZAN P. FISHER

Medical and Dental Expenses		**Caution:** Do not include expenses reimbursed or paid by others.			
	1	Medical and dental expenses (see instructions)	1		
	2	Enter amount from Form 1040 or 1040-SR, line 11 [2]			
	3	Multiply line 2 by 7.5% (0.075)	3		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-		4	
Taxes You Paid	5	State and local taxes.			
	a	State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box SEE STATEMENT 6 ▶ [X]	5a	2,012.	
	b	State and local real estate taxes (see instructions)	5b	8,671.	
	c	State and local personal property taxes	5c		
	d	Add lines 5a through 5c	5d	10,683.	
	e	Enter the smaller of line 5d or $10,000 ($5,000 if married filing separately)	5e	10,000.	
	6	Other taxes. List type and amount ▶	6		
	7	Add lines 5e and 6		7	10,000.
Interest You Paid	8	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box ▶ [ ]			
Caution: Your mortgage interest deduction may be limited (see instructions).	a	Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a		
	b	Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ▶	8b		
	c	Points not reported to you on Form 1098. See instructions for special rules	8c		
	d	Mortgage insurance premiums (see instructions)	8d		
	e	Add lines 8a through 8d	8e		
	9	Investment interest. Attach Form 4952 if required. See instructions	9		
	10	Add lines 8e and 9		10	
Gifts to Charity	11	Gifts by cash or check. If you made any gift of $250 or more, see instructions	11	49,123.	STMT 5
Caution: If you made a gift and got a benefit for it, see instructions.	12	Other than by cash or check. If you made any gift of $250 or more, see instructions. You **must** attach Form 8283 if over $500	12		
	13	Carryover from prior year	13		
	14	Add lines 11 through 13		14	49,123.
Casualty and Theft Losses	15	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions		15	
Other Itemized Deductions	16	Other - from list in instructions. List type and amount ▶		16	
Total Itemized Deductions	17	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12a		17	59,123.
	18	If you elect to itemize deductions even though they are less than your standard deduction, check this box ▶ [ ]			

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

LAMAR P. & SUZAN P. FISHER

Part I Interest

			Amount
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 ▶		
	BANK UNITED	1	40.
	CENTENNIAL BANK	1	550.
	FROM K-1 - FISHER AUCTION CO	1	264.
2	Add the amounts on line 1	2	854.
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	854.

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

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

Part II Ordinary Dividends

			Amount
5	List name of payer ▶	5	
6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b ▶	6	

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.

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

Part III Foreign Accounts and Trusts

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		X
	If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements		
b	If you are required to file FinCEN Form 114, enter the name of the foreign country where the financial account is located ▶		
8	During 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

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

Interest and Dividend Summary

Name: LAMAR P. & SUZAN P. FISHER 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	BANK UNITED	40.							
B	CENTENNIAL BANK	550.							
C	FROM K-1 - FISHER AUCTION CO	264.							
D									
E									
F									
G									
H									
I									
J									
K									
Totals		854.							

	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 E (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

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

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

OMB No. 1545-0074

2021

Attachment Sequence No. 13

Name(s) shown on return

Your social security number

LAMAR P. & SUZAN P. FISHER

Part I Income or Loss From Rental Real Estate and Royalties **Note:** If you are in the business of renting personal property, use **Schedule C.** See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

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

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

1a Physical address of each property (street, city, state, ZIP code)

A 2112 E. ATLANTIC BLVD, POMPANO BEACH, FL 33060

B

C

1b Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the **QJV** box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A 4	A	365		☐
B	B			☐
C	C			☐

Type of Property:

1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental

2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

Income: / Expenses:	Properties:	A	B	C
3 Rents received	3	21,726.		
4 Royalties received	4			
5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7			
8 Commissions	8			
9 Insurance	9			
10 Legal and other professional fees	10	850.		
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see instructions)	12			
13 Other interest	13	10,337.		
14 Repairs	14			
15 Supplies	15			
16 Taxes	16	1,185.		
17 Utilities	17			
18 Depreciation expense or depletion	18	6,857.		
19 Other (list) ▶	19			
20 Total expenses. Add lines 5 through 19	20	19,229.		
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file **Form 6198**	21	2,497.		
22 Deductible rental real estate loss after limitation, if any, on **Form 8582** (see instructions)	22	( )	( )	( )

23a Total of all amounts reported on line 3 for all rental properties	23a	21,726.	
b Total of all amounts reported on line 4 for all royalty properties	23b		
c Total of all amounts reported on line 12 for all properties	23c		
d Total of all amounts reported on line 18 for all properties	23d	6,857.	
e Total of all amounts reported on line 20 for all properties	23e	19,229.	
24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses	24		2,497.
25 **Losses.** Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25		( )
26 **Total rental real estate and royalty income or (loss).** Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	26		2,497.

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

LAMAR P. & SUZAN P. FISHER

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	FISHER MCCLELLAN REAL ESTATE LLC	P		81-2266206		
B	FISHER AUCTION CO	S		59-2342559		
C	18 S. FEDERAL LLC	P		83-2844577		
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					49,467.
B					372,523.
C			7,329.		
D					
29a Totals					421,990.
b Totals			7,329.		

30	Add columns (h) and (k) of line 29a	30	421,990.
31	Add columns (g), (i), and (j) of line 29b	31	(7,329.)
32	Total partnership and S corporation income or (loss). Combine lines 30 and 31	32	414,661.

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A	GINGER ECKERT ROBERTS ESTATE	81-6899464
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	0.			
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	417,158.
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	STATEMENT 8 44,635.

Schedule E — **PASSTHROUGH RECAP - BASIC INFORMATION** — **2021**

LAMAR P. & SUZAN P. FISHER

TSJ	TYPE	Entity No.	Act. No.	Name	1/1/6 Ordinary Income (Loss)	2/2/7 Rental Real Estate Inc. (Loss)	3/3/8 Other Rental Income (Loss)	* Passive Activity Loss C/O	* AMT Passive Activity Loss C/O	5/4/1 Interest	* US Treasury Bond Interest	6a/5a/2a Dividends	6b/5b/2b Qualified Dividends	7/6/* Royalties	8/7/3 Short-Term Capital Gain (Loss)	9a/8a/4a Net Long-Term Capital Gain (Loss)
T	P	7	7	FISHER MCCLELLAN REAL ESTATE LL	49,467.											
T	S	9	9	FISHER AUCTION CO	372,523.					264.						
T	P	10	10	18 S. FEDERAL LLC		-7,329.										
T	E	11	11	GINGER ECKERT ROBERTS ESTATE												
Totals					421,990.	-7,329.				264.						
Component of:					Schedule E, Page 2, Various	Schedule E, Page 2, Various	Schedule E, Page 2, Various	Form 8582 Line 2c	Form 8582 AMT, Line 2c	Schedule B, Line 1	Schedule B, Line 1	Schedule B, Line 5	Form 1040 Line 3a	Schedule E, Line 4	Schedule D, Line 5	Schedule D, Line 12

Schedule K-1 Line Reference: (1065/1120S/1041)		4/*/*	10/9/*	*	11/10/*	13/12/*	12/11/*	13/12/*	13/12/*	*/*	20/17/14	13/*/*	*	14/*/*	17/15/12	*/*/12	*/*/12
Entity No.	Act. No.	Guaranteed Payments to Partner	Section 1231 Gain (Loss)	Ordinary Gain (Loss) Form 4797	Other Income	Charitable Contributions 60%	Section 179 Expense	Other Deductions	Investment Int. Expense (Schedule A)	Investment Int. Expense (Schedule E)	Investment Income	SE Health Insurance Premium	Wages for More Than 2% Shareholders	Net SE Earnings	AMT Depr Adj on Post '86 Property	Minimum Tax Adjustment	Exclusion Items
9	9					575.											
Totals						575.											
Component of:		Schedule E, Page 2, Various	Form 4797, Line 2	Form 4797, Line 10	Schedule E, Page 2, Various	Schedule A, Lines 11 & 12	Form 4562, Line 6	Schedule E, Page 2, Various	Schedule A, Line 9	Schedule E, Page 2, Various	Form 4952, Line 4a	Form 1040, Schedule 1, Line 17	Form 1040, Line 1	Schedule SE, Line 2	Form 6251, Line 2m	Form 6251, Line 2j	2021 Form 8801

* - No specific Schedule K-1 line reference for these amounts.

Schedule E — **PASSTHROUGH RECAP - QUALIFIED BUSINESS INCOME DEDUCTION** — **2021**

LAMAR P. & SUZAN P. FISHER

Schedule K-1 Line Reference: (1065/1120S/1041)		20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14		20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14
Entity No.	Act. No.	Ordinary Income or Loss	Rental Income or Loss	Royalty Income or Loss	Section 1231 Gain or Loss	Other Income	Other Deductions	Reserved	Depletion	Depletion Adjustments	Sec 59(e)(2) Expenditures	Sec 59(e)(2) Expenditures Adjustments	W-2 Wages	Unajusted Basis	REIT Dividends	PTP Income Override
9	9												532,683.	44,017.		
10	10													171,467.		
Totals													532,683.	215,484.		
Components of:		Form 8995	Form 8995	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A		Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A

Schedule K-1 Line Reference: (1065/1120S/1041)		20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	20/17/14	
Entity No.	Act. No.	Qualified Business Inc Override	Qualified Service Inc Override	Patron Reduction Override	Ordinary Gain Override	QBI from Cooperatives	W-2 Wages from Cooperatives	Section 179 Deduction	Section 179 Deduction Adjustment	SE Health Insurance Deduction	SE Health Insurance Deduction Adj.	Retirement Plan Deductions	Retirement Plan Deduction Adj.	Net Earnings from SE	Net Earnings from SE Adjustment	
7	7	49,467.														
9	9	372,523.														
10	10	-7,329.														
Totals		414,661.														
Components of:		Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995-A	Form 8995/ 8995-A	Form 8995-A	Form 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	Form 8995/ 8995-A	

2021 DEPRECIATION AND AMORTIZATION REPORT

FISHER AUCTIONS LLC - COMMERCIAL RENTA

SCHEDULE E- 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
1	BUILDING - E. ATLANTIC	08/23/12	SL	39.00	MM	17	246,772.				246,772.	52,989.		6,327.	59,316.
2	LAND - E. ATLANTIC	08/23/12	L				51,248.				51,248.			0.	0.
3	LAND - S.E. 5TH TERRACE	08/23/12	L				65,842.				65,842.			0.	0.
4	BUILDING IMPROVEMENTS	12/01/12	SL	39.00	MM	17	5,366.				5,366.	1,110.		138.	1,248.
5	HURRICANE SHUTTERS	12/01/12	150DB	15.00	MQ	17	750.			375.	375.	222.		22.	244.
6	FIXTURES	12/01/12	200DB	7.00	MQ	17	650.			325.	325.	325.		0.	325.
7	PARTITIONS	12/01/12	150DB	15.00	MQ	17	12,544.			6,272.	6,272.	3,725.		370.	4,095.
	TOTAL SCH E DEPRECIATION						383,172.			6,972.	376,200.	58,371.		6,857.	65,228.

128111 04-01-21

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

DOES NOT APPLY

Form **6251**

Department of the Treasury
Internal Revenue Service (99)

Alternative Minimum Tax - Individuals

▶ Go to www.irs.gov/Form6251 for instructions and the latest information.
▶ Attach to Form 1040, 1040-SR, or 1040-NR.

OMB No. 1545-0074

2021

Attachment Sequence No. 32

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

Your social security number

LAMAR P. & SUZAN P. FISHER

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	629,937.
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	10,000.
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	639,937.

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 Married filing separately ... 523,600 ... 57,300 If line 4 is over the amount shown above for your filing status, see instructions.	5	114,600.
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	525,337.
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	143,096.
8	Alternative minimum tax foreign tax credit (see instructions)	8	
9	Tentative minimum tax. Subtract line 8 from line 7	9	143,096.
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	169,599.
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	0.

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
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
14	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary). See instructions. If you are filing Form 2555, see instructions for the amount to enter	14
15	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter **the smaller** of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see instructions for the amount to enter	15
16	Enter **the smaller** of line 12 or line 15	16
17	Subtract line 16 from line 12	17
18	If line 17 is $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
19	Enter: • $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
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
21	Subtract line 20 from line 19. If zero or less, enter -0-	21
22	Enter **the smaller** of line 12 or line 13	22
23	Enter **the smaller** of line 21 or line 22. This amount is taxed at 0%	23
24	Subtract line 23 from line 22	24
25	Enter: • $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
26	Enter the amount from line 21	26
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
28	Add line 26 and line 27	28
29	Subtract line 28 from line 25. If zero or less, enter -0-	29
30	Enter the smaller of line 24 or line 29	30
31	Multiply line 30 by 15% (0.15) ▶	31
32	Add lines 23 and 30	32
	If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33.	
33	Subtract line 32 from line 22	33
34	Multiply line 33 by 20% (0.20) ▶	34
	If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35.	
35	Add lines 17, 32, and 33	35
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
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
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

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
	FISHER AUCTIONS LLC -								
	COMMERCIAL RENTAL - 2112								
1	BUILDING - E. ATLANTIC	08 23 12	SL	39.00	246,772.	52,989.	6,327.	6,327.	0.
4	BUILDING IMPROVEMENTS	12 01 12	SL	39.00	5,366.	1,110.	138.	138.	0.
5	HURRICANE SHUTTERS	12 01 12	150DB	15.00	750.	222.	22.	22.	0.
7	PARTITIONS	12 01 12	150DB	15.00	12,544.	3,725.	370.	370.	0.
	** SUBTOTAL **				265,432.	58,046.	6,857.	6,857.	0.
	*** GRAND TOTAL ***				265,432.	58,046.	6,857.	6,857.	0.

Form **8889**

Department of the Treasury
Internal Revenue Service

Health Savings Accounts (HSAs)

▶ Attach to Form 1040, 1040-SR, or 1040-NR.
▶ Go to www.irs.gov/Form8889 for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment Sequence No. **52**

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

LAMAR P. FISHER

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

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

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

1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021. See instructions ▶			☒ Self-only ☐ 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	
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	4,600.
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	4,600.
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	4,600.
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	
8	Add lines 6 and 7		8	4,600.
9	Employer contributions made to your HSAs for 2021	9 3,700.		
10	Qualified HSA funding distributions	10		
11	Add lines 9 and 10		11	3,700.
12	Subtract line 11 from line 8. If zero or less, enter -0-		12	900.
13	**HSA deduction.** Enter the **smaller** of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13 **Caution:** If line 2 is more than line 13, you may have to pay an additional tax. See instructions.		13	

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	5,028.
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	5,028.
15	Qualified medical expenses paid using HSA distributions (see instructions)	15	5,028.
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 ▶ ☐		
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	

Form **8995-A**

Department of the Treasury
Internal Revenue Service

Qualified Business Income Deduction

▶ Attach to your tax return.
▶ Go to www.irs.gov/Form8995A for instructions and the latest information.

OMB No. 1545-2994

2021

Attachment Sequence No. **55A**

Name(s) shown on return

Your taxpayer identification number

LAMAR P. & SUZAN P. FISHER

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	FISHER MCCLELLAN REAL ESTATE LLC	☐	☐	81-2266206	☐
B	FISHER AUCTION CO	☐	☐	59-2342559	☐
C	FISHER AUCTIONS LLC - COMMERCIAL RENTAL - 211	☐	☐	[redacted]	☐

Part II Determine Your Adjusted Qualified Business Income

			A	B	C
2	Qualified business income from the trade, business, or aggregation. See instructions	2	48,613.	366,091.	2,454.
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	9,723.	73,218.	491.
4	Allocable share of W-2 wages from the trade, business, or aggregation	4		532,683.	
5	Multiply line 4 by 50% (0.50)	5		266,342.	
6	Multiply line 4 by 25% (0.25)	6		133,171.	
7	Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property	7		44,017.	266,082.
8	Multiply line 7 by 2.5% (0.025)	8		1,100.	6,652.
9	Add lines 6 and 8	9		134,271.	6,652.
10	Enter the greater of line 5 or line 9	10		266,342.	6,652.
11	W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10	11		73,218.	491.
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	0.	73,218.	491.
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	0.	73,218.	491.
16	Total qualified business income component. Add all amounts reported on line 15 ▶	16	73,709.		

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	73,709.			
28	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions	28				
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				
31	REIT and PTP component. Multiply line 30 by 20% (0.20)	31				
32	Qualified business income deduction before the income limitation. Add lines 27 and 31 ▶			32	73,709.	
33	Taxable income before qualified business income deduction	33	703,646.			
34	Net capital gain. See instructions	34				
35	Subtract line 34 from line 33. If zero or less, enter -0-			35	703,646.	
36	Income limitation. Multiply line 35 by 20% (0.20)			36	140,729.	
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	73,709.	
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	73,709.	
40	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-			40	( )	

Form **8995-A** (2021)

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

LAMAR P. & SUZAN P. FISHER

Your taxpayer identification number

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 9		( )	
		( )	
		( )	

2	Qualified business net (loss) carryforward from prior years. See instructions	2	( )
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	(7,329)
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	424,487.
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	(7,329)
6	Qualified business net (loss) carryforward. Subtract line 5 from line 3. If zero or more, enter -0-	6	( )

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

Schedule C (Form 8995-A) 2021

108416 01-11-22

Form **8959**

Department of the Treasury
Internal Revenue Service

Additional Medicare Tax

▶ If any line does not apply to you, leave it blank. See separate instructions.
▶ Attach to Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.
▶ Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2021

Attachment Sequence No. 71

Name(s) shown on return
LAMAR P. & SUZAN P. FISHER

Your social security number

Part I Additional Medicare Tax on Medicare Wages

1	Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5		1	373,913.	
2	Unreported tips from Form 4137, line 6		2		
3	Wages from Form 8919, line 6		3		
4	Add lines 1 through 3		4	373,913.	
5	Enter the following amount for your filing status:				
	Married filing jointly	$250,000			
	Married filing separately	$125,000			
	Single, Head of household, or Qualifying widow(er)	$200,000	5	250,000.	
6	Subtract line 5 from line 4. If zero or less, enter -0-				6 123,913.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II				7 1,115.

Part II Additional Medicare Tax on Self-Employment Income

8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)		8		
9	Enter the following amount for your filing status:				
	Married filing jointly	$250,000			
	Married filing separately	$125,000			
	Single, Head of household, or Qualifying widow(er)	$200,000	9		
10	Enter the amount from line 4		10		
11	Subtract line 10 from line 9. If zero or less, enter -0-		11		
12	Subtract line 11 from line 8. If zero or less, enter -0-				12
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III				13

Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation

14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)		14		
15	Enter the following amount for your filing status:				
	Married filing jointly	$250,000			
	Married filing separately	$125,000			
	Single, Head of household, or Qualifying widow(er)	$200,000	15		
16	Subtract line 15 from line 14. If zero or less, enter -0-				16
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV				17

Part IV Total Additional Medicare Tax

18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR or 1040-SS filers, see instructions), and go to Part V	18	1,115.

Part V Withholding Reconciliation

19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6		19	5,851.	
20	Enter the amount from line 1		20	373,913.	
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages		21	5,422.	
22	Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages				22 429.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions)				23
24	**Total Additional Medicare Tax withholding.** Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR or 1040-SS filers, see instructions)				24 429.

Form **8960**

Department of the Treasury
Internal Revenue Service (99)

Net Investment Income Tax - Individuals, Estates, and Trusts

▶ Attach to your tax return.
▶ Go to www.irs.gov/Form8960 for instructions and the latest information.

OMB No. 1545-2227

2021

Attachment Sequence No. 72

Name(s) shown on your tax return: LAMAR P. & SUZAN P. FISHER

Your social security number or EIN:

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)			1	854.
2	Ordinary dividends (see instructions)			2	
3	Annuities (see instructions)			3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a	417,158.		
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions) STATEMENT 10	4b	-417,158.		
c	Combine lines 4a and 4b			4c	0.
5a	Net gain or loss from disposition of property (see instructions)	5a			
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b			
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c			
d	Combine lines 5a through 5c			5d	
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)			6	
7	Other modifications to investment income (see instructions)			7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			8	854.

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-			12	854.
	Individuals:				
13	Modified adjusted gross income (see instructions)	13	762,769.		
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	512,769.		
16	Enter the smaller of line 12 or line 15			16	854.
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)			17	32.
	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	

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	FISHER AUCTION CO., INC.	221,690.	115,625.			8,854.	4,021.
S	FISHER AUCTION CO., INC.	15,080.	312.			935.	219.
T	BROWARD COUNTY	107,987.	19,015.			6,891.	1,612.
TOTALS		344,757.	134,952.			16,680.	5,852.

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

T S	DESCRIPTION	AMOUNT
T	FISHER AUCTION CO., INC.	115,625.
S	FISHER AUCTION CO., INC.	312.
T	BROWARD COUNTY	19,015.
TOTAL TO FORM 1040, LINE 25A		134,952.

FORM 1040 FEDERAL INCOME TAX WITHHELD - OTHER FORMS STATEMENT 3

T S	DESCRIPTION	AMOUNT
	FORM 8959, LINE 24	429.
TOTAL TO FORM 1040, LINE 25C		429.

SCHEDULE 3 EXCESS SOCIAL SECURITY TAX WORKSHEET STATEMENT 4

	TAXPAYER	SPOUSE
1. ADD ALL SOCIAL SECURITY TAX WITHHELD BUT NOT MORE THAN $8,853.60 FOR EACH EMPLOYER (THIS TAX SHOULD BE SHOWN IN BOX 4 OF YOUR W-2 FORMS). ENTER THE TOTAL HERE	15,745.	935.
2. ENTER ANY UNCOLLECTED SOCIAL SECURITY TAX ON TIPS OR GROUP-TERM LIFE INSURANCE INCLUDED IN THE TOTAL ON SCHEDULE 2, LINE 13		
3. ADD LINES 1 AND 2	15,745.	935.
4. SOCIAL SECURITY TAX LIMIT	8,854.	8,854.
5. SUBTRACT LINE 4 FROM LINE 3. EXCESS SOCIAL SECURITY TAX INCLUDED IN SCHEDULE 3, LINE 11.	6,891.	0.

SCHEDULE A CASH CONTRIBUTIONS STATEMENT 5

DESCRIPTION	AMOUNT 100% LIMIT	AMOUNT 60% LIMIT	AMOUNT 30% LIMIT
MISCELLANEOUS		48,548.	
FROM K-1 - FISHER AUCTION CO		575.	
SUBTOTALS		49,123.	
TOTAL TO SCHEDULE A, LINE 11			49,123.

SCHEDULE A STATE AND LOCAL GENERAL SALES TAXES STATEMENT 6

DESCRIPTION	AMOUNT
STATE SALES TAX	1,724.
LOCAL SALES TAX	288.
TOTAL TO SCHEDULE A, LINE 5A	2,012.

SCHEDULE A — GENERAL SALES TAX DEDUCTION WORKSHEET — STATEMENT 7

1	ENTER YOUR STATE GENERAL SALES TAXES FROM THE APPLICABLE TABLE. FLORIDA		1,724.
	IF, FOR ALL OF 2021, YOU LIVED ONLY IN CONNECTICUT, THE DISTRICT OF COLUMBIA, INDIANA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, MICHIGAN, NEW JERSEY, OR RHODE ISLAND, SKIP LINES 2 THROUGH 5, ENTER -0- ON LINE 6, AND GO TO LINE 7. OTHERWISE, GO TO LINE 2.		
2	DID YOU LIVE IN ALASKA, ARIZONA, ARKANSAS, COLORADO, GEORGIA, ILLINOIS, LOUISIANA, MISSISSIPPI, MISSOURI, NEW YORK, NORTH CAROLINA, SOUTH CAROLINA, TENNESSEE, UTAH, OR VIRGINIA IN 2021? IF NO, ENTER -0-. IF YES, ENTER YOUR LOCAL GENERAL SALES TAXES FROM THE APPLICABLE TABLE.	0.	
3	DID YOUR LOCALITY IMPOSE A LOCAL GENERAL SALES TAX IN 2021? RESIDENTS OF CALIFORNIA AND NEVADA SEE INSTRUCTIONS. IF NO, SKIP LINES 3 THROUGH 5, ENTER -0- ON LINE 6 AND GO TO LINE 7. IF YES, ENTER YOUR LOCAL GENERAL SALES TAX RATE, BUT OMIT THE PERCENTAGE SIGN. POMPANO BEACH	1.0000	
4	DID YOU ENTER -0- ON LINE 2 ABOVE? IF NO, SKIP LINES 4 AND 5 AND GO TO LINE 6. IF YES, ENTER YOUR STATE GENERAL SALES TAX RATE, BUT OMIT THE PERCENTAGE SIGN.	6.0000	
5	DIVIDE LINE 3 BY LINE 4. ENTER THE RESULT AS A DECIMAL (ROUNDED TO AT LEAST THREE PLACES).	.1670	
6	DID YOU ENTER -0- ON LINE 2 ABOVE? IF NO, MULTIPLY LINE 2 BY LINE 3. IF YES, MULTIPLY LINE 1 BY LINE 5.		288.
6A	ADD LINE 1 AND LINE 6.		2,012.
6B	PART-YEAR DAYS RATE.		1.000000
6C	MULTIPLY LINE 6A BY LINE 6B.		2,012.
7	ENTER YOUR GENERAL SALES TAXES PAID ON SPECIFIED ITEMS, IF ANY.		
8	DEDUCTION FOR GENERAL SALES TAXES. ADD LINES 6C AND 7. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 5A AND CHECK BOX.		2,012.

SCHEDULE E RECONCILIATION FOR REAL ESTATE PROFESSIONALS STATEMENT 8

FORM	DESCRIPTION	AMOUNT
SCH E P2	FISHER MCCLELLAN REAL ESTATE LLC	49,467.
SCH E P2	18 S. FEDERAL LLC	-7,329.
SCH E P1	FISHER AUCTIONS LLC - COMMERCIAL RENTAL - 2112 E. ATLANTIC BLVD, POMPANO BEA	2,497.
TOTAL TO SCHEDULE E, LINE 43		44,635.

FORM 8995-A QUALIFIED BUSINESS INCOME STATEMENT 9
SCHEDULE C

ACTIVITY NAME	INCOME	LOSS REDUCTION	ADJUSTED QBI
FISHER MCCLELLAN REAL ESTATE LLC	49,467.	854.	48,613.
FISHER AUCTION CO	372,523.	6,432.	366,091.
FISHER AUCTIONS LLC - COMMERCIAL RENTAL - 211	2,497.	43.	2,454.
18 S. FEDERAL LLC	-7,329.		

FORM 8960 TRADE OR BUSINESS INCOME STATEMENT 10

FISHER AUCTIONS LLC - COMMERCIAL RENTAL - 2112 E. ATLANTIC B	-2,497.
FISHER MCCLELLAN REAL ESTATE LLC	-49,467.
FISHER AUCTION CO	-372,523.
18 S. FEDERAL LLC	7,329.
AMOUNT TO FORM 8960, LINE 4B	-417,158.

2021 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - LAMAR P. & SUZAN P. FISHER

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
1	BUILDING - E. ATLANTIC	08 23 12	SL	39.00	17	246,772.			246,772.	52,989.		6,327.
2	LAND - E. ATLANTIC	08 23 12	L			51,248.			51,248.			0.
3	LAND - S.E. 5TH TERRACE	08 23 12	L			65,842.			65,842.			0.
4	BUILDING IMPROVEMENTS	12 01 12	SL	39.00	17	5,366.			5,366.	1,110.		138.
5	HURRICANE SHUTTERS	12 01 12	150DB	15.00	17	750.		375.	375.	222.		22.
6	FIXTURES	12 01 12	200DB	7.00	17	650.		325.	325.	325.		0.
7	PARTITIONS	12 01 12	150DB	15.00	17	12,544.		6,272.	6,272.	3,725.		370.
	TOTAL SCH E DEPRECIATION					383,172.		6,972.	376,200.	58,371.		6,857.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

- NEXT YEAR FEDERAL - LAMAR P. & SUZAN P. FISHER

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
1	BUILDING - E. ATLANTIC	08 23 12	SL	39.00	246,772.		246,772.	59,316.	6,327.
	AMT DEPRECIATION		SL	39.00				59,316.	6,327.
2	LAND - E. ATLANTIC	08 23 12	L		51,248.		51,248.	0.	0.
3	LAND - S.E. 5TH TERRACE	08 23 12	L		65,842.		65,842.	0.	0.
4	BUILDING IMPROVEMENTS	12 01 12	SL	39.00	5,366.		5,366.	1,248.	138.
	AMT DEPRECIATION		SL	39.00				1,248.	138.
5	HURRICANE SHUTTERS	12 01 12	150DB	15.00	750.	375.	375.	244.	22.
	AMT DEPRECIATION		150DB	15.00				244.	22.
6	FIXTURES	12 01 12	200DB	7.00	650.	325.	325.	325.	0.
	AMT DEPRECIATION		200DB	7.00				325.	0.
7	PARTITIONS	12 01 12	150DB	15.00	12,544.	6,272.	6,272.	4,095.	371.
	AMT DEPRECIATION		150DB	15.00				4,095.	371.
	TOTAL SCH E DEPRECIATION				383,172.	6,972.	376,200.	65,228.	6,858.
	TOTAL SCH E AMT DEPRECIATION							65,228.	6,858.

(D) - Asset disposed * ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone