

## 2024 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/25/2025

### General Information

Name: Cheryl Lynn Grieb

PID 209757

### AGENCY INFORMATION

| Organization                | Suborganization                | Title                             |
|-----------------------------|--------------------------------|-----------------------------------|
| Florida PACE Funding Agency | Board of Directors             | Board Member                      |
| Osceola County              | Elected Constitutional Officer | County Commissioner<br>District 4 |

### Net Worth

My Net Worth as of December 31, 2024 was \$ 2,804,552.00.

**Assets**

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 effect is \$ 40,000.00.

**ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:**

| Description of Asset                                              | Value of Asset |
|-------------------------------------------------------------------|----------------|
| 612 Lakeshore Blvd, Kissimmee, FL 34744 (50% ownership)           | \$ 250,000.00  |
| 608 Jacaranda Lane, Kissimmee, FL 24744 (50% ownership)           | \$ 137,500.00  |
| 815 Hastings Dr, Kissimmee, FL 34744 (50% ownership)              | \$ 165,000.00  |
| 1015 Newfound Harbor Dr, Merritt Island, FL (50% ownership)       | \$ 500,000.00  |
| Newfound Acre lots, Leicester, NC (50% ownership)                 | \$ 37,500.00   |
| 7/11 N Vernon Ave, Kissimmee, FL 34741 (50% ownership, Corp held) | \$ 370,000.00  |
| Addition Financial                                                | \$ 70,313.00   |
| SouthState Bank - Jt acct (50%)                                   | \$ 16,841.00   |
| SouthState Bank                                                   | \$ 62,204.00   |
| Public Service Enterprise Group stock                             | \$ 235,104.00  |
| AT&T stock                                                        | \$ 9,039.00    |
| Ameritas Sep IRA                                                  | \$ 32,761.00   |
| Ameritas Roth IRA                                                 | \$ 85,592.00   |
| FRS Investment Plan Acct                                          | \$ 153,321.00  |

**Liabilities**

LIABILITIES IN EXCESS OF \$1,000:

| Name of Creditor | Address of Creditor | Amount of Liability |
|------------------|---------------------|---------------------|
| N/A              |                     |                     |

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

| Name of Creditor | Address of Creditor | Amount of Liability |
|------------------|---------------------|---------------------|
| N/A              |                     |                     |

**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 2024 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 2024 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

| Name of Source of Income Exceeding \$1,000 | Address of Source of Income | Amount |
|--------------------------------------------|-----------------------------|--------|
| See Attached                               |                             |        |

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

| Name of Business Entity | Name of Major Sources of Business' Income | Address of Source | Principal Business Activity of Source |
|-------------------------|-------------------------------------------|-------------------|---------------------------------------|
| See Attached            |                                           |                   |                                       |

**Interests in Specified Businesses****Business Entity # 1**

N/A

**Training**

This section applies only to a Constitutional or elected municipal officer, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

- ☒ I certify that I have completed the required training under Section 112.3142, F.S.
- ☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

**Signature of Reporting Official or Candidate**

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

***Cheryl Lynn Grieb***

Digitally signed: 06/25/2025

Filed with COE: 06/25/2025

Form **8879**

(Rev. January 2021)

Department of the Treasury  
Internal Revenue Service

# IRS e-file Signature Authorization

- ▶ ERO must obtain and retain completed Form 8879.
- ▶ Go to [www.irs.gov/Form8879](http://www.irs.gov/Form8879) for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID)

\*\*\*\*\*

Taxpayer's name

**Cheryl L Grieb**

Social security number

\*\*\*\*\*

Spouse's name

**Patricia L Daugherty**

Spouse's social security number

\*\*\*\*\*

## Part I Tax Return Information — Tax Year Ending December 31, 2024 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

**Note:** Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

|   |                                                               |           |
|---|---------------------------------------------------------------|-----------|
| 1 | Adjusted gross income                                         | 1,051,639 |
| 2 | Total tax                                                     | 230,800   |
| 3 | Federal income tax withheld from Form(s) W-2 and Form(s) 1099 | 22,243    |
| 4 | Amount you want refunded to you                               |           |
| 5 | Amount you owe                                                | 181,750   |

## Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

### Taxpayer's PIN: check one box only

- ☐ I authorize \_\_\_\_\_ to enter or generate my PIN \_\_\_\_\_ as my signature on the income tax return (original or amended) I am now authorizing.
- ERO firm name
- Enter five digits, but don't enter all zeros
- ☒ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature \_\_\_\_\_ Date **05/21/25**

### Spouse's PIN: check one box only

- ☐ I authorize \_\_\_\_\_ to enter or generate my PIN \_\_\_\_\_ as my signature on the income tax return (original or amended) I am now authorizing.
- ERO firm name
- Enter five digits, but don't enter all zeros
- ☒ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature \_\_\_\_\_ Date **05/21/25**

### Practitioner PIN Method Returns Only—continue below

## Part III Certification and Authentication — Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

\*\*\*\*\*  
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorizing to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature \_\_\_\_\_ Date **05/21/25**

**ERO Must Retain This Form — See Instructions**  
**Don't Submit This Form to the IRS Unless Requested To Do So**

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

Form **8879** (Rev. 01-2021)

Form **1040** Department of the Treasury—Internal Revenue Service **2024** U.S. Individual Income Tax Return OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2024, or other tax year beginning , 2024, ending , 20 See separate instructions.

Your first name and middle initial **Cheryl L** Last name **Grieb** Your social security number [REDACTED]

If joint return, spouse's first name and middle initial **Patricia L** Last name **Daugherty** Spouse's social security number [REDACTED]

Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Presidential Election Campaign

City, town, or post office. If you have a foreign address, also complete spaces below. State **FL** ZIP code **34744-5747** 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.

Foreign country name Foreign province/state/county Foreign postal code ☐ You ☐ Spouse

**Filing Status** ☐ Single ☐ Head of household (HOH) ☒ Married filing jointly (even if only one had income) ☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS)

Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: ☐ If treating a nonresident alien or dual-status alien spouse as a U.S. resident for the entire tax year, check the box and enter their name (see instructions and attach statement if required):

**Digital Assets** At any time during 2024, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ 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, 1960 ☐ Are blind Spouse: ☒ Was born before January 2, 1960 ☐ Is blind

**Dependents** (see instructions):

| (1) First name                                                                   | Last name | (2) Social security number | (3) Relationship to you | (4) Check the box if qualifies for (see instructions): |                             |
|----------------------------------------------------------------------------------|-----------|----------------------------|-------------------------|--------------------------------------------------------|-----------------------------|
|                                                                                  |           |                            |                         | Child tax credit                                       | Credit for other dependents |
| if more than four dependents, see instr. and check here <input type="checkbox"/> |           |                            |                         |                                                        |                             |
|                                                                                  |           |                            |                         |                                                        |                             |
|                                                                                  |           |                            |                         |                                                        |                             |
|                                                                                  |           |                            |                         |                                                        |                             |

**Income**

|                                                                                  |                          |
|----------------------------------------------------------------------------------|--------------------------|
| <b>1a</b> Total amount from Form(s) W-2, box 1 (see instructions)                | <b>1a</b> <b>114,134</b> |
| <b>b</b> Household employee wages not reported on Form(s) W-2                    | <b>1b</b>                |
| <b>c</b> Tip income not reported on line 1a (see instructions)                   | <b>1c</b>                |
| <b>d</b> Medicaid waiver payments not reported on Form(s) W-2 (see instructions) | <b>1d</b>                |
| <b>e</b> Taxable dependent care benefits from Form 2441, line 26                 | <b>1e</b>                |
| <b>f</b> Employer-provided adoption benefits from Form 8839, line 29             | <b>1f</b>                |
| <b>g</b> Wages from Form 8919, line 6                                            | <b>1g</b>                |
| <b>h</b> Other earned income (see instructions)                                  | <b>1h</b>                |
| <b>i</b> Nontaxable combat pay election (see instructions)                       | <b>1i</b>                |
| <b>z</b> Add lines 1a through 1h                                                 | <b>1z</b> <b>114,134</b> |

**Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.**

|                                  |                        |                             |                        |
|----------------------------------|------------------------|-----------------------------|------------------------|
| <b>2a</b> Tax-exempt interest    | <b>2a</b>              | <b>b</b> Taxable interest   | <b>2b</b> <b>4,561</b> |
| <b>3a</b> Qualified dividends    | <b>3a</b> <b>7,175</b> | <b>b</b> Ordinary dividends | <b>3b</b> <b>7,472</b> |
| <b>4a</b> IRA distributions      | <b>4a</b>              | <b>b</b> Taxable amount     | <b>4b</b>              |
| <b>5a</b> Pensions and annuities | <b>5a</b>              | <b>b</b> Taxable amount     | <b>5b</b>              |
| <b>6a</b> Soc. sec. ben.         | <b>6a</b>              | <b>b</b> Taxable amount     | <b>6b</b>              |

**Standard Deduction for –**

- Single or Married filing separately, \$14,600
- Married filing jointly or Qualifying surviving spouse, \$29,200
- Head of household, \$21,900
- If you checked any box under Standard Deduction, see instructions.

|                                                                                                         |                            |
|---------------------------------------------------------------------------------------------------------|----------------------------|
| <b>7</b> Capital gain or (loss). Attach Schedule D if required. If not required, check here             | <b>7</b> <b>520,583</b>    |
| <b>8</b> Additional income from Schedule 1, line 10                                                     | <b>8</b> <b>406,946</b>    |
| <b>9</b> Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your <b>total income</b>                   | <b>9</b> <b>1,053,696</b>  |
| <b>10</b> Adjustments to income from Schedule 1, line 26                                                | <b>10</b> <b>2,057</b>     |
| <b>11</b> Subtract line 10 from line 9. This is your <b>adjusted gross income</b>                       | <b>11</b> <b>1,051,639</b> |
| <b>12</b> <b>Standard deduction or itemized deductions</b> (from Schedule A)                            | <b>12</b> <b>30,750</b>    |
| <b>13</b> Qualified business income deduction from Form 8995 or Form 8995-A                             | <b>13</b> <b>15,026</b>    |
| <b>14</b> Add lines 12 and 13                                                                           | <b>14</b> <b>45,776</b>    |
| <b>15</b> Subtract line 14 from line 11. If zero or less, enter -0-. This is your <b>taxable income</b> | <b>15</b> <b>1,005,863</b> |

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form **1040** (2024)

Form 1040 (2024) **Cheryl L Grieb & Patricia L Daugherty**Page **2****Tax and Credits**

|           |                                                                                                                                                      |           |                |
|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|
| <b>16</b> | <b>Tax</b> (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> | <b>16</b> | <b>225,855</b> |
| <b>17</b> | Amount from Schedule 2, line 3                                                                                                                       | <b>17</b> |                |
| <b>18</b> | Add lines 16 and 17                                                                                                                                  | <b>18</b> | <b>225,855</b> |
| <b>19</b> | Child tax credit or credit for other dependents from Schedule 8812                                                                                   | <b>19</b> |                |
| <b>20</b> | Amount from Schedule 3, line 8                                                                                                                       | <b>20</b> |                |
| <b>21</b> | Add lines 19 and 20                                                                                                                                  | <b>21</b> |                |
| <b>22</b> | Subtract line 21 from line 18. If zero or less, enter -0-                                                                                            | <b>22</b> | <b>225,855</b> |
| <b>23</b> | Other taxes, including self-employment tax, from Schedule 2, line 21                                                                                 | <b>23</b> | <b>4,945</b>   |
| <b>24</b> | Add lines 22 and 23. This is your <b>total tax</b>                                                                                                   | <b>24</b> | <b>230,800</b> |

**Payments**

|           |                                                                                                 |            |               |
|-----------|-------------------------------------------------------------------------------------------------|------------|---------------|
| <b>25</b> | Federal income tax withheld from:                                                               |            |               |
| <b>a</b>  | Form(s) W-2                                                                                     | <b>25a</b> | <b>22,243</b> |
| <b>b</b>  | Form(s) 1099                                                                                    | <b>25b</b> |               |
| <b>c</b>  | Other forms (see instructions)                                                                  | <b>25c</b> |               |
| <b>d</b>  | Add lines 25a through 25c                                                                       | <b>25d</b> | <b>22,243</b> |
| <b>26</b> | 2024 estimated tax payments and amount applied from 2023 return                                 | <b>26</b>  | <b>28,400</b> |
| <b>27</b> | Earned income credit (EIC)                                                                      | <b>27</b>  |               |
| <b>28</b> | Additional child tax credit from Schedule 8812                                                  | <b>28</b>  |               |
| <b>29</b> | American opportunity credit from Form 8863, line 8                                              | <b>29</b>  |               |
| <b>30</b> | Reserved for future use                                                                         | <b>30</b>  |               |
| <b>31</b> | Amount from Schedule 3, line 15                                                                 | <b>31</b>  |               |
| <b>32</b> | Add lines 27, 28, 29, and 31. These are your <b>total other payments and refundable credits</b> | <b>32</b>  |               |
| <b>33</b> | Add lines 25d, 26, and 32. These are your <b>total payments</b>                                 | <b>33</b>  | <b>50,643</b> |

**Refund**

|            |                                                                                                                   |            |                                                                          |
|------------|-------------------------------------------------------------------------------------------------------------------|------------|--------------------------------------------------------------------------|
| <b>34</b>  | If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you <b>overpaid</b>            | <b>34</b>  |                                                                          |
| <b>35a</b> | Amount of line 34 you want <b>refunded to you</b> . If Form 8888 is attached, check here <input type="checkbox"/> | <b>35a</b> |                                                                          |
| <b>b</b>   | Routing number                                                                                                    | <b>c</b>   | Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings |
| <b>d</b>   | Account number                                                                                                    |            |                                                                          |
| <b>36</b>  | Amount of line 34 you want <b>applied to your 2025 estimated tax</b>                                              | <b>36</b>  |                                                                          |

**Amount You Owe**

|           |                                                                                                                                                                                           |           |                |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|
| <b>37</b> | Subtract line 33 from line 24. This is the <b>amount you owe</b> .<br>For details on how to pay, go to <a href="http://www.irs.gov/Payments">www.irs.gov/Payments</a> or see instructions | <b>37</b> | <b>180,157</b> |
| <b>38</b> | Estimated tax penalty (see instructions)                                                                                                                                                  | <b>38</b> |                |

**Third Party Designee**

|                                                                                           |                     |                                                                                                    |  |
|-------------------------------------------------------------------------------------------|---------------------|----------------------------------------------------------------------------------------------------|--|
| Do you want to allow another person to discuss this return with the IRS? See instructions |                     | <input checked="" type="checkbox"/> <b>Yes. Complete below.</b> <input type="checkbox"/> <b>No</b> |  |
| Designee's name                                                                           | Phone no.           | Personal identification number (PIN)                                                               |  |
| <b>Bonny Bowyer, CPA</b>                                                                  | <b>352-243-1238</b> |                                                                                                    |  |

**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 instr.)         |
|                                                               |      | <b>Realtor</b>      |                                                                                    |
| Spouse's signature. If a joint return, <b>both</b> must sign. | Date | Spouse's occupation | If the IRS sent your spouse an Identity Protection PIN, enter it here (see instr.) |
|                                                               |      | <b>Attorney</b>     |                                                                                    |

|           |               |                          |                      |                 |              |                                                  |
|-----------|---------------|--------------------------|----------------------|-----------------|--------------|--------------------------------------------------|
| Phone no. | Email address | Preparer's name          | Preparer's signature | Date            | PTIN         | Check if: <input type="checkbox"/> Self-employed |
|           |               | <b>Bonny Bowyer, CPA</b> |                      | <b>06/11/25</b> | <b>*****</b> |                                                  |

|                          |                                                            |                     |
|--------------------------|------------------------------------------------------------|---------------------|
| <b>Paid</b>              | Firm's name                                                | Phone no.           |
|                          | <b>Logan, Bowyer &amp; McCullough, P.A.</b>                | <b>352-243-1238</b> |
| <b>Preparer Use Only</b> | Firm's address                                             | Firm's EIN          |
|                          | <b>1645 E. Highway 50, Suite 202<br/>Clermont FL 34711</b> | <b>**-***4152</b>   |

Go to [www.irs.gov/Form1040](http://www.irs.gov/Form1040) for instructions and the latest information.Form **1040** (2024)**5/21 Int 692 FTP 901 Tot 181,750**

**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](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2024**Attachment  
Sequence No. **01**

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

Your social security number

**Cheryl L Grieb & Patricia L Daugherty**

For 2024, enter the amount reported to you on Form(s) 1099-K that was included in error or for personal items sold at a loss

**Note:** The remaining amounts reported to you on Form(s) 1099-K should be reported elsewhere on your return depending on the nature of the transaction. See [www.irs.gov/1099](http://www.irs.gov/1099).**Part I Additional Income**

|           |                                                                                                                                           |           |                |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|
| <b>1</b>  | Taxable refunds, credits, or offsets of state and local income taxes                                                                      | <b>1</b>  |                |
| <b>2a</b> | Alimony received                                                                                                                          | <b>2a</b> |                |
| <b>b</b>  | Date of original divorce or separation agreement (see instructions):                                                                      |           |                |
| <b>3</b>  | Business income or (loss). Attach Schedule C                                                                                              | <b>3</b>  | <b>28,063</b>  |
| <b>4</b>  | Other gains or (losses). Attach Form 4797                                                                                                 | <b>4</b>  |                |
| <b>5</b>  | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E                                               | <b>5</b>  | <b>377,833</b> |
| <b>6</b>  | Farm income or (loss). Attach Schedule F                                                                                                  | <b>6</b>  |                |
| <b>7</b>  | Unemployment compensation                                                                                                                 | <b>7</b>  |                |
| <b>8</b>  | Other income:                                                                                                                             |           |                |
| <b>a</b>  | Net operating loss                                                                                                                        | <b>8a</b> | ( )            |
| <b>b</b>  | Gambling                                                                                                                                  | <b>8b</b> |                |
| <b>c</b>  | Cancellation of debt                                                                                                                      | <b>8c</b> |                |
| <b>d</b>  | Foreign earned income exclusion from Form 2555                                                                                            | <b>8d</b> | ( )            |
| <b>e</b>  | Income from Form 8853                                                                                                                     | <b>8e</b> |                |
| <b>f</b>  | Income from Form 8889                                                                                                                     | <b>8f</b> |                |
| <b>g</b>  | Alaska Permanent Fund dividends                                                                                                           | <b>8g</b> |                |
| <b>h</b>  | Jury duty pay                                                                                                                             | <b>8h</b> |                |
| <b>i</b>  | Prizes and awards                                                                                                                         | <b>8i</b> |                |
| <b>j</b>  | Activity not engaged in for profit income                                                                                                 | <b>8j</b> |                |
| <b>k</b>  | Stock options                                                                                                                             | <b>8k</b> |                |
| <b>l</b>  | 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 | <b>8l</b> |                |
| <b>m</b>  | Olympic and Paralympic medals and USOC prize money (see instructions)                                                                     | <b>8m</b> |                |
| <b>n</b>  | Section 951(a) inclusion (see instructions)                                                                                               | <b>8n</b> |                |
| <b>o</b>  | Section 951A(a) inclusion (see instructions)                                                                                              | <b>8o</b> |                |
| <b>p</b>  | Section 461(l) excess business loss adjustment                                                                                            | <b>8p</b> |                |
| <b>q</b>  | Taxable distributions from an ABL account (see instructions)                                                                              | <b>8q</b> |                |
| <b>r</b>  | Scholarship and fellowship grants not reported on Form W-2                                                                                | <b>8r</b> |                |
| <b>s</b>  | Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d                                                        | <b>8s</b> | ( )            |
| <b>t</b>  | Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan                                   | <b>8t</b> |                |
| <b>u</b>  | Wages earned while incarcerated                                                                                                           | <b>8u</b> |                |
| <b>v</b>  | Digital assets received as ordinary income not reported elsewhere. See instructions                                                       | <b>8v</b> |                |
| <b>z</b>  | Other income. List type and amount: <b>Florida Pace Funding Agen</b>                                                                      | <b>8z</b> | <b>1,050</b>   |
| <b>9</b>  | Total other income. Add lines 8a through 8z                                                                                               | <b>9</b>  | <b>1,050</b>   |
| <b>10</b> | Combine lines 1 through 7 and 9. This is your <b>additional income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8         | <b>10</b> | <b>406,946</b> |

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

Schedule 1 (Form 1040) 2024

## Cheryl L Grieb &amp; Patricia L Daugherty

Schedule 1 (Form 1040) 2024

Page **2****Part II Adjustments to Income**

|            |                                                                                                                                                            |            |              |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------|
| <b>11</b>  | Educator expenses                                                                                                                                          | <b>11</b>  |              |
| <b>12</b>  | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106                                          | <b>12</b>  |              |
| <b>13</b>  | Health savings account deduction. Attach Form 8889                                                                                                         | <b>13</b>  |              |
| <b>14</b>  | Moving expenses for members of the Armed Forces. Attach Form 3903                                                                                          | <b>14</b>  |              |
| <b>15</b>  | Deductible part of self-employment tax. Attach Schedule SE                                                                                                 | <b>15</b>  | <b>2,057</b> |
| <b>16</b>  | Self-employed SEP, SIMPLE, and qualified plans                                                                                                             | <b>16</b>  |              |
| <b>17</b>  | Self-employed health insurance deduction                                                                                                                   | <b>17</b>  |              |
| <b>18</b>  | Penalty on early withdrawal of savings                                                                                                                     | <b>18</b>  |              |
| <b>19a</b> | Alimony paid                                                                                                                                               | <b>19a</b> |              |
| <b>b</b>   | Recipient's SSN                                                                                                                                            |            |              |
| <b>c</b>   | Date of original divorce or separation agreement (see instructions):                                                                                       |            |              |
| <b>20</b>  | IRA deduction                                                                                                                                              | <b>20</b>  |              |
| <b>21</b>  | Student loan interest deduction                                                                                                                            | <b>21</b>  |              |
| <b>22</b>  | Reserved for future use                                                                                                                                    | <b>22</b>  |              |
| <b>23</b>  | Archer MSA deduction                                                                                                                                       | <b>23</b>  |              |
| <b>24</b>  | Other adjustments:                                                                                                                                         |            |              |
| <b>a</b>   | Jury duty pay (see instructions)                                                                                                                           | <b>24a</b> |              |
| <b>b</b>   | Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit                                       | <b>24b</b> |              |
| <b>c</b>   | Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m                                                   | <b>24c</b> |              |
| <b>d</b>   | Reforestation amortization and expenses                                                                                                                    | <b>24d</b> |              |
| <b>e</b>   | Repayment of supplemental unemployment benefits under the Trade Act of 1974                                                                                | <b>24e</b> |              |
| <b>f</b>   | Contributions to section 501(c)(18)(D) pension plans                                                                                                       | <b>24f</b> |              |
| <b>g</b>   | Contributions by certain chaplains to section 403(b) plans                                                                                                 | <b>24g</b> |              |
| <b>h</b>   | Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)                                              | <b>24h</b> |              |
| <b>i</b>   | 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 | <b>24i</b> |              |
| <b>j</b>   | Housing deduction from Form 2555                                                                                                                           | <b>24j</b> |              |
| <b>k</b>   | Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)                                                                                  | <b>24k</b> |              |
| <b>z</b>   | Other adjustments. List type and amount:                                                                                                                   | <b>24z</b> |              |
| <b>25</b>  | Total other adjustments. Add lines 24a through 24z                                                                                                         | <b>25</b>  |              |
| <b>26</b>  | Add lines 11 through 23 and 25. These are your <b>adjustments to income</b> . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10                    | <b>26</b>  | <b>2,057</b> |

Schedule 1 (Form 1040) 2024

**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](http://www.irs.gov/Form1040) for instructions and the latest information.

OMB No. 1545-0074

**2024**Attachment  
Sequence No. **02**

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

Your social security number

**Cheryl L Grieb & Patricia L Daugherty****Part I Tax**

|                                                                                                                                                                                                                                                                                                        |           |           |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|--|
| <b>1</b> Additions to tax:                                                                                                                                                                                                                                                                             |           |           |  |
| <b>a</b> Excess advance premium tax credit repayment. Attach Form 8962                                                                                                                                                                                                                                 | <b>1a</b> |           |  |
| <b>b</b> Repayment of new clean vehicle credit(s) transferred to a registered dealer from Schedule A (Form 8936), Part II. Attach Form 8936 and Schedule A (Form 8936)                                                                                                                                 | <b>1b</b> |           |  |
| <b>c</b> Repayment of previously owned clean vehicle credit(s) transferred to a registered dealer from Schedule A (Form 8936), Part IV. Attach Form 8936 and Schedule A (Form 8936)                                                                                                                    | <b>1c</b> |           |  |
| <b>d</b> Recapture of net EPE from Form 4255, line 2a, column (i)                                                                                                                                                                                                                                      | <b>1d</b> |           |  |
| <b>e</b> Excessive payments (EP) from Form 4255. Check applicable box and enter amount<br>(i) <input type="checkbox"/> Line 1a, column (n) (ii) <input type="checkbox"/> Line 1c, column (n)<br>(iii) <input type="checkbox"/> Line 1d, column (n) (iv) <input type="checkbox"/> Line 2a, column (n)   | <b>1e</b> |           |  |
| <b>f</b> 20% EP from Form 4255. Check applicable box and enter amount. See instructions.<br>(i) <input type="checkbox"/> Line 1a, column (o) (ii) <input type="checkbox"/> Line 1c, column (o)<br>(iii) <input type="checkbox"/> Line 1d, column (o) (iv) <input type="checkbox"/> Line 2a, column (o) | <b>1f</b> |           |  |
| <b>y</b> Other additions to tax (see instructions):                                                                                                                                                                                                                                                    | <b>1y</b> |           |  |
| <b>z</b> Add lines 1a through 1y                                                                                                                                                                                                                                                                       |           | <b>1z</b> |  |
| <b>2</b> Alternative minimum tax. Attach Form 6251                                                                                                                                                                                                                                                     |           | <b>2</b>  |  |
| <b>3</b> Add lines 1z and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17                                                                                                                                                                                                                 |           | <b>3</b>  |  |

**Part II Other Taxes**

|                                                                                                                                                      |          |           |              |
|------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------|--------------|
| <b>4</b> Self-employment tax. Attach Schedule SE                                                                                                     |          | <b>4</b>  | <b>4,114</b> |
| <b>5</b> Social security and Medicare tax on unreported tip income. Attach Form 4137                                                                 | <b>5</b> |           |              |
| <b>6</b> Uncollected social security and Medicare tax on wages. Attach Form 8919                                                                     | <b>6</b> |           |              |
| <b>7</b> Total additional social security and Medicare tax. Add lines 5 and 6                                                                        |          | <b>7</b>  |              |
| <b>8</b> Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.<br>If not required, check here <input type="checkbox"/> |          | <b>8</b>  |              |
| <b>9</b> Household employment taxes. Attach Schedule H                                                                                               |          | <b>9</b>  |              |
| <b>10</b> Repayment of first-time homebuyer credit. Attach Form 5405 if required                                                                     |          | <b>10</b> |              |
| <b>11</b> Additional Medicare Tax. Attach Form 8959                                                                                                  |          | <b>11</b> |              |
| <b>12</b> Net investment income tax. Attach Form 8960                                                                                                |          | <b>12</b> | <b>831</b>   |
| <b>13</b> Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12                            |          | <b>13</b> |              |
| <b>14</b> Interest on tax due on installment income from the sale of certain residential lots and timeshares                                         |          | <b>14</b> |              |
| <b>15</b> Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000                                      |          | <b>15</b> |              |
| <b>16</b> Recapture of low-income housing credit. Attach Form 8611                                                                                   |          | <b>16</b> |              |

(continued on page 2)

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

Schedule 2 (Form 1040) 2024

## Cheryl L Grieb &amp; Patricia L Daugherty

Schedule 2 (Form 1040) 2024

Page **2****Part II Other Taxes (continued)**

|                                                                                                                                                                          |            |              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------------|
| <b>17</b> Other additional taxes:                                                                                                                                        |            |              |
| <b>a</b> Recapture of other credits. List type, form number, and amount:                                                                                                 | <b>17a</b> |              |
| <b>b</b> Recapture of federal mortgage subsidy, if you sold your home see instructions                                                                                   | <b>17b</b> |              |
| <b>c</b> Additional tax on HSA distributions. Attach Form 8889                                                                                                           | <b>17c</b> |              |
| <b>d</b> Additional tax on an HSA because you didn't remain an eligible individual.<br>Attach Form 8889                                                                  | <b>17d</b> |              |
| <b>e</b> Additional tax on Archer MSA distributions. Attach Form 8853                                                                                                    | <b>17e</b> |              |
| <b>f</b> Additional tax on Medicare Advantage MSA distributions. Attach Form 8853                                                                                        | <b>17f</b> |              |
| <b>g</b> Recapture of a charitable contribution deduction related to a fractional interest<br>in tangible personal property                                              | <b>17g</b> |              |
| <b>h</b> Income you received from a nonqualified deferred compensation plan that fails<br>to meet the requirements of section 409A                                       | <b>17h</b> |              |
| <b>i</b> Compensation you received from a nonqualified deferred compensation plan<br>described in section 457A                                                           | <b>17i</b> |              |
| <b>j</b> Section 72(m)(5) excess benefits tax                                                                                                                            | <b>17j</b> |              |
| <b>k</b> Golden parachute payments                                                                                                                                       | <b>17k</b> |              |
| <b>l</b> Tax on accumulation distribution of trusts                                                                                                                      | <b>17l</b> |              |
| <b>m</b> Excise tax on insider stock compensation from an expatriated corporation                                                                                        | <b>17m</b> |              |
| <b>n</b> Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866                                                                                        | <b>17n</b> |              |
| <b>o</b> Tax on non-effectively connected income for any part of the year you were a<br>nonresident alien from Form 1040-NR                                              | <b>17o</b> |              |
| <b>p</b> Any interest from Form 8621, line 16f, relating to distributions from, and<br>dispositions of, stock of a section 1291 fund                                     | <b>17p</b> |              |
| <b>q</b> Any interest from Form 8621, line 24                                                                                                                            | <b>17q</b> |              |
| <b>z</b> Any other taxes. List type and amount:                                                                                                                          | <b>17z</b> |              |
| <b>18</b> Total additional taxes. Add lines 17a through 17z                                                                                                              |            | <b>18</b>    |
| <b>19</b> Recapture of net EPE from Form 4255, line 1d, column (l)                                                                                                       |            | <b>19</b>    |
| <b>20</b> Section 965 net tax liability installment from Form 965-A                                                                                                      | <b>20</b>  |              |
| <b>21</b> Add lines 4, 7 through 16, 18, and 19. These are your <b>total other taxes</b> . Enter here and on Form 1040<br>or 1040-SR, line 23, or Form 1040-NR, line 23b |            | <b>21</b>    |
|                                                                                                                                                                          |            | <b>4,945</b> |

Schedule 2 (Form 1040) 2024

Form **2210**

Department of the Treasury  
Internal Revenue Service

Name(s) shown on tax return

**Underpayment of Estimated Tax by  
Individuals, Estates, and Trusts**

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

Go to [www.irs.gov/Form2210](http://www.irs.gov/Form2210) for instructions and the latest information.

OMB No. 1545-0140

**2024**

Attachment  
Sequence No. **06**

Identifying number

**Cheryl L Grieb & Patricia L Daugherty**

**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** → 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.

**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.**

**Part I Required Annual Payment**

|   |                                                                                                                                            |   |         |
|---|--------------------------------------------------------------------------------------------------------------------------------------------|---|---------|
| 1 | Enter your 2024 tax after credits from Form 1040, 1040-SR, or 1040-NR, line 22. (See the instructions if not filing Form 1040.)            | 1 | 225,855 |
| 2 | Other taxes, including self-employment tax and, if applicable, Additional Medicare Tax and/or Net Investment Income Tax (see instructions) | 2 | 4,945   |
| 3 | Other payments and refundable credits (see instructions)                                                                                   | 3 |         |
| 4 | Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, <b>stop</b> ; you don't owe a penalty. <b>Don't file Form 2210.</b>     | 4 | 230,800 |
| 5 | Multiply line 4 by 90% (0.90)                                                                                                              | 5 | 207,720 |
| 6 | Withholding taxes. <b>Don't</b> include estimated tax payments. See instructions                                                           | 6 | 22,243  |
| 7 | Subtract line 6 from line 4. If less than \$1,000, <b>stop</b> ; you don't owe a penalty. <b>Don't file Form 2210.</b>                     | 7 | 208,557 |
| 8 | Maximum required annual payment based on prior year's tax (see instructions)                                                               | 8 | 42,523  |
| 9 | <b>Required annual payment.</b> Enter the <b>smaller</b> of line 5 or line 8                                                               | 9 | 42,523  |

**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 2023 or 2024, 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).

For Paperwork Reduction Act Notice, see separate instructions.

Form **2210** (2024)

## Cheryl L Grieb &amp; Patricia L Daugherty

Form 2210 (2024)

Page 2

**Part III Penalty Computation** (See the instructions if you're filing Form 1040-NR.)

| Section A—Figure Your Underpayment                                                                                                                                                                                                                                                                                             |           | Payment Due Dates |                |                |                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------|----------------|----------------|----------------|
|                                                                                                                                                                                                                                                                                                                                |           | (a)<br>4/15/24    | (b)<br>6/15/24 | (c)<br>9/15/24 | (d)<br>1/15/25 |
| <b>10 Required installments.</b> If box C in Part II applies, enter the amounts from Schedule AI, line 27. Otherwise, enter 25% (0.25) of line 9, Form 2210, in each column. For fiscal year filers, see instructions                                                                                                          | <b>10</b> | <b>10,631</b>     | <b>10,631</b>  | <b>10,631</b>  | <b>10,630</b>  |
| <b>11 Estimated tax paid and tax withheld</b> (see the instructions). For column (a) only, also enter the amount from line 11 on line 15, column (a). If line 11 is equal to or more than line 10 for all payment periods, stop here; you don't owe a penalty. <b>Don't file Form 2210 unless you checked a box in Part II</b> | <b>11</b> | <b>12,661</b>     | <b>12,661</b>  | <b>12,661</b>  | <b>12,660</b>  |

Complete lines 12 through 18 of one column before going to line 12 of the next column.

|                                                                                                                                                                     |           |               |               |               |               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------|---------------|---------------|---------------|
| <b>12</b> Enter the amount, if any, from line 18 in the previous column                                                                                             | <b>12</b> |               | <b>2,030</b>  | <b>4,060</b>  | <b>6,090</b>  |
| <b>13</b> Add lines 11 and 12                                                                                                                                       | <b>13</b> |               | <b>14,691</b> | <b>16,721</b> | <b>18,750</b> |
| <b>14</b> Add the amounts on lines 16 and 17 in the previous column                                                                                                 | <b>14</b> |               |               |               |               |
| <b>15</b> Subtract line 14 from line 13. If zero or less, enter -0-. For column (a) only, enter the amount from line 11                                             | <b>15</b> | <b>12,661</b> | <b>14,691</b> | <b>16,721</b> | <b>18,750</b> |
| <b>16</b> If line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-                                                                                   | <b>16</b> |               | <b>0</b>      | <b>0</b>      |               |
| <b>17 Underpayment.</b> If line 10 is equal to or more than line 15, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 | <b>17</b> |               |               |               |               |
| <b>18 Overpayment.</b> If line 15 is more than line 10, subtract line 10 from line 15. Then go to line 12 of the next column                                        | <b>18</b> | <b>2,030</b>  | <b>4,060</b>  | <b>6,090</b>  |               |

**Section B—Figure the Penalty** (Use the Worksheet for Form 2210, Part III, Section B — Figure the Penalty in the instructions.)

|                                                                                                                                                                                                                                                                                                  |           |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--|
| <b>19 Penalty.</b> Enter the total penalty from line 14 of the Worksheet for Form 2210, Part III, Section B — Figure the Penalty. Also include this amount on Form 1040, 1040-SR, or 1040-NR, line 38; or Form 1041, line 27.<br><b>Don't file Form 2210 unless you checked a box in Part II</b> | <b>19</b> |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--|

Form **2210** (2024)

## Cheryl L Grieb &amp; Patricia L Daugherty

Form 2210 (2024)

Page 3

**Schedule AI—Annualized Income Installment Method** (See the instructions.)Estates and trusts, **don't** use the period ending dates shown to the right.

Instead, use the following: 2/29/24, 4/30/24, 7/31/24, and 11/30/24.

(a)

1/1/24–3/31/24

(b)

1/1/24–5/31/24

(c)

1/1/24–8/31/24

(d)

1/1/24–12/31/24

**Part I Annualized Income Installments**

|                                                                                                                                                                                                          |    |         |         |         |           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------|---------|---------|-----------|
| 1 Enter your adjusted gross income for each period. See instructions. (Estates and trusts, enter your taxable income without your exemption for each period.)                                            | 1  | 133,039 | 221,731 | 354,770 | 1,051,639 |
| 2 Annualization amounts. (Estates and trusts, see instructions.)                                                                                                                                         | 2  | 4       | 2.4     | 1.5     | 1         |
| 3 Annualized income. Multiply line 1 by line 2                                                                                                                                                           | 3  | 532,156 | 532,154 | 532,155 | 1,051,639 |
| 4 If you itemize, enter itemized deductions for the period shown in each column. All others, enter -0-, and skip to line 7. <b>Exception:</b> Estates and trusts, skip to line 9                         | 4  | 0       | 0       | 0       | 0         |
| 5 Annualization amounts                                                                                                                                                                                  | 5  | 4       | 2.4     | 1.5     | 1         |
| 6 Multiply line 4 by line 5                                                                                                                                                                              | 6  | 0       | 0       | 0       | 0         |
| 7 In each column, enter the amount of your standard deduction from Form 1040 or 1040-SR. (Form 1040-NR filers, enter -0-. <b>Exception:</b> Indian students and business apprentices, see instructions.) | 7  | 30,750  | 30,750  | 30,750  | 30,750    |
| 8 Enter the <b>larger</b> of line 6 or line 7                                                                                                                                                            | 8  | 30,750  | 30,750  | 30,750  | 30,750    |
| 9 Deduction for qualified business income. <b>Estates and trusts:</b> Subtract this amount from the amount on line 3, skip line 10, and enter the result on line 11                                      | 9  | 3,757   | 6,261   | 10,017  | 15,026    |
| 10 Add lines 8 and 9                                                                                                                                                                                     | 10 | 34,507  | 37,011  | 40,767  | 45,776    |
| 11 Subtract line 10 from line 3                                                                                                                                                                          | 11 | 497,649 | 495,143 | 491,388 | 1,005,863 |
| 12 Form 1040, 1040-SR, or 1040-NR filers, enter -0- in each column. (Estates and trusts, see instructions.)                                                                                              | 12 | 0       | 0       | 0       | 0         |
| 13 Subtract line 12 from line 11. If zero or less, enter -0-                                                                                                                                             | 13 | 497,649 | 495,143 | 491,388 | 1,005,863 |
| 14 Figure your tax on the amount on line 13. See instructions                                                                                                                                            | 14 | 114,927 | 114,050 | 112,735 | 225,855   |
| 15 Self-employment tax from line 36 (complete Part II below)                                                                                                                                             | 15 | 4,115   | 4,113   | 4,114   | 4,114     |
| 16 Enter other taxes for each payment period including, if applicable, Additional Medicare Tax and/or Net Investment Income Tax. See instructions                                                        | 16 | 208     | 346     | 554     | 831       |
| 17 Total tax. Add lines 14, 15, and 16                                                                                                                                                                   | 17 | 119,250 | 118,509 | 117,403 | 230,800   |
| 18 For each period, enter the same type of credits as allowed on Form 2210, Part I, lines 1 and 3. See instructions                                                                                      | 18 |         |         |         |           |
| 19 Subtract line 18 from line 17. If zero or less, enter -0-                                                                                                                                             | 19 | 119,250 | 118,509 | 117,403 | 230,800   |
| 20 Applicable percentage                                                                                                                                                                                 | 20 | 22.5%   | 45%     | 67.5%   | 90%       |
| 21 Multiply line 19 by line 20                                                                                                                                                                           | 21 | 26,831  | 53,329  | 79,247  | 207,720   |

Complete lines 22–27 of one column before going to line 22 of the next column.

|                                                                                            |    |        |        |        |         |
|--------------------------------------------------------------------------------------------|----|--------|--------|--------|---------|
| 22 Enter the total of the amounts in all previous columns of line 27                       | 22 |        | 10,631 | 21,262 | 31,893  |
| 23 Subtract line 22 from line 21. If zero or less, enter -0-                               | 23 | 26,831 | 42,698 | 57,985 | 175,827 |
| 24 Enter 25% (0.25) of line 9 on page 1 of Form 2210 in each column                        | 24 | 10,631 | 10,631 | 10,631 | 10,630  |
| 25 Subtract line 27 of the previous column from line 26 of that column                     | 25 |        |        |        |         |
| 26 Add lines 24 and 25                                                                     | 26 | 10,631 | 10,631 | 10,631 | 10,630  |
| 27 Enter the <b>smaller</b> of line 23 or line 26 here and on Form 2210, Part III, line 10 | 27 | 10,631 | 10,631 | 10,631 | 10,630  |

**Part II Annualized Self-Employment Tax** (Form 1040, 1040-SR, or 1040-NR filers only)

|                                                                                                                                                                                                                |    |        |        |         |         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------|--------|---------|---------|
| 28 Net earnings from self-employment for the period (see instructions)                                                                                                                                         | 28 | 243    | 404    | 647     | 970     |
| 29 Prorated social security tax limit                                                                                                                                                                          | 29 | 42,150 | 70,250 | 112,400 | 168,600 |
| 30 Enter actual wages for the period subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax. <b>Exception:</b> If you filed Form 4137 or Form 8919, see instructions | 30 | 32,559 | 54,264 | 86,823  | 130,234 |
| 31 Subtract line 30 from line 29. If zero or less, enter -0-                                                                                                                                                   | 31 | 9,591  | 15,986 | 25,577  | 38,366  |
| 32 Annualization amounts                                                                                                                                                                                       | 32 | 0.4960 | 0.2976 | 0.1860  | 0.1240  |
| 33 Multiply line 32 by the <b>smaller</b> of line 28 or line 31                                                                                                                                                | 33 | 121    | 120    | 120     | 120     |
| 34 Annualization amounts                                                                                                                                                                                       | 34 | 0.116  | 0.0696 | 0.0435  | 0.029   |
| 35 Multiply line 28 by line 34                                                                                                                                                                                 | 35 | 28     | 28     | 28      | 28      |
| 36 Add lines 33 and 35. Enter here and on line 15 above                                                                                                                                                        | 36 | 149    | 148    | 148     | 148     |

## Cheryl L Grieb &amp; Patricia L Daugherty

Form 2210 (2024)

Page 3

**Schedule AI—Annualized Income Installment Method** (See the instructions.)

Estates and trusts, **don't** use the period ending dates shown to the right.  
Instead, use the following: 2/29/24, 4/30/24, 7/31/24, and 11/30/24.

|  | (a)            | (b)            | (c)            | (d)             |
|--|----------------|----------------|----------------|-----------------|
|  | 1/1/24–3/31/24 | 1/1/24–5/31/24 | 1/1/24–8/31/24 | 1/1/24–12/31/24 |

**Part I Annualized Income Installments**

|                                                                                                                                                                                                          |    |       |     |       |     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-------|-----|-------|-----|
| 1 Enter your adjusted gross income for each period. See instructions. (Estates and trusts, enter your taxable income without your exemption for each period.)                                            | 1  |       |     |       |     |
| 2 Annualization amounts. (Estates and trusts, see instructions.)                                                                                                                                         | 2  | 4     | 2.4 | 1.5   | 1   |
| 3 Annualized income. Multiply line 1 by line 2                                                                                                                                                           | 3  |       |     |       |     |
| 4 If you itemize, enter itemized deductions for the period shown in each column. All others, enter -0-, and skip to line 7. <b>Exception:</b> Estates and trusts, skip to line 9                         | 4  |       |     |       |     |
| 5 Annualization amounts                                                                                                                                                                                  | 5  | 4     | 2.4 | 1.5   | 1   |
| 6 Multiply line 4 by line 5                                                                                                                                                                              | 6  |       |     |       |     |
| 7 In each column, enter the amount of your standard deduction from Form 1040 or 1040-SR. (Form 1040-NR filers, enter -0-. <b>Exception:</b> Indian students and business apprentices, see instructions.) | 7  |       |     |       |     |
| 8 Enter the <b>larger</b> of line 6 or line 7                                                                                                                                                            | 8  |       |     |       |     |
| 9 Deduction for qualified business income. <b>Estates and trusts:</b> Subtract this amount from the amount on line 3, skip line 10, and enter the result on line 11                                      | 9  |       |     |       |     |
| 10 Add lines 8 and 9                                                                                                                                                                                     | 10 |       |     |       |     |
| 11 Subtract line 10 from line 3                                                                                                                                                                          | 11 |       |     |       |     |
| 12 Form 1040, 1040-SR, or 1040-NR filers, enter -0- in each column. (Estates and trusts, see instructions.)                                                                                              | 12 |       |     |       |     |
| 13 Subtract line 12 from line 11. If zero or less, enter -0-                                                                                                                                             | 13 |       |     |       |     |
| 14 Figure your tax on the amount on line 13. See instructions                                                                                                                                            | 14 |       |     |       |     |
| 15 Self-employment tax from line 36 (complete Part II below)                                                                                                                                             | 15 |       |     |       |     |
| 16 Enter other taxes for each payment period including, if applicable, Additional Medicare Tax and/or Net Investment Income Tax. See instructions                                                        | 16 |       |     |       |     |
| 17 Total tax. Add lines 14, 15, and 16                                                                                                                                                                   | 17 |       |     |       |     |
| 18 For each period, enter the same type of credits as allowed on Form 2210, Part I, lines 1 and 3. See instructions                                                                                      | 18 |       |     |       |     |
| 19 Subtract line 18 from line 17. If zero or less, enter -0-                                                                                                                                             | 19 |       |     |       |     |
| 20 Applicable percentage                                                                                                                                                                                 | 20 | 22.5% | 45% | 67.5% | 90% |
| 21 Multiply line 19 by line 20                                                                                                                                                                           | 21 |       |     |       |     |

Complete lines 22–27 of one column before going to line 22 of the next column.

|                                                                                            |    |  |  |  |  |
|--------------------------------------------------------------------------------------------|----|--|--|--|--|
| 22 Enter the total of the amounts in all previous columns of line 21                       | 22 |  |  |  |  |
| 23 Subtract line 22 from line 21. If zero or less, enter -0-                               | 23 |  |  |  |  |
| 24 Enter 25% (0.25) of line 9 on page 1 of Form 2210 in each column                        | 24 |  |  |  |  |
| 25 Subtract line 27 of the previous column from line 26 of that column                     | 25 |  |  |  |  |
| 26 Add lines 24 and 25                                                                     | 26 |  |  |  |  |
| 27 Enter the <b>smaller</b> of line 23 or line 26 here and on Form 2210, Part III, line 10 | 27 |  |  |  |  |

**Part II Annualized Self-Employment Tax** (Form 1040, 1040-SR, or 1040-NR filers only)

|                                                                                                                                                                                                                |    |        |        |         |         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------|--------|---------|---------|
| 28 Net earnings from self-employment for the period (see instructions)                                                                                                                                         | 28 | 6,479  | 10,798 | 17,277  | 25,916  |
| 29 Prorated social security tax limit                                                                                                                                                                          | 29 | 42,150 | 70,250 | 112,400 | 168,600 |
| 30 Enter actual wages for the period subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax. <b>Exception:</b> If you filed Form 4137 or Form 8919, see instructions | 30 |        |        |         |         |
| 31 Subtract line 30 from line 29. If zero or less, enter -0-                                                                                                                                                   | 31 | 42,150 | 70,250 | 112,400 | 168,600 |
| 32 Annualization amounts                                                                                                                                                                                       | 32 | 0.4960 | 0.2976 | 0.1860  | 0.1240  |
| 33 Multiply line 32 by the <b>smaller</b> of line 28 or line 31                                                                                                                                                | 33 | 3,214  | 3,213  | 3,214   | 3,214   |
| 34 Annualization amounts                                                                                                                                                                                       | 34 | 0.116  | 0.0696 | 0.0435  | 0.029   |
| 35 Multiply line 28 by line 34                                                                                                                                                                                 | 35 | 752    | 752    | 752     | 752     |
| 36 Add lines 33 and 35. Enter here and on line 15 above                                                                                                                                                        | 36 | 3,966  | 3,965  | 3,966   | 3,966   |

**SCHEDULE B**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service**Interest and Ordinary Dividends**

Attach to Form 1040 or 1040-SR.

Go to [www.irs.gov/ScheduleB](http://www.irs.gov/ScheduleB) for instructions and the latest information.

OMB No. 1545-0074

**2024**Attachment  
Sequence No. **08**

Name(s) shown on return

Your social security number

**Cheryl L Grieb & Patricia L Daugherty****Part I****Interest**(See instructions  
and the  
Instructions for  
Form 1040,  
line 2b.)**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.

|                                                                                                                                                                                                                                                  | 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: |              |
| <b>Addition Financial</b>                                                                                                                                                                                                                        | <b>482</b>   |
| <b>South State Bank, N.A.</b>                                                                                                                                                                                                                    | <b>3,486</b> |
| <b>Ameritas Advisory Services</b>                                                                                                                                                                                                                | <b>25</b>    |
| <b>Olde Kissimmee Investments Inc      **-***7893</b>                                                                                                                                                                                            | <b>284</b>   |
| <b>Olde Kissimmee Investments Inc      **-***7893</b>                                                                                                                                                                                            | <b>284</b>   |
| 2 Add the amounts on line 1                                                                                                                                                                                                                      | <b>4,561</b> |
| 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815                                                                                                                                                  |              |
| 4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b                                                                                                                                                        | <b>4,561</b> |

**Note:** If line 4 is over \$1,500, you must complete Part III.**Part II****Ordinary  
Dividends**(See instructions  
and the  
Instructions for  
Form 1040,  
line 3b.)**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.

|                                                                                        | Amount       |
|----------------------------------------------------------------------------------------|--------------|
| 5 List name of payer:                                                                  |              |
| <b>AT&amp;T</b>                                                                        | <b>439</b>   |
| <b>Public Service Enterprise</b>                                                       | <b>6,605</b> |
| <b>Ameritas Advisory Services</b>                                                      | <b>428</b>   |
| 6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b | <b>7,472</b> |

**Note:** If line 6 is over \$1,500, you must complete Part III.**Part III****Foreign  
Accounts  
and Trusts****Caution:** If  
required, failure to  
file FinCEN Form  
114 may result in  
substantial  
penalties.  
Additionally, you  
may be required  
to file Form 8938,  
Statement of  
Specified Foreign  
Financial Assets.  
See instructions.

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 2024, 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                                        |     | <b>X</b> |
| 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, list the name(s) of the foreign country(-ies) where the financial account(s) is (are) located:                                                                                                                             |     |          |
| 8 During 2024, 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                                                                                             |     | <b>X</b> |

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

Schedule B (Form 1040) 2024

**SCHEDULE C**  
**(Form 1040)****Profit or Loss From Business**

(Sole Proprietorship)

OMB No. 1545-0074

**2024**Department of the Treasury  
Internal Revenue ServiceAttach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065.  
Go to [www.irs.gov/ScheduleC](http://www.irs.gov/ScheduleC) for instructions and the latest information.Attachment  
Sequence No. **09**

Name of proprietor

**Patricia L Daugherty**

Social security number (SSN)

Enter code from instructions  
**541100****A** Principal business or profession, including product or service (see instructions)  
**Attorney****C** Business name. If no separate business name, leave blank.**Patricia L Daugherty, Attorney****D** Employer ID number (EIN) (see instr.)  
**\*\*-\*\*\*7441****E** Business address (including suite or room no.) **11 N Vernon Ave**City, town or post office, state, and ZIP code **KISSIMMEE FL 34741-5110****F** Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify)**G** Did you "materially participate" in the operation of this business during 2024? If "No," see instructions for limit on losses☒ Yes ☐ No**H** If you started or acquired this business during 2024, check here**I** Did you make any payments in 2024 that would require you to file Form(s) 1099? See instructions☒ Yes ☐ No**J** If "Yes," did you or will you file required Form(s) 1099?☒ Yes ☐ No**Part I Income**

|                                                                                                                                                                                                                   |          |                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------|
| <b>1</b> Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/> | <b>1</b> | <b>105,181</b> |
| <b>2</b> Returns and allowances                                                                                                                                                                                   | <b>2</b> |                |
| <b>3</b> Subtract line 2 from line 1                                                                                                                                                                              | <b>3</b> | <b>105,181</b> |
| <b>4</b> Cost of goods sold (from line 42)                                                                                                                                                                        | <b>4</b> |                |
| <b>5</b> <b>Gross profit.</b> Subtract line 4 from line 3                                                                                                                                                         | <b>5</b> | <b>105,181</b> |
| <b>6</b> Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)                                                                                                       | <b>6</b> |                |
| <b>7</b> <b>Gross income.</b> Add lines 5 and 6                                                                                                                                                                   | <b>7</b> | <b>105,181</b> |

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                       |               |                                                                         |            |               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------------|------------|---------------|
| <b>8</b> Advertising                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>8</b>                                                                                                                              |               | <b>18</b> Office expense (see instructions)                             | <b>18</b>  | <b>2,365</b>  |
| <b>9</b> Car and truck expenses (see instructions)                                                                                                                                                                                                                                                                                                                                                                                                                | <b>9</b>                                                                                                                              | <b>6,586</b>  | <b>19</b> Pension and profit-sharing plans                              | <b>19</b>  |               |
| <b>10</b> Commissions and fees                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>10</b>                                                                                                                             |               | <b>20</b> Rent or lease (see instructions):                             |            |               |
| <b>11</b> Contract labor (see instructions)                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>11</b>                                                                                                                             |               | <b>a</b> Vehicles, machinery, and equipment                             | <b>20a</b> |               |
| <b>12</b> Depreciation                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>12</b>                                                                                                                             |               | <b>b</b> Other business property                                        | <b>20b</b> | <b>6,272</b>  |
| <b>13</b> Depreciation and section 179 expense deduction (not included in Part III) (see instructions)                                                                                                                                                                                                                                                                                                                                                            | <b>13</b>                                                                                                                             |               | <b>21</b> Repairs and maintenance                                       | <b>21</b>  | <b>90</b>     |
| <b>14</b> Employee benefit programs (other than on line 19)                                                                                                                                                                                                                                                                                                                                                                                                       | <b>14</b>                                                                                                                             |               | <b>22</b> Supplies (not included in Part III)                           | <b>22</b>  |               |
| <b>15</b> Insurance (other than health)                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>15</b>                                                                                                                             | <b>7,017</b>  | <b>23</b> Taxes and licenses                                            | <b>23</b>  | <b>1,233</b>  |
| <b>16</b> Interest (see instructions):                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                       |               | <b>24</b> Travel and meals:                                             |            |               |
| <b>a</b> Mortgage (paid to banks, etc.)                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>16a</b>                                                                                                                            |               | <b>a</b> Travel                                                         | <b>24a</b> |               |
| <b>b</b> Other                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>16b</b>                                                                                                                            |               | <b>b</b> Deductible meals (see instructions)                            | <b>24b</b> |               |
| <b>17</b> Legal and professional services                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>17</b>                                                                                                                             | <b>7,250</b>  | <b>25</b> Utilities                                                     | <b>25</b>  | <b>892</b>    |
| <b>28</b> <b>Total expenses</b> before expenses for business use of home. Add lines 8 through 27b                                                                                                                                                                                                                                                                                                                                                                 | <b>28</b>                                                                                                                             |               | <b>26</b> Wages (less employment credits)                               | <b>26</b>  | <b>32,031</b> |
| <b>29</b> Tentative profit or (loss). Subtract line 28 from line 7                                                                                                                                                                                                                                                                                                                                                                                                | <b>29</b>                                                                                                                             |               | <b>27a</b> Other expenses (from line 48)                                | <b>27a</b> | <b>13,382</b> |
| <b>30</b> Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions.<br><b>Simplified method filers only:</b> Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30                                         | <b>30</b>                                                                                                                             |               | <b>b</b> Energy efficient commercial bldgs deduction (attach Form 7205) | <b>27b</b> |               |
| <b>31</b> <b>Net profit or (loss).</b> Subtract line 30 from line 29.<br>• If a profit, enter on both <b>Schedule 1 (Form 1040), line 3</b> , and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see instructions.) Estates and trusts, enter on <b>Form 1041, line 3</b> .<br>• If a loss, you <b>must</b> go to line 32.                                                                                                                    | <b>31</b>                                                                                                                             | <b>28,063</b> |                                                                         |            |               |
| <b>32</b> If you have a loss, check the box that describes your investment in this activity. See instructions.<br>• If you checked 32a, enter the loss on both <b>Schedule 1 (Form 1040), line 3</b> , and on <b>Schedule SE, line 2</b> . (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on <b>Form 1041, line 3</b> .<br>• If you checked 32b, you <b>must</b> attach <b>Form 6198</b> . Your loss may be limited. | <b>32a</b> <input type="checkbox"/> All investment is at risk.<br><b>32b</b> <input type="checkbox"/> Some investment is not at risk. |               |                                                                         |            |               |

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule C (Form 1040) 2024

Patricia L Daugherty

Schedule C (Form 1040) 2024

Attorney

Page 2

|                 |                                              |
|-----------------|----------------------------------------------|
| <b>Part III</b> | <b>Cost of Goods Sold</b> (see instructions) |
|-----------------|----------------------------------------------|

33 Method(s) used to value closing inventory:    **a** ☐ Cost    **b** ☐ Lower of cost or market    **c** ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory?  
If "Yes," attach explanation ..... ☐ Yes    ☐ No

|                                                                                                              |    |  |
|--------------------------------------------------------------------------------------------------------------|----|--|
| 35 Inventory at beginning of year. If different from last year's closing inventory, attach explanation ..... | 35 |  |
| 36 Purchases less cost of items withdrawn for personal use .....                                             | 36 |  |
| 37 Cost of labor. Do not include any amounts paid to yourself .....                                          | 37 |  |
| 38 Materials and supplies .....                                                                              | 38 |  |
| 39 Other costs ..... <b>See Statement 1</b>                                                                  | 39 |  |
| 40 Add lines 35 through 39 .....                                                                             | 40 |  |
| 41 Inventory at end of year .....                                                                            | 41 |  |
| 42 <b>Cost of goods sold.</b> Subtract line 41 from line 40. Enter the result here and on line 4 .....       | 42 |  |

**Part IV Information on Your Vehicle.** Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month/day/year) See Stmt 2

44 Of the total number of miles you drove your vehicle during 2024, enter the number of miles you used your vehicle for:

|            |              |                                |  |         |  |
|------------|--------------|--------------------------------|--|---------|--|
| a Business | <u>9,532</u> | b Commuting (see instructions) |  | c Other |  |
|------------|--------------|--------------------------------|--|---------|--|

45 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

46 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

47a Do you have evidence to support your deduction? ☐ Yes ☐ No

b If "Yes," is the evidence written? ☐ Yes ☐ No

|               |                                                                                                       |
|---------------|-------------------------------------------------------------------------------------------------------|
| <b>Part V</b> | <b>Other Expenses.</b> List below business expenses not included on lines 8-26, line 27b, or line 30. |
|---------------|-------------------------------------------------------------------------------------------------------|

[illegible]

**SCHEDULE D**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service**Capital Gains and Losses**

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

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

OMB No. 1545-0074

**2024**Attachment  
Sequence No. 12

Name(s) shown on return

Your social security number

**Cheryl L Grieb & Patricia L Daugherty**Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☒ No

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

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

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

|                                                                                                                                                                                                                                                                                                | (d)<br>Proceeds<br>(sales price) | (e)<br>Cost<br>(or other basis) | (g)<br>Adjustments<br>to gain or loss from<br>Form(s) 8949, Part I,<br>line 2, column (g) | (h) Gain or (loss)<br>Subtract column (e)<br>from column (d) and<br>combine the result<br>with column (g) |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|---------------------------------|-------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| <b>1a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . . . |                                  |                                 |                                                                                           |                                                                                                           |
| <b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked . . . . .                                                                                                                                                                                             |                                  |                                 |                                                                                           |                                                                                                           |
| <b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked . . . . .                                                                                                                                                                                              |                                  |                                 |                                                                                           |                                                                                                           |
| <b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked . . . . .                                                                                                                                                                                              |                                  |                                 |                                                                                           |                                                                                                           |
| <b>4</b> Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 . . . . .                                                                                                                                                                                |                                  |                                 |                                                                                           | <b>4</b>                                                                                                  |
| <b>5</b> Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 . . . . .                                                                                                                                                                   |                                  |                                 |                                                                                           | <b>5</b>                                                                                                  |
| <b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 8 of your <b>Capital Loss Carryover Worksheet</b> in the instructions . . . . .                                                                                                                                |                                  |                                 |                                                                                           | <b>6</b> ( )                                                                                              |
| <b>7</b> <b>Net short-term capital gain or (loss).</b> Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back . . . . .                                                                       |                                  |                                 |                                                                                           | <b>7</b> <b>0</b>                                                                                         |

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

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

|                                                                                                                                                                                                                                                                                               | (d)<br>Proceeds<br>(sales price) | (e)<br>Cost<br>(or other basis) | (g)<br>Adjustments<br>to gain or loss from<br>Form(s) 8949, Part II,<br>line 2, column (g) | (h) Gain or (loss)<br>Subtract column (e)<br>from column (d) and<br>combine the result<br>with column (g) |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|---------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| <b>8a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . . . |                                  |                                 |                                                                                            |                                                                                                           |
| <b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked . . . . .                                                                                                                                                                                            |                                  |                                 |                                                                                            |                                                                                                           |
| <b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked . . . . .                                                                                                                                                                                             |                                  |                                 |                                                                                            |                                                                                                           |
| <b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked . . . . .                                                                                                                                                                                            |                                  |                                 |                                                                                            |                                                                                                           |
| <b>11</b> Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 . . . . .                                                                                                                                        |                                  |                                 |                                                                                            | <b>11</b> <b>519,480</b>                                                                                  |
| <b>12</b> Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 . . . . .                                                                                                                                                                  |                                  |                                 |                                                                                            | <b>12</b>                                                                                                 |
| <b>13</b> Capital gain distributions. See the instructions . . . . .                                                                                                                                                                                                                          |                                  |                                 |                                                                                            | <b>13</b> <b>1,103</b>                                                                                    |
| <b>14</b> Long-term capital loss carryover. Enter the amount, if any, from line 13 of your <b>Capital Loss Carryover Worksheet</b> in the instructions . . . . .                                                                                                                              |                                  |                                 |                                                                                            | <b>14</b> ( )                                                                                             |
| <b>15</b> <b>Net long-term capital gain or (loss).</b> Combine lines 8a through 14 in column (h). Then, go to Part III on the back . . . . .                                                                                                                                                  |                                  |                                 |                                                                                            | <b>15</b> <b>520,583</b>                                                                                  |

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

Schedule D (Form 1040) 2024

## Cheryl L Grieb &amp; Patricia L Daugherty

Schedule D (Form 1040) 2024

Page **2****Part III Summary**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |             |                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------|
| <b>16</b> Combine lines 7 and 15 and enter the result .....                                                                                                                                                                                                                                                                                                                                                                                                            | <b>16</b>   | <b>520,583</b> |
| <ul style="list-style-type: none"> <li>• If line 16 is a <b>gain</b>, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.</li> <li>• If line 16 is a <b>loss</b>, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.</li> <li>• If line 16 is <b>zero</b>, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.</li> </ul> |             |                |
| <b>17</b> Are lines 15 and 16 <b>both</b> gains?<br><input checked="" type="checkbox"/> <b>Yes.</b> Go to line 18.<br><input type="checkbox"/> <b>No.</b> Skip lines 18 through 21, and go to line 22.                                                                                                                                                                                                                                                                 |             |                |
| <b>18</b> If you are required to complete the <b>28% Rate Gain Worksheet</b> (see instructions), enter the amount, if any, from line 7 of that worksheet .....                                                                                                                                                                                                                                                                                                         | <b>18</b>   |                |
| <b>19</b> If you are required to complete the <b>Unrecaptured Section 1250 Gain Worksheet</b> (see instructions), enter the amount, if any, from line 18 of that worksheet .....                                                                                                                                                                                                                                                                                       | <b>19</b>   | <b>344,367</b> |
| <b>20</b> Are lines 18 and 19 both zero or blank and you are not filing Form 4952?<br><input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 16. <b>Don't</b> complete lines 21 and 22 below.<br><br><input checked="" type="checkbox"/> <b>No.</b> Complete the <b>Schedule D Tax Worksheet</b> in the instructions. <b>Don't</b> complete lines 21 and 22 below.        |             |                |
| <b>21</b> If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the <b>smaller</b> of:<br><br><div style="display: flex; align-items: center;"> <ul style="list-style-type: none"> <li>• The loss on line 16; or</li> <li>• (\$3,000), or if married filing separately, (\$1,500)</li> </ul> <div style="margin-left: 10px;"> <div style="border-left: 1px solid black; height: 20px; width: 100px;"></div> </div> </div>                    | <b>21</b> ( | )              |
| <b>Note:</b> When figuring which amount is smaller, treat both amounts as positive numbers.                                                                                                                                                                                                                                                                                                                                                                            |             |                |
| <b>22</b> Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a?<br><br><input type="checkbox"/> <b>Yes.</b> Complete the <b>Qualified Dividends and Capital Gain Tax Worksheet</b> in the instructions for Form 1040, line 16.<br><br><input type="checkbox"/> <b>No.</b> Complete the rest of Form 1040, 1040-SR, or 1040-NR.                                                                                                                   |             |                |

Schedule D (Form 1040) 2024

SCHEDULE E  
(Form 1040)

Department of the Treasury  
Internal Revenue Service

Name(s) shown on return

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](http://www.irs.gov/ScheduleE) for instructions and the latest information.

OMB No. 1545-0074

2024

Attachment  
Sequence No. 13

Your social security number

Cheryl L Grieb & Patricia L Daugherty

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 2024 that would require you to file Form(s) 1099? See instructions | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| B | If "Yes," did you or will you file required Form(s) 1099?                                       | <input type="checkbox"/> Yes | <input type="checkbox"/> No            |

|    |                                                                   |
|----|-------------------------------------------------------------------|
| 1a | Physical address of each property (street, city, state, ZIP code) |
| A  | 608 Jacaranda Ln, KISSIMEE, FL 34744                              |
| B  | 815 Hastings Dr., KISSIMEE, FL 34744                              |
| C  |                                                                   |

| 1b | Type of Property<br>(from list below) | 2                                                                                                                                                                                                                      | Fair Rental<br>Days | Personal Use<br>Days | QJV |
|----|---------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------------------|-----|
| A  | 1                                     | 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. | A                   | 366                  |     |
| B  | 1                                     |                                                                                                                                                                                                                        | B                   | 366                  |     |
| 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) |

|           |                                                                                                                                                                                                                                                                                                        | Properties: |        |   |
|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------|---|
| Income:   |                                                                                                                                                                                                                                                                                                        | A           | B      | C |
| 3         | Rents received                                                                                                                                                                                                                                                                                         | 14,700      | 20,200 |   |
| 4         | Royalties received                                                                                                                                                                                                                                                                                     |             |        |   |
| Expenses: |                                                                                                                                                                                                                                                                                                        |             |        |   |
| 5         | Advertising                                                                                                                                                                                                                                                                                            |             |        |   |
| 6         | Auto and travel (see instructions)                                                                                                                                                                                                                                                                     |             |        |   |
| 7         | Cleaning and maintenance                                                                                                                                                                                                                                                                               | 350         | 461    |   |
| 8         | Commissions                                                                                                                                                                                                                                                                                            |             |        |   |
| 9         | Insurance                                                                                                                                                                                                                                                                                              | 3,923       | 4,075  |   |
| 10        | Legal and other professional fees                                                                                                                                                                                                                                                                      |             |        |   |
| 11        | Management fees                                                                                                                                                                                                                                                                                        |             |        |   |
| 12        | Mortgage interest paid to banks, etc. (see instructions)                                                                                                                                                                                                                                               |             |        |   |
| 13        | Other interest                                                                                                                                                                                                                                                                                         |             |        |   |
| 14        | Repairs                                                                                                                                                                                                                                                                                                | 5,164       | 350    |   |
| 15        | Supplies                                                                                                                                                                                                                                                                                               |             |        |   |
| 16        | Taxes                                                                                                                                                                                                                                                                                                  | 2,820       | 3,330  |   |
| 17        | Utilities                                                                                                                                                                                                                                                                                              |             |        |   |
| 18        | Depreciation expense or depletion                                                                                                                                                                                                                                                                      | 2,420       | 3,265  |   |
| 19        | Other (list)                                                                                                                                                                                                                                                                                           |             |        |   |
| 20        | Total expenses. Add lines 5 through 19                                                                                                                                                                                                                                                                 | 14,677      | 11,481 |   |
| 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 <b>Form 6198</b>                                                                                                                                                       | 23          | 8,719  |   |
| 22        | Deductible rental real estate loss after limitation, if any, on <b>Form 8582</b> (see instructions)                                                                                                                                                                                                    | 0           | 0      |   |
| 23a       | Total of all amounts reported on line 3 for all rental properties                                                                                                                                                                                                                                      | 23a         | 34,900 |   |
| 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         | 5,685  |   |
| e         | Total of all amounts reported on line 20 for all properties                                                                                                                                                                                                                                            | 23e         | 26,158 |   |
| 24        | Income. Add positive amounts shown on line 21. Do not include any losses                                                                                                                                                                                                                               | 24          | 8,742  |   |
| 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, and 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          | 8,742  |   |

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Schedule E (Form 1040) 2024

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

Your social security number

**Cheryl L Grieb & Patricia L Daugherty****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  | See Statement 3 |                                                  |                                  |                                    |                                            |                                        |
| B  |                 |                                                  |                                  |                                    |                                            |                                        |
| C  |                 |                                                  |                                  |                                    |                                            |                                        |
| D  |                 |                                                  |                                  |                                    |                                            |                                        |

| Passive Income and Loss                                                          |                                      | Nonpassive Income and Loss                     |                                                  |
|----------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------|--------------------------------------------------|
| (g) Passive loss allowed (attach Form 8582 if required)                          | (h) Passive income from Schedule K-1 | (i) Nonpassive loss allowed (see Schedule K-1) | (j) Section 179 expense deduction from Form 4562 |
| A                                                                                |                                      |                                                |                                                  |
| B                                                                                |                                      |                                                |                                                  |
| C                                                                                |                                      |                                                |                                                  |
| D                                                                                |                                      |                                                |                                                  |
| 29a Totals                                                                       |                                      |                                                | 369,091                                          |
| b Totals                                                                         |                                      |                                                |                                                  |
| 30 Add columns (h) and (k) of line 29a                                           |                                      |                                                | 369,091                                          |
| 31 Add columns (g), (i), and (j) of line 29b                                     |                                      |                                                |                                                  |
| 32 Total partnership and S corporation income or (loss). Combine lines 30 and 31 |                                      |                                                | 369,091                                          |

**Part III Income or Loss From Estates and Trusts**

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

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

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

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

**Part V Summary**

|    |                                                                                                                                                                                                                                                                                                                             |    |         |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------|
| 40 | Net farm rental income or (loss) from Form 4835. Also, complete line 42 below                                                                                                                                                                                                                                               | 40 |         |
| 41 | Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5                                                                                                                                                                                                   | 41 | 377,833 |
| 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 AN; 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 | 888,571 |

**SCHEDULE SE**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service**Self-Employment Tax**

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

Go to [www.irs.gov/ScheduleSE](http://www.irs.gov/ScheduleSE) for instructions and the latest information.

OMB No. 1545-0074

**2024**Attachment  
Sequence No. **17**

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

Social security number of person

**Cheryl L Grieb**with **self-employment** income**Part I Self-Employment Tax****Note:** If your only income subject to self-employment tax is **church employee income**, see instructions for how to report your income and the definition of church employee income.

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

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

- 1a**
- Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A

**1a**

- b**
- If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AQ

**1b**

Skip line 2 if you use the nonfarm optional method in Part II. See instructions.

- 2**
- Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order

**2****1,050**

- 3**
- Combine lines 1a, 1b, and 2

**3****1,050**

- 4a**
- If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3

**4a****970****Note:** If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.

- b**
- If you elect one or both of the optional methods, enter the total of lines 15 and 17 here

**4b**

- c**
- Combine lines 4a and 4b. If less than \$400,
- stop**
- ; you don't owe self-employment tax.
- Exception:**
- If less than \$400 and you had
- church employee income**
- , enter -0- and continue

**4c****970**

- 5a**
- Enter your
- church employee income**
- from Form W-2. See instructions for definition of church employee income

**5a**

- b**
- Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-

**5b****0**

- 6**
- Add lines 4c and 5b

**6****970**

- 7**
- Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2024

**7****168,600**

- 8a**
- Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$168,600 or more, skip lines 8b through 10, and go to line 11

**8a****130,234**

- b**
- Unreported tips subject to social security tax from Form 4137, line 10

**8b**

- c**
- Wages subject to social security tax from Form 8919, line 10

**8c**

- d**
- Add lines 8a, 8b, and 8c

**8d****130,234**

- 9**
- Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11

**9****38,366**

- 10**
- Multiply the
- smaller**
- of line 6 or line 9 by 12.4% (0.124)

**10****120**

- 11**
- Multiply line 6 by 2.9% (0.029)

**11****28**

- 12**
- Self-employment tax.**
- Add lines 10 and 11. Enter here and on
- Schedule 2 (Form 1040), line 4**
- , or
- Form 1040-SS, Part I, line 3**

**12****148**

- 13**
- Deduction for one-half of self-employment tax.**

Multiply line 12 by 50% (0.50). Enter here and on **Schedule 1 (Form 1040), line 15****13****74**

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

Schedule SE (Form 1040) 2024

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

**Farm Optional Method.** You may use this method **only** if (a) your gross farm income<sup>1</sup> wasn't more than \$10,380, **or** (b) your net farm profits<sup>2</sup> were less than \$7,493.

|                                               |           |              |
|-----------------------------------------------|-----------|--------------|
| <b>14</b> Maximum income for optional methods | <b>14</b> | <b>6,920</b> |
|-----------------------------------------------|-----------|--------------|

**15** Enter the **smaller** of: two-thirds ( $\frac{2}{3}$ ) of gross farm income<sup>1</sup> (not less than zero) **or** \$6,920. Also, include this amount on line 4b above

|           |  |
|-----------|--|
| <b>15</b> |  |
|-----------|--|

**Nonfarm Optional Method.** You may use this method **only** if (a) your net nonfarm profits<sup>3</sup> were less than \$7,493 and also less than 72.189% of your gross nonfarm income, **and** (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. **Caution:** You may use this method no more than five times.

**16** Subtract line 15 from line 14

|           |  |
|-----------|--|
| <b>16</b> |  |
|-----------|--|

**17** Enter the **smaller** of: two-thirds ( $\frac{2}{3}$ ) of gross nonfarm income<sup>4</sup> (not less than zero) **or** the amount on line 16. Also, include this amount on line 4b above

|           |  |
|-----------|--|
| <b>17</b> |  |
|-----------|--|

<sup>1</sup> From Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.

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

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

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

**SCHEDULE SE**  
**(Form 1040)**Department of the Treasury  
Internal Revenue Service**Self-Employment Tax**

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

Go to [www.irs.gov/ScheduleSE](http://www.irs.gov/ScheduleSE) for instructions and the latest information.

OMB No. 1545-0074

**2024**Attachment  
Sequence No. **17**

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

Social security number of person  
with **self-employment** income**Patricia L Daugherty****Part I Self-Employment Tax****Note:** If your only income subject to self-employment tax is **church employee income**, see instructions for how to report your income and the definition of church employee income.

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

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

- 1a**
- Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A

**1a**

- b**
- If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AQ

**1b**

Skip line 2 if you use the nonfarm optional method in Part II. See instructions.

- 2**
- Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order

**2****28,063**

- 3**
- Combine lines 1a, 1b, and 2

**3****28,063**

- 4a**
- If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3

**4a****25,916****Note:** If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.

- b**
- If you elect one or both of the optional methods, enter the total of lines 15 and 17 here

**4b**

- c**
- Combine lines 4a and 4b. If less than \$400,
- stop**
- ; you don't owe self-employment tax.
- Exception:**
- If less than \$400 and you had
- church employee income**
- , enter -0- and continue

**4c****25,916**

- 5a**
- Enter your
- church employee income**
- from Form W-2. See instructions for definition of church employee income

**5a**

- b**
- Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0-

**5b****0**

- 6**
- Add lines 4c and 5b

**6****25,916**

- 7**
- Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2024

**7****168,600**

- 8a**
- Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$168,600 or more, skip lines 8b through 10, and go to line 11

**8a**

- b**
- Unreported tips subject to social security tax from Form 4137, line 10

**8b**

- c**
- Wages subject to social security tax from Form 8919, line 10

**8c**

- d**
- Add lines 8a, 8b, and 8c

**8d**

- 9**
- Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11

**9****168,600**

- 10**
- Multiply the
- smaller**
- of line 6 or line 9 by 12.4% (0.124)

**10****3,214**

- 11**
- Multiply line 6 by 2.9% (0.029)

**11****752**

- 12**
- Self-employment tax.**
- Add lines 10 and 11. Enter here and on
- Schedule 2 (Form 1040), line 4**
- , or
- Form 1040-SS, Part I, line 3**

**12****3,966**

- 13**
- Deduction for one-half of self-employment tax.**

Multiply line 12 by 50% (0.50). Enter here and on **Schedule 1 (Form 1040), line 15****13****1,983**

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

Schedule SE (Form 1040) 2024

|                                                                                                                                                                                                                                                                                                                                                                         |                                                                              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>Part II Optional Methods To Figure Net Earnings</b> (see instructions)                                                                                                                                                                                                                                                                                               |                                                                              |
| <b>Farm Optional Method.</b> You may use this method <b>only</b> if (a) your gross farm income <sup>1</sup> wasn't more than \$10,380, <b>or</b> (b) your net farm profits <sup>2</sup> were less than \$7,493.                                                                                                                                                         |                                                                              |
| <b>14</b> Maximum income for optional methods                                                                                                                                                                                                                                                                                                                           | <b>14</b> 6,920                                                              |
| <b>15</b> Enter the <b>smaller</b> of: two-thirds ( <sup>2</sup> / <sub>3</sub> ) of gross farm income <sup>1</sup> (not less than zero) <b>or</b> \$6,920. Also, include this amount on line 4b above                                                                                                                                                                  | <b>15</b>                                                                    |
| <b>Nonfarm Optional Method.</b> You may use this method <b>only</b> if (a) your net nonfarm profits <sup>3</sup> were less than \$7,493 and also less than 72.189% of your gross nonfarm income, <b>and</b> (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. <b>Caution:</b> You may use this method no more than five times. |                                                                              |
| <b>16</b> Subtract line 15 from line 14                                                                                                                                                                                                                                                                                                                                 | <b>16</b>                                                                    |
| <b>17</b> Enter the <b>smaller</b> of: two-thirds ( <sup>2</sup> / <sub>3</sub> ) of gross nonfarm income <sup>4</sup> (not less than zero) <b>or</b> the amount on line 16. Also, include this amount on line 4b above                                                                                                                                                 | <b>17</b>                                                                    |
| <sup>1</sup> From Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.                                                                                                                                                                                                                                                                                             | <sup>3</sup> From Sch. C, line 31; and Sch. K-1 (Form 1065), box 14, code A. |
| <sup>2</sup> From Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A — minus the amount you would have entered on line 1b had you not used the optional method.                                                                                                                                                                                                  | <sup>4</sup> From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.  |

Form **4797**Department of the Treasury  
Internal Revenue Service**Sales of Business Property**  
**(Also Involuntary Conversions and Recapture Amounts**  
**Under Sections 179 and 280F(b)(2))**

Attach to your tax return.

Go to [www.irs.gov/Form4797](http://www.irs.gov/Form4797) for instructions and the latest information.

OMB No. 1545-0184

**2024**Attachment  
Sequence No. **27**

Name(s) shown on return

Identifying number

**Cheryl L Grieb & Patricia L Daugherty**

|                                                                                                                                                                                                         |           |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--|
| <b>1a</b> Enter the gross proceeds from sales or exchanges reported to you for 2024 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20. See instructions | <b>1a</b> |  |
| <b>b</b> Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets                                                                   | <b>1b</b> |  |
| <b>c</b> Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets                                                                        | <b>1c</b> |  |

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

| <b>2</b> | (a) Description of property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | (b) Date acquired (mo., day, yr.) | (c) Date sold (mo., day, yr.) | (d) Gross sales price | (e) Depreciation allowed or allowable since acquisition | (f) Cost or other basis, plus improvements and expense of sale | (g) Gain or (loss)<br>Subtract (f) from the sum of (d) and (e) |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------|-----------------------|---------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------------|
|          | <b>From K1</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                   |                               |                       |                                                         |                                                                | <b>519,480</b>                                                 |
| <b>3</b> | Gain, if any, from Form 4684, line 39                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                   |                               |                       |                                                         |                                                                | <b>3</b>                                                       |
| <b>4</b> | Section 1231 gain from installment sales from Form 6252, line 26 or 37                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                   |                               |                       |                                                         |                                                                | <b>4</b>                                                       |
| <b>5</b> | Section 1231 gain or (loss) from like-kind exchanges from Form 8824                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                   |                               |                       |                                                         |                                                                | <b>5</b>                                                       |
| <b>6</b> | Gain, if any, from line 32, from other than casualty or theft                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |                               |                       |                                                         |                                                                | <b>6</b>                                                       |
| <b>7</b> | Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows<br><b>Partnerships and S corporations.</b> Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.<br><b>Individuals, partners, S corporation shareholders, and all others.</b> If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. |                                   |                               |                       |                                                         |                                                                | <b>7</b>                                                       |
| <b>8</b> | Nonrecaptured net section 1231 losses from prior years. See instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                   |                               |                       |                                                         |                                                                | <b>8</b>                                                       |
| <b>9</b> | Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                   |                               |                       |                                                         |                                                                | <b>9</b>                                                       |

**Part II Ordinary Gains and Losses (see instructions)**

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

For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2024)

There are no amounts for Page 2

Form **6251****Alternative Minimum Tax—Individuals**

OMB No. 1545-0074

Department of the Treasury  
Internal Revenue Service

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

Go to [www.irs.gov/Form6251](http://www.irs.gov/Form6251) for instructions and the latest information.**2024**Attachment  
Sequence No. **32**

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

Your social security number

**Cheryl L Grieb & Patricia L Daugherty****Part I Alternative Minimum Taxable Income** (See instructions for how to complete each line.)

|           |                                                                                                                                                                                                                                                                              |           |                  |
|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------|
| <b>1</b>  | 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.) | <b>1</b>  | <b>1,005,863</b> |
| <b>2a</b> | 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 12                                                                                                                                    | <b>2a</b> | <b>30,750</b>    |
| <b>b</b>  | Tax refund from Schedule 1 (Form 1040), line 1 or line 8z                                                                                                                                                                                                                    | <b>2b</b> |                  |
| <b>c</b>  | Investment interest expense (difference between regular tax and AMT)                                                                                                                                                                                                         | <b>2c</b> |                  |
| <b>d</b>  | Depletion (difference between regular tax and AMT)                                                                                                                                                                                                                           | <b>2d</b> |                  |
| <b>e</b>  | Net operating loss deduction from Schedule 1 (Form 1040), line 8a. Enter as a positive amount                                                                                                                                                                                | <b>2e</b> |                  |
| <b>f</b>  | Alternative tax net operating loss deduction                                                                                                                                                                                                                                 | <b>2f</b> |                  |
| <b>g</b>  | Interest from specified private activity bonds exempt from the regular tax                                                                                                                                                                                                   | <b>2g</b> |                  |
| <b>h</b>  | Qualified small business stock, see instructions                                                                                                                                                                                                                             | <b>2h</b> |                  |
| <b>i</b>  | Exercise of incentive stock options (excess of AMT income over regular tax income)                                                                                                                                                                                           | <b>2i</b> |                  |
| <b>j</b>  | Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)                                                                                                                                                                                                    | <b>2j</b> |                  |
| <b>k</b>  | Disposition of property (difference between AMT and regular tax gain or loss)                                                                                                                                                                                                | <b>2k</b> | <b>-31</b>       |
| <b>l</b>  | Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)                                                                                                                                                                                 | <b>2l</b> |                  |
| <b>m</b>  | Passive activities (difference between AMT and regular tax income or loss)                                                                                                                                                                                                   | <b>2m</b> | <b>0</b>         |
| <b>n</b>  | Loss limitations (difference between AMT and regular tax income or loss)                                                                                                                                                                                                     | <b>2n</b> | <b>-4</b>        |
| <b>o</b>  | Circulation costs (difference between regular tax and AMT)                                                                                                                                                                                                                   | <b>2o</b> |                  |
| <b>p</b>  | Long-term contracts (difference between AMT and regular tax income)                                                                                                                                                                                                          | <b>2p</b> |                  |
| <b>q</b>  | Mining costs (difference between regular tax and AMT)                                                                                                                                                                                                                        | <b>2q</b> |                  |
| <b>r</b>  | Research and experimental costs (difference between regular tax and AMT)                                                                                                                                                                                                     | <b>2r</b> |                  |
| <b>s</b>  | Income from certain installment sales before January 1, 1987                                                                                                                                                                                                                 | <b>2s</b> |                  |
| <b>t</b>  | Intangible drilling costs preference                                                                                                                                                                                                                                         | <b>2t</b> |                  |
| <b>3</b>  | Other adjustments, including income-based related adjustments                                                                                                                                                                                                                | <b>3</b>  |                  |
| <b>4</b>  | <b>Alternative minimum taxable income.</b> Combine lines 1 through 3. (If married filing separately and line 4 is more than \$875,950, see instructions.)                                                                                                                    | <b>4</b>  | <b>1,036,578</b> |

**Part II Alternative Minimum Tax (AMT)**

|                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                    |                                  |                                |                             |            |           |                                                       |           |         |                           |         |        |          |                |
|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------------------|--------------------------------|-----------------------------|------------|-----------|-------------------------------------------------------|-----------|---------|---------------------------|---------|--------|----------|----------------|
| <b>5</b>                                              | Exemption.<br><table border="0"> <tr> <td><b>IF your filing status is...</b></td> <td><b>AND line 4 is not over...</b></td> <td><b>THEN enter on line 5...</b></td> </tr> <tr> <td>Single or head of household</td> <td>\$ 609,350</td> <td>\$ 85,700</td> </tr> <tr> <td>Married filing jointly or qualifying surviving spouse</td> <td>1,218,700</td> <td>133,300</td> </tr> <tr> <td>Married filing separately</td> <td>609,350</td> <td>66,650</td> </tr> </table> <p>If line 4 is <b>over</b> the amount shown above for your filing status, see instructions.</p>                                                                                                                                                                                | <b>IF your filing status is...</b> | <b>AND line 4 is not over...</b> | <b>THEN enter on line 5...</b> | Single or head of household | \$ 609,350 | \$ 85,700 | Married filing jointly or qualifying surviving spouse | 1,218,700 | 133,300 | Married filing separately | 609,350 | 66,650 | <b>5</b> | <b>133,300</b> |
| <b>IF your filing status is...</b>                    | <b>AND line 4 is not over...</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>THEN enter on line 5...</b>     |                                  |                                |                             |            |           |                                                       |           |         |                           |         |        |          |                |
| Single or head of household                           | \$ 609,350                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | \$ 85,700                          |                                  |                                |                             |            |           |                                                       |           |         |                           |         |        |          |                |
| Married filing jointly or qualifying surviving spouse | 1,218,700                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 133,300                            |                                  |                                |                             |            |           |                                                       |           |         |                           |         |        |          |                |
| Married filing separately                             | 609,350                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 66,650                             |                                  |                                |                             |            |           |                                                       |           |         |                           |         |        |          |                |
| <b>6</b>                                              | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>6</b>                           | <b>903,278</b>                   |                                |                             |            |           |                                                       |           |         |                           |         |        |          |                |
| <b>7</b>                                              | <ul style="list-style-type: none"> <li>If you are filing Form 2555, see instructions for the amount to enter.</li> <li>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; <b>or</b> 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.</li> <li><b>All others:</b> If line 6 is \$232,600 or less (\$116,300 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$4,652 (\$2,326 if married filing separately) from the result.</li> </ul> | <b>7</b>                           | <b>217,984</b>                   |                                |                             |            |           |                                                       |           |         |                           |         |        |          |                |
| <b>8</b>                                              | Alternative minimum tax foreign tax credit (see instructions)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>8</b>                           |                                  |                                |                             |            |           |                                                       |           |         |                           |         |        |          |                |
| <b>9</b>                                              | Tentative minimum tax. Subtract line 8 from line 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>9</b>                           | <b>217,984</b>                   |                                |                             |            |           |                                                       |           |         |                           |         |        |          |                |
| <b>10</b>                                             | Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 1z. 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                                                                                                                                                                                                                                                                                                 | <b>10</b>                          | <b>225,855</b>                   |                                |                             |            |           |                                                       |           |         |                           |         |        |          |                |
| <b>11</b>                                             | <b>AMT.</b> Subtract line 10 from line 9. If zero or less, enter -0-. Enter here and on Schedule 2 (Form 1040), line 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>11</b>                          | <b>0</b>                         |                                |                             |            |           |                                                       |           |         |                           |         |        |          |                |

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

Form **6251** (2024)

## Cheryl L Grieb &amp; Patricia L Daugherty

Form 6251 (2024)

Page 2

**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 | 903,278 |
| 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 figured for the AMT, if necessary). See instructions. If you are filing Form 2555, see instructions for the amount to enter                                       | 13 | 183,360 |
| 14 Enter the amount from Schedule D (Form 1040), line 19 (as figured for the AMT, if necessary). See instructions. If you are filing Form 2555, see instructions for the amount to enter                                                                                                                                                                                                                                       | 14 | 344,367 |
| 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 <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax Worksheet (as figured for the AMT, if necessary). If you are filing Form 2555, see instructions for the amount to enter                                                      | 15 | 527,727 |
| 16 Enter the <b>smaller</b> of line 12 or line 15                                                                                                                                                                                                                                                                                                                                                                              | 16 | 527,727 |
| 17 Subtract line 16 from line 12                                                                                                                                                                                                                                                                                                                                                                                               | 17 | 375,551 |
| 18 If line 17 is \$232,600 or less (\$116,300 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$4,652 (\$2,326 if married filing separately) from the result 18                                                                                                                                                                                  | 18 | 100,502 |
| 19 Enter:<br><ul style="list-style-type: none"> <li>• \$94,050 if married filing jointly or qualifying surviving spouse,</li> <li>• \$47,025 if single or married filing separately, or</li> <li>• \$63,000 if head of household.</li> </ul>                                                                                                                                                                                   | 19 | 94,050  |
| 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 | 822,472 |
| 21 Subtract line 20 from line 19. If zero or less, enter -0-                                                                                                                                                                                                                                                                                                                                                                   | 21 | 0       |
| 22 Enter the <b>smaller</b> of line 12 or line 13                                                                                                                                                                                                                                                                                                                                                                              | 22 | 183,360 |
| 23 Enter the <b>smaller</b> of line 21 or line 22. This amount is taxed at 0%                                                                                                                                                                                                                                                                                                                                                  | 23 |         |
| 24 Subtract line 23 from line 22                                                                                                                                                                                                                                                                                                                                                                                               | 24 | 183,360 |
| 25 Enter:<br><ul style="list-style-type: none"> <li>• \$518,900 if single,</li> <li>• \$291,850 if married filing separately,</li> <li>• \$583,750 if married filing jointly or qualifying surviving spouse, or</li> <li>• \$551,350 if head of household.</li> </ul>                                                                                                                                                          | 25 | 583,750 |
| 26 Enter the amount from line 21                                                                                                                                                                                                                                                                                                                                                                                               | 26 | 0       |
| 27 Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter | 27 | 478,105 |
| 28 Add line 26 and line 27                                                                                                                                                                                                                                                                                                                                                                                                     | 28 | 478,105 |
| 29 Subtract line 28 from line 25. If zero or less, enter -0-                                                                                                                                                                                                                                                                                                                                                                   | 29 | 105,645 |
| 30 Enter the smaller of line 24 or line 29                                                                                                                                                                                                                                                                                                                                                                                     | 30 | 105,645 |
| 31 Multiply line 30 by 15% (0.15)                                                                                                                                                                                                                                                                                                                                                                                              | 31 | 15,847  |
| 32 Add lines 23 and 30                                                                                                                                                                                                                                                                                                                                                                                                         | 32 | 105,645 |
| 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 | 77,715  |
| 34 Multiply line 33 by 20% (0.20)                                                                                                                                                                                                                                                                                                                                                                                              | 34 | 15,543  |
| 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 | 558,911 |
| 36 Subtract line 35 from line 12                                                                                                                                                                                                                                                                                                                                                                                               | 36 | 344,367 |
| 37 Multiply line 36 by 25% (0.25)                                                                                                                                                                                                                                                                                                                                                                                              | 37 | 86,092  |
| 38 Add lines 18, 31, 34, and 37                                                                                                                                                                                                                                                                                                                                                                                                | 38 | 217,984 |
| 39 If line 12 is \$232,600 or less (\$116,300 or less if married filing separately), multiply line 12 by 26% (0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$4,652 (\$2,326 if married filing separately) from the result                                                                                                                                                                                     | 39 | 248,266 |
| 40 Enter the <b>smaller</b> 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 | 217,984 |

Form 6251 (2024)

Form **8995-A****Qualified Business Income Deduction**

OMB No. 1545-2294

Department of the Treasury  
Internal Revenue ServiceAttach to your tax return.  
Go to [www.irs.gov/Form8995A](http://www.irs.gov/Form8995A) for instructions and the latest information.**2024**Attachment  
Sequence No. **55A**

Name(s) shown on return

Your taxpayer identification number

**Cheryl L Grieb & Patricia L Daugherty**

**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 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 \$191,950 (\$383,900 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 | <b>Commercial rentals</b>                | <input type="checkbox"/>       | <input type="checkbox"/> | <b>**-***7893</b>                  | <input type="checkbox"/> |
| B | <b>910 Mabbette</b>                      | <input type="checkbox"/>       | <input type="checkbox"/> | <b>**-***7893</b>                  | <input type="checkbox"/> |
| C | <b>7 and 11 N Vernon</b>                 | <input type="checkbox"/>       | <input type="checkbox"/> | <b>**-***7893</b>                  | <input type="checkbox"/> |

**Part II Determine Your Adjusted Qualified Business Income**

|                                                                                                                                                                                         | A             | B            | C              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------|----------------|
| 2 Qualified business income from the trade, business, or aggregation. See instructions                                                                                                  | <b>4,909</b>  | <b>6,312</b> | <b>66</b>      |
| 3 Multiply line 2 by 20% (0.20). If your taxable income is \$191,950 or less (\$383,900 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 | <b>982</b>    | <b>1,262</b> | <b>13</b>      |
| 4 Allocable share of W-2 wages from the trade, business, or aggregation                                                                                                                 | <b>0</b>      | <b>0</b>     | <b>0</b>       |
| 5 Multiply line 4 by 50% (0.50)                                                                                                                                                         | <b>0</b>      | <b>0</b>     | <b>0</b>       |
| 6 Multiply line 4 by 25% (0.25)                                                                                                                                                         | <b>0</b>      | <b>0</b>     | <b>0</b>       |
| 7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property                                                                                | <b>0</b>      | <b>0</b>     | <b>172,452</b> |
| 8 Multiply line 7 by 2.5% (0.025)                                                                                                                                                       | <b>0</b>      | <b>0</b>     | <b>4,311</b>   |
| 9 Add lines 6 and 8                                                                                                                                                                     | <b>0</b>      | <b>0</b>     | <b>4,311</b>   |
| 10 Enter the greater of line 5 or line 9                                                                                                                                                | <b>0</b>      | <b>0</b>     | <b>4,311</b>   |
| 11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10                                                                                           | <b>0</b>      | <b>0</b>     | <b>13</b>      |
| 12 Phased-in reduction. Enter the amount from line 26, if any                                                                                                                           |               |              |                |
| 13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12                                                                                 | <b>0</b>      | <b>0</b>     | <b>13</b>      |
| 14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any. See instructions                                                                                   |               |              |                |
| 15 Qualified business income component. Subtract line 14 from line 13                                                                                                                   | <b>0</b>      | <b>0</b>     | <b>13</b>      |
| 16 Total qualified business income component. Add all amounts reported on line 15                                                                                                       | <b>15,026</b> |              |                |

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

Form **8995-A** (2024)

## Cheryl L Grieb &amp; Patricia L Daugherty

Form 8995-A (2024)

Page 2

**Part III Phased-in Reduction**

Complete Part III only if your taxable income is more than \$191,950 but not \$241,950 (\$383,900 and \$483,900 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 \$191,950 (\$383,900 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 | 15,026    |         |
| 28 Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions                                                             | 28 | 1         |         |
| 29 Qualified REIT dividends and PTP (loss) carryforward from prior years                                                                                         | 29 |           |         |
| 30 Total qualified REIT dividends and PTP income. Combine lines 28 and 29. If less than zero, enter -0-                                                          | 30 | 1         |         |
| 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 |           | 15,026  |
| 33 Taxable income before qualified business income deduction                                                                                                     | 33 | 1,020,889 |         |
| 34 Enter your net capital gain, if any, increased by any qualified dividends (see instructions)                                                                  | 34 | 527,758   |         |
| 35 Subtract line 34 from line 33. If zero or less, enter -0-                                                                                                     | 35 |           | 493,131 |
| 36 Income limitation. Multiply line 35 by 20% (0.20)                                                                                                             | 36 |           | 98,626  |
| 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 |           | 15,026  |
| 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 |           | 15,026  |
| 40 Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-                                            | 40 |           | 0       |

Form 8995-A (2024)

Form **8995-A****Qualified Business Income Deduction**

OMB No. 1545-2294

Department of the Treasury  
Internal Revenue ServiceAttach to your tax return.  
Go to [www.irs.gov/Form8995A](http://www.irs.gov/Form8995A) for instructions and the latest information.**2024**Attachment  
Sequence No. **55A**

Name(s) shown on return

Your taxpayer identification number

**Cheryl L Grieb & Patricia L Daugherty**

**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 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 \$191,950 (\$383,900 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 | 910 Mabbette                             | <input type="checkbox"/>       | <input type="checkbox"/> | **-***7893                         | <input type="checkbox"/> |
| B | Commercial rentals                       | <input type="checkbox"/>       | <input type="checkbox"/> | **-***7893                         | <input type="checkbox"/> |
| C | 7 and 11 N Vernon                        | <input type="checkbox"/>       | <input type="checkbox"/> | **-***7893                         | <input type="checkbox"/> |

**Part II Determine Your Adjusted Qualified Business Income**

|                                                                                                                                                                                         | A       | B     | C       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-------|---------|
| 2 Qualified business income from the trade, business, or aggregation. See instructions                                                                                                  | 2 6,312 | 4,910 | 66      |
| 3 Multiply line 2 by 20% (0.20). If your taxable income is \$191,950 or less (\$383,900 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 | 3 1,262 | 982   | 13      |
| 4 Allocable share of W-2 wages from the trade, business, or aggregation                                                                                                                 | 4 0     | 0     | 0       |
| 5 Multiply line 4 by 50% (0.50)                                                                                                                                                         | 5 0     | 0     | 0       |
| 6 Multiply line 4 by 25% (0.25)                                                                                                                                                         | 6 0     | 0     | 0       |
| 7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property                                                                                | 7 0     | 0     | 172,453 |
| 8 Multiply line 7 by 2.5% (0.025)                                                                                                                                                       | 8 0     | 0     | 4,311   |
| 9 Add lines 6 and 8                                                                                                                                                                     | 9 0     | 0     | 4,311   |
| 10 Enter the greater of line 5 or line 9                                                                                                                                                | 10 0    | 0     | 4,311   |
| 11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10                                                                                           | 11 0    | 0     | 13      |
| 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    | 0     | 13      |
| 14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any. See instructions                                                                                   | 14      |       |         |
| 15 Qualified business income component. Subtract line 14 from line 13                                                                                                                   | 15 0    | 0     | 13      |
| 16 Total qualified business income component. Add all amounts reported on line 15                                                                                                       | 16      |       |         |

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

Form **8995-A** (2024)

## Cheryl L Grieb &amp; Patricia L Daugherty

Form 8995-A (2024)

Page 2

**Part III Phased-in Reduction**

Complete Part III only if your taxable income is more than \$191,950 but not \$241,950 (\$383,900 and \$483,900 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 \$191,950 (\$383,900 if married filing jointly)                                                                                                  | 21 |   |   |
| 22 Subtract line 21 from line 20                                                                                                                                     | 22 |   |   |
| 23 Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)                                                                                              | 23 |   |   |
| 24 Phase-in percentage. Divide line 22 by line 23                                                                                                                    | 24 | % |   |
| 25 Total phase-in reduction. Multiply line 19 by line 24                                                                                                             | 25 |   |   |
| 26 Qualified business income after phase-in reduction. Subtract line 25 from line 17. Enter this amount here and on line 12, for the corresponding trade or business | 26 |   |   |

**Part IV Determine Your Qualified Business Income Deduction**

|                                                                                                                                                                  |    |   |   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---|---|
| 27 Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16                               | 27 |   |   |
| 28 Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions                                                             | 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 |   |   |
| 33 Taxable income before qualified business income deduction                                                                                                     | 33 |   |   |
| 34 Enter your net capital gain, if any, increased by any qualified dividends (see instructions)                                                                  | 34 |   |   |
| 35 Subtract line 34 from line 33. If zero or less, enter -0-                                                                                                     | 35 |   |   |
| 36 Income limitation. Multiply line 35 by 20% (0.20)                                                                                                             | 36 |   |   |
| 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 |   |   |
| 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 |   |   |
| 40 Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-                                            | 40 | ( | ) |

Form 8995-A (2024)

Form **8995-A****Qualified Business Income Deduction**

OMB No. 1545-2294

**2024**Attachment  
Sequence No. **55A**Department of the Treasury  
Internal Revenue ServiceAttach to your tax return.  
Go to [www.irs.gov/Form8995A](http://www.irs.gov/Form8995A) for instructions and the latest information.

Name(s) shown on return

Your taxpayer identification number

**Cheryl L Grieb & Patricia L Daugherty**

**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 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 \$191,950 (\$383,900 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 | Olde Kissimmee Realty, Inc               | <input type="checkbox"/>       | <input type="checkbox"/> | **-***7844                         | <input type="checkbox"/> |
| B |                                          | <input type="checkbox"/>       | <input type="checkbox"/> |                                    | <input type="checkbox"/> |
| C |                                          | <input type="checkbox"/>       | <input type="checkbox"/> |                                    | <input type="checkbox"/> |

**Part II Determine Your Adjusted Qualified Business Income**

|                                                                                                                                                                                         | A         | B | C |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---|---|
| 2 Qualified business income from the trade, business, or aggregation. See instructions                                                                                                  | 2 346,516 |   |   |
| 3 Multiply line 2 by 20% (0.20). If your taxable income is \$191,950 or less (\$383,900 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13 | 3 69,303  |   |   |
| 4 Allocable share of W-2 wages from the trade, business, or aggregation                                                                                                                 | 4 30,000  |   |   |
| 5 Multiply line 4 by 50% (0.50)                                                                                                                                                         | 5 15,000  |   |   |
| 6 Multiply line 4 by 25% (0.25)                                                                                                                                                         | 6 7,500   |   |   |
| 7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property                                                                                | 7 0       |   |   |
| 8 Multiply line 7 by 2.5% (0.025)                                                                                                                                                       | 8 0       |   |   |
| 9 Add lines 6 and 8                                                                                                                                                                     | 9 7,500   |   |   |
| 10 Enter the greater of line 5 or line 9                                                                                                                                                | 10 15,000 |   |   |
| 11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10                                                                                           | 11 15,000 |   |   |
| 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 15,000 |   |   |
| 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 15,000 |   |   |
| 16 Total qualified business income component. Add all amounts reported on line 15                                                                                                       | 16        |   |   |

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

Form **8995-A** (2024)

## Cheryl L Grieb &amp; Patricia L Daugherty

Form 8995-A (2024)

Page 2

**Part III Phased-in Reduction**

Complete Part III only if your taxable income is more than \$191,950 but not \$241,950 (\$383,900 and \$483,900 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 \$191,950 (\$383,900 if married filing jointly)                                                                                                  | 21 |   |   |
| 22 Subtract line 21 from line 20                                                                                                                                     | 22 |   |   |
| 23 Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)                                                                                              | 23 |   |   |
| 24 Phase-in percentage. Divide line 22 by line 23                                                                                                                    | 24 | % |   |
| 25 Total phase-in reduction. Multiply line 19 by line 24                                                                                                             | 25 |   |   |
| 26 Qualified business income after phase-in reduction. Subtract line 25 from line 17. Enter this amount here and on line 12, for the corresponding trade or business | 26 |   |   |

**Part IV Determine Your Qualified Business Income Deduction**

|                                                                                                                                                                  |    |   |   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---|---|
| 27 Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16                               | 27 |   |   |
| 28 Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions                                                             | 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 |   |   |
| 33 Taxable income before qualified business income deduction                                                                                                     | 33 |   |   |
| 34 Enter your net capital gain, if any, increased by any qualified dividends (see instructions)                                                                  | 34 |   |   |
| 35 Subtract line 34 from line 33. If zero or less, enter -0-                                                                                                     | 35 |   |   |
| 36 Income limitation. Multiply line 35 by 20% (0.20)                                                                                                             | 36 |   |   |
| 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 |   |   |
| 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 |   |   |
| 40 Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-                                            | 40 | ( | ) |

Form 8995-A (2024)

Form **8960****Net Investment Income Tax—  
Individuals, Estates, and Trusts**

Attach to your tax return.

OMB No. 1545-2227

**2024**Attachment  
Sequence No. **72**Department of the Treasury  
Internal Revenue ServiceGo to [www.irs.gov/Form8960](http://www.irs.gov/Form8960) for instructions and the latest information.

Name(s) shown on your tax return

Your social security number or EIN

**Cheryl L Grieb & Patricia L Daugherty****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)

|           |                                                                                                                             |           |                 |
|-----------|-----------------------------------------------------------------------------------------------------------------------------|-----------|-----------------|
| <b>1</b>  | Taxable interest (see instructions)                                                                                         | <b>1</b>  | <b>4,561</b>    |
| <b>2</b>  | Ordinary dividends (see instructions)                                                                                       | <b>2</b>  | <b>7,472</b>    |
| <b>3</b>  | Annuities (see instructions)                                                                                                | <b>3</b>  |                 |
| <b>4a</b> | Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)          | <b>4a</b> | <b>405,896</b>  |
| <b>b</b>  | Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions) | <b>4b</b> | <b>-397,154</b> |
| <b>c</b>  | Combine lines 4a and 4b                                                                                                     | <b>4c</b> | <b>8,742</b>    |
| <b>5a</b> | Net gain or loss from disposition of property (see instructions)                                                            | <b>5a</b> | <b>520,583</b>  |
| <b>b</b>  | Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)           | <b>5b</b> | <b>-519,480</b> |
| <b>c</b>  | Adjustment from disposition of partnership interest or S corporation stock (see instructions)                               | <b>5c</b> |                 |
| <b>d</b>  | Combine lines 5a through 5c                                                                                                 | <b>5d</b> | <b>1,103</b>    |
| <b>6</b>  | Adjustments to investment income for certain CFCs and PFICs (see instructions)                                              | <b>6</b>  |                 |
| <b>7</b>  | Other modifications to investment income (see instructions)                                                                 | <b>7</b>  |                 |
| <b>8</b>  | Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7                                                            | <b>8</b>  | <b>21,878</b>   |

**Part II Investment Expenses Allocable to Investment Income and Modifications**

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

**Part III Tax Computation**

|            |                                                                                                                                                                                 |            |                  |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------|
| <b>12</b>  | 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- | <b>12</b>  | <b>21,878</b>    |
| <b>13</b>  | Modified adjusted gross income (see instructions)                                                                                                                               | <b>13</b>  | <b>1,051,639</b> |
| <b>14</b>  | Threshold based on filing status (see instructions)                                                                                                                             | <b>14</b>  | <b>250,000</b>   |
| <b>15</b>  | Subtract line 14 from line 13. If zero or less, enter -0-                                                                                                                       | <b>15</b>  | <b>801,639</b>   |
| <b>16</b>  | Enter the smaller of line 12 or line 15                                                                                                                                         | <b>16</b>  | <b>21,878</b>    |
| <b>17</b>  | Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include on your tax return (see instructions)                                       | <b>17</b>  | <b>831</b>       |
| <b>18a</b> | Net investment income (line 12 above)                                                                                                                                           | <b>18a</b> |                  |
| <b>b</b>   | Deductions for distributions of net investment income and charitable deductions (see instructions)                                                                              | <b>18b</b> |                  |
| <b>c</b>   | Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-                                                             | <b>18c</b> |                  |
| <b>19a</b> | Adjusted gross income (see instructions)                                                                                                                                        | <b>19a</b> |                  |
| <b>b</b>   | Highest tax bracket for estates and trusts for the year (see instructions)                                                                                                      | <b>19b</b> |                  |
| <b>c</b>   | Subtract line 19b from line 19a. If zero or less, enter -0-                                                                                                                     | <b>19c</b> |                  |
| <b>20</b>  | Enter the smaller of line 18c or line 19c                                                                                                                                       | <b>20</b>  |                  |
| <b>21</b>  | 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)                                | <b>21</b>  |                  |

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

Form **8960** (2024)

Form **7203**  
(Rev. December 2022)  
Department of the Treasury  
Internal Revenue Service

# S Corporation Shareholder Stock and Debt Basis Limitations

OMB No. 1545-2302

Attach to your tax return.  
Go to [www.irs.gov/Form7203](http://www.irs.gov/Form7203) for instructions and the latest information.

Attachment  
Sequence No. **203**

|                                                                                                                                                                                                                                                                                      |  |                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------|
| Name of shareholder<br><b>Cheryl L Grieb</b>                                                                                                                                                                                                                                         |  | Identifying number<br>[REDACTED]                      |
| A Name of S corporation<br><b>Olde Kissimmee Investments Inc</b>                                                                                                                                                                                                                     |  | B Employer identification number<br><b>**-***7893</b> |
| C Stock block (see instructions):                                                                                                                                                                                                                                                    |  |                                                       |
| D Check applicable box(es) to indicate how stock was acquired:<br>(1) <input checked="" type="checkbox"/> Original shareholder (2) <input type="checkbox"/> Purchased (3) <input type="checkbox"/> Inherited (4) <input type="checkbox"/> Gifted (5) <input type="checkbox"/> Other: |  |                                                       |
| E Check if you have a Regulations section 1.1367-1(g) election in effect during the tax year for this S corporation <input type="checkbox"/>                                                                                                                                         |  |                                                       |

## Part I Shareholder Stock Basis

|    |                                                                                                                                                                                                                      |    |         |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------|
| 1  | Stock basis at the beginning of the corporation's tax year                                                                                                                                                           | 1  | 0       |
| 2  | Basis from any capital contributions made or additional stock acquired during the tax year                                                                                                                           | 2  |         |
| 3a | Ordinary business income (enter losses in Part III)                                                                                                                                                                  | 3a | 4,909   |
| b  | Net rental real estate income (enter losses in Part III)                                                                                                                                                             | 3b | 6,378   |
| c  | Other net rental income (enter losses in Part III)                                                                                                                                                                   | 3c |         |
| d  | Interest income                                                                                                                                                                                                      | 3d | 284     |
| e  | Ordinary dividends                                                                                                                                                                                                   | 3e |         |
| f  | Royalties                                                                                                                                                                                                            | 3f |         |
| g  | Net capital gains (enter losses in Part III)                                                                                                                                                                         | 3g |         |
| h  | Net section 1231 gain (enter losses in Part III)                                                                                                                                                                     | 3h | 259,740 |
| i  | Other income (enter losses in Part III)                                                                                                                                                                              | 3i |         |
| j  | Excess depletion adjustment                                                                                                                                                                                          | 3j |         |
| k  | Tax-exempt income                                                                                                                                                                                                    | 3k |         |
| l  | Recapture of business credits                                                                                                                                                                                        | 3l |         |
| m  | Other items that increase stock basis                                                                                                                                                                                | 3m |         |
| 4  | Add lines 3a through 3m                                                                                                                                                                                              | 4  | 271,311 |
| 5  | Stock basis before distributions. Add lines 1, 2, and 4                                                                                                                                                              | 5  | 271,311 |
| 6  | Distributions (excluding dividend distributions)<br><b>Note:</b> If line 6 is larger than line 5, subtract line 5 from line 6 and report the result as a capital gain on Form 8949 and Schedule D. See instructions. | 6  |         |
| 7  | Stock basis after distributions. Subtract line 6 from line 5. If the result is zero or less, enter -0-, skip lines 8 through 14, and enter -0- on line 15                                                            | 7  | 271,311 |
| 8a | Nondeductible expenses                                                                                                                                                                                               | 8a | 500     |
| b  | Depletion for oil and gas                                                                                                                                                                                            | 8b |         |
| c  | Business credits (sections 50(c)(1) and (5))                                                                                                                                                                         | 8c |         |
| 9  | Add lines 8a through 8c                                                                                                                                                                                              | 9  | 500     |
| 10 | Stock basis before loss and deduction items. Subtract line 9 from line 7. If the result is zero or less, enter -0-, skip lines 11 through 14, and enter -0- on line 15                                               | 10 | 270,811 |
| 11 | Allowable loss and deduction items. Enter the amount from line 47, column (c)                                                                                                                                        | 11 |         |
| 12 | Debt basis restoration (see net increase in instructions for line 23)                                                                                                                                                | 12 | 187,402 |
| 13 | Other items that decrease stock basis                                                                                                                                                                                | 13 |         |
| 14 | Add lines 11, 12, and 13                                                                                                                                                                                             | 14 | 187,402 |
| 15 | Stock basis at the end of the corporation's tax year. Subtract line 14 from line 10. If the result is zero or less, enter -0-                                                                                        | 15 | 83,409  |

## Part II Shareholder Debt Basis

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

| Description                                                                              | (a) Debt 1                                                                               | (b) Debt 2                                                                    | (c) Debt 3                                                                    | (d) Total |
|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------|
|                                                                                          | <input checked="" type="checkbox"/> Formal note<br><input type="checkbox"/> Open account | <input type="checkbox"/> Formal note<br><input type="checkbox"/> Open account | <input type="checkbox"/> Formal note<br><input type="checkbox"/> Open account |           |
| 16 Loan balance at the beginning of the corporation's tax year                           | 505,073                                                                                  |                                                                               |                                                                               | 505,073   |
| 17 Additional loans (see instructions)                                                   |                                                                                          |                                                                               |                                                                               |           |
| 18 Loan balance before repayment. Add lines 16 and 17                                    | 505,073                                                                                  |                                                                               |                                                                               | 505,073   |
| 19 Principal portion of debt repayment (this line doesn't include interest)              |                                                                                          |                                                                               |                                                                               |           |
| 20 Loan balance at the end of the corporation's tax year. Subtract lines 19 from line 18 | 505,073                                                                                  |                                                                               |                                                                               | 505,073   |

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Form **7203** (Rev. 12-2022)

Cheryl L Grieb

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Page 2

**Part II Shareholder Debt Basis (continued)****Section B—Adjustments to Debt Basis**

| Description                                                                                                                                   | (a) Debt 1 | (b) Debt 2 | (c) Debt 3 | (d) Total |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|------------|-----------|
| <b>21</b> Debt basis at the beginning of the corporation's tax year                                                                           | 317,671    |            |            | 317,671   |
| <b>22</b> Enter the amount, if any, from line 17                                                                                              |            |            |            |           |
| <b>23</b> Debt basis restoration (see instructions)                                                                                           | 187,402    |            |            | 187,402   |
| <b>24</b> Debt basis before repayment. Add lines 21, 22, and 23                                                                               | 505,073    |            |            | 505,073   |
| <b>25</b> Divide line 24 by line 18                                                                                                           | 1.0000     |            |            |           |
| <b>26</b> Nontaxable debt repayment. Multiply line 25 by line 19                                                                              |            |            |            |           |
| <b>27</b> Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24                                                  | 505,073    |            |            | 505,073   |
| <b>28</b> Nondeductible expenses and oil and gas depletion deductions in excess of stock basis                                                |            |            |            |           |
| <b>29</b> Debt basis before losses and deductions. Subtract line 28 from line 27. If the result is zero or less, enter -0-                    | 505,073    |            |            | 505,073   |
| <b>30</b> Allowable losses in excess of stock basis. Enter the amount from line 47, column (d)                                                |            |            |            |           |
| <b>31</b> <b>Debt basis at the end of the corporation's tax year.</b> Subtract line 30 from line 29. If the result is zero or less, enter -0- | 505,073    |            |            | 505,073   |

**Section C—Gain on Loan Repayment**

|                                                                 |   |  |  |  |
|-----------------------------------------------------------------|---|--|--|--|
| <b>32</b> Repayment. Enter the amount from line 19              |   |  |  |  |
| <b>33</b> Nontaxable repayments. Enter the amount from line 26  |   |  |  |  |
| <b>34</b> <b>Reportable gain.</b> Subtract line 33 from line 32 | 0 |  |  |  |

**Part III Shareholder Allowable Loss and Deduction Items**

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

Form 7203 (Rev. 12-2022)

Form **7203**  
(Rev. December 2022)  
Department of the Treasury  
Internal Revenue Service

# S Corporation Shareholder Stock and Debt Basis Limitations

OMB No. 1545-2302

Attach to your tax return.  
Go to [www.irs.gov/Form7203](http://www.irs.gov/Form7203) for instructions and the latest information.

Attachment  
Sequence No. **203**

|                                                                                                                                                                                                                                                                                      |  |                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------|
| Name of shareholder<br><b>Patricia L Daugherty</b>                                                                                                                                                                                                                                   |  | Identifying number<br><b>[REDACTED]</b>               |
| A Name of S corporation<br><b>Olde Kissimmee Investments Inc</b>                                                                                                                                                                                                                     |  | B Employer identification number<br><b>**-***7893</b> |
| C Stock block (see instructions):                                                                                                                                                                                                                                                    |  |                                                       |
| D Check applicable box(es) to indicate how stock was acquired:<br>(1) <input checked="" type="checkbox"/> Original shareholder (2) <input type="checkbox"/> Purchased (3) <input type="checkbox"/> Inherited (4) <input type="checkbox"/> Gifted (5) <input type="checkbox"/> Other: |  |                                                       |
| E Check if you have a Regulations section 1.1367-1(g) election in effect during the tax year for this S corporation <input type="checkbox"/>                                                                                                                                         |  |                                                       |

## Part I Shareholder Stock Basis

|    |                                                                                                                                                                                                                      |    |         |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------|
| 1  | Stock basis at the beginning of the corporation's tax year                                                                                                                                                           | 1  | 0       |
| 2  | Basis from any capital contributions made or additional stock acquired during the tax year                                                                                                                           | 2  |         |
| 3a | Ordinary business income (enter losses in Part III)                                                                                                                                                                  | 3a | 4,910   |
| b  | Net rental real estate income (enter losses in Part III)                                                                                                                                                             | 3b | 6,378   |
| c  | Other net rental income (enter losses in Part III)                                                                                                                                                                   | 3c |         |
| d  | Interest income                                                                                                                                                                                                      | 3d | 284     |
| e  | Ordinary dividends                                                                                                                                                                                                   | 3e |         |
| f  | Royalties                                                                                                                                                                                                            | 3f |         |
| g  | Net capital gains (enter losses in Part III)                                                                                                                                                                         | 3g |         |
| h  | Net section 1231 gain (enter losses in Part III)                                                                                                                                                                     | 3h | 259,740 |
| i  | Other income (enter losses in Part III)                                                                                                                                                                              | 3i |         |
| j  | Excess depletion adjustment                                                                                                                                                                                          | 3j |         |
| k  | Tax-exempt income                                                                                                                                                                                                    | 3k |         |
| l  | Recapture of business credits                                                                                                                                                                                        | 3l |         |
| m  | Other items that increase stock basis                                                                                                                                                                                | 3m |         |
| 4  | Add lines 3a through 3m                                                                                                                                                                                              | 4  | 271,312 |
| 5  | Stock basis before distributions. Add lines 1, 2, and 4                                                                                                                                                              | 5  | 271,312 |
| 6  | Distributions (excluding dividend distributions)<br><b>Note:</b> If line 6 is larger than line 5, subtract line 5 from line 6 and report the result as a capital gain on Form 8949 and Schedule D. See instructions. | 6  |         |
| 7  | Stock basis after distributions. Subtract line 6 from line 5. If the result is zero or less, enter -0-, skip lines 8 through 14, and enter -0- on line 15                                                            | 7  | 271,312 |
| 8a | Nondeductible expenses                                                                                                                                                                                               | 8a | 500     |
| b  | Depletion for oil and gas                                                                                                                                                                                            | 8b |         |
| c  | Business credits (sections 50(c)(1) and (5))                                                                                                                                                                         | 8c |         |
| 9  | Add lines 8a through 8c                                                                                                                                                                                              | 9  | 500     |
| 10 | Stock basis before loss and deduction items. Subtract line 9 from line 7. If the result is zero or less, enter -0-, skip lines 11 through 14, and enter -0- on line 15                                               | 10 | 270,812 |
| 11 | Allowable loss and deduction items. Enter the amount from line 47, column (c)                                                                                                                                        | 11 |         |
| 12 | Debt basis restoration (see net increase in instructions for line 23)                                                                                                                                                | 12 | 270,812 |
| 13 | Other items that decrease stock basis                                                                                                                                                                                | 13 |         |
| 14 | Add lines 11, 12, and 13                                                                                                                                                                                             | 14 | 270,812 |
| 15 | Stock basis at the end of the corporation's tax year. Subtract line 14 from line 10. If the result is zero or less, enter -0-                                                                                        | 15 | 0       |

## Part II Shareholder Debt Basis

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

| Description                                                                              | (a) Debt 1                                                                               | (b) Debt 2                                                                    | (c) Debt 3                                                                    | (d) Total |
|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------|
|                                                                                          | <input checked="" type="checkbox"/> Formal note<br><input type="checkbox"/> Open account | <input type="checkbox"/> Formal note<br><input type="checkbox"/> Open account | <input type="checkbox"/> Formal note<br><input type="checkbox"/> Open account |           |
| 16 Loan balance at the beginning of the corporation's tax year                           | 505,073                                                                                  |                                                                               |                                                                               | 505,073   |
| 17 Additional loans (see instructions)                                                   |                                                                                          |                                                                               |                                                                               |           |
| 18 Loan balance before repayment. Add lines 16 and 17                                    | 505,073                                                                                  |                                                                               |                                                                               | 505,073   |
| 19 Principal portion of debt repayment (this line doesn't include interest)              |                                                                                          |                                                                               |                                                                               |           |
| 20 Loan balance at the end of the corporation's tax year. Subtract lines 19 from line 18 | 505,073                                                                                  |                                                                               |                                                                               | 505,073   |

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Form **7203** (Rev. 12-2022)

Patricia L Daugherty

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Page 2

**Part II Shareholder Debt Basis (continued)****Section B—Adjustments to Debt Basis**

| Description                                                                                                                                   | (a) Debt 1 | (b) Debt 2 | (c) Debt 3 | (d) Total |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|------------|-----------|
| <b>21</b> Debt basis at the beginning of the corporation's tax year                                                                           | 8,973      |            |            | 8,973     |
| <b>22</b> Enter the amount, if any, from line 17                                                                                              |            |            |            |           |
| <b>23</b> Debt basis restoration (see instructions)                                                                                           | 270,812    |            |            | 270,812   |
| <b>24</b> Debt basis before repayment. Add lines 21, 22, and 23                                                                               | 279,785    |            |            | 279,785   |
| <b>25</b> Divide line 24 by line 18                                                                                                           | 0.5539     |            |            |           |
| <b>26</b> Nontaxable debt repayment. Multiply line 25 by line 19                                                                              |            |            |            |           |
| <b>27</b> Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24                                                  | 279,785    |            |            | 279,785   |
| <b>28</b> Nondeductible expenses and oil and gas depletion deductions in excess of stock basis                                                |            |            |            |           |
| <b>29</b> Debt basis before losses and deductions. Subtract line 28 from line 27. If the result is zero or less, enter -0-                    | 279,785    |            |            | 279,785   |
| <b>30</b> Allowable losses in excess of stock basis. Enter the amount from line 47, column (d)                                                |            |            |            |           |
| <b>31</b> <b>Debt basis at the end of the corporation's tax year.</b> Subtract line 30 from line 29. If the result is zero or less, enter -0- | 279,785    |            |            | 279,785   |

**Section C—Gain on Loan Repayment**

|                                                                 |   |  |  |  |
|-----------------------------------------------------------------|---|--|--|--|
| <b>32</b> Repayment. Enter the amount from line 19              |   |  |  |  |
| <b>33</b> Nontaxable repayments. Enter the amount from line 26  |   |  |  |  |
| <b>34</b> <b>Reportable gain.</b> Subtract line 33 from line 32 | 0 |  |  |  |

**Part III Shareholder Allowable Loss and Deduction Items**

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

Form 7203 (Rev. 12-2022)

Form **7203**  
(Rev. December 2022)  
Department of the Treasury  
Internal Revenue Service

# S Corporation Shareholder Stock and Debt Basis Limitations

OMB No. 1545-2302

Attach to your tax return.

Go to [www.irs.gov/Form7203](http://www.irs.gov/Form7203) for instructions and the latest information.Attachment  
Sequence No. **203**

|                                                                                                                                                                                                                                                                                      |  |                                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------|
| Name of shareholder<br><b>Cheryl L Grieb</b>                                                                                                                                                                                                                                         |  | Identifying number<br><b>[REDACTED]</b>               |
| A Name of S corporation<br><b>Olde Kissimmee Realty, Inc.</b>                                                                                                                                                                                                                        |  | B Employer identification number<br><b>**-***7844</b> |
| C Stock block (see instructions):                                                                                                                                                                                                                                                    |  |                                                       |
| D Check applicable box(es) to indicate how stock was acquired:<br>(1) <input checked="" type="checkbox"/> Original shareholder (2) <input type="checkbox"/> Purchased (3) <input type="checkbox"/> Inherited (4) <input type="checkbox"/> Gifted (5) <input type="checkbox"/> Other: |  |                                                       |
| E Check if you have a Regulations section 1.1367-1(g) election in effect during the tax year for this S corporation <input type="checkbox"/>                                                                                                                                         |  |                                                       |

## Part I Shareholder Stock Basis

|    |                                                                                                                                                                                                                      |    |                |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----------------|
| 1  | Stock basis at the beginning of the corporation's tax year                                                                                                                                                           | 1  | <b>214,031</b> |
| 2  | Basis from any capital contributions made or additional stock acquired during the tax year                                                                                                                           | 2  |                |
| 3a | Ordinary business income (enter losses in Part III)                                                                                                                                                                  | 3a | <b>346,516</b> |
| b  | Net rental real estate income (enter losses in Part III)                                                                                                                                                             | 3b |                |
| c  | Other net rental income (enter losses in Part III)                                                                                                                                                                   | 3c |                |
| d  | Interest income                                                                                                                                                                                                      | 3d |                |
| e  | Ordinary dividends                                                                                                                                                                                                   | 3e |                |
| f  | Royalties                                                                                                                                                                                                            | 3f |                |
| g  | Net capital gains (enter losses in Part III)                                                                                                                                                                         | 3g |                |
| h  | Net section 1231 gain (enter losses in Part III)                                                                                                                                                                     | 3h |                |
| i  | Other income (enter losses in Part III)                                                                                                                                                                              | 3i |                |
| j  | Excess depletion adjustment                                                                                                                                                                                          | 3j |                |
| k  | Tax-exempt income                                                                                                                                                                                                    | 3k |                |
| l  | Recapture of business credits                                                                                                                                                                                        | 3l |                |
| m  | Other items that increase stock basis                                                                                                                                                                                | 3m |                |
| 4  | Add lines 3a through 3m                                                                                                                                                                                              | 4  | <b>346,516</b> |
| 5  | Stock basis before distributions. Add lines 1, 2, and 4                                                                                                                                                              | 5  | <b>560,547</b> |
| 6  | Distributions (excluding dividend distributions)<br><b>Note:</b> If line 6 is larger than line 5, subtract line 5 from line 6 and report the result as a capital gain on Form 8949 and Schedule D. See instructions. | 6  |                |
| 7  | Stock basis after distributions. Subtract line 6 from line 5. If the result is zero or less, enter -0-, skip lines 8 through 14, and enter -0- on line 15                                                            | 7  | <b>560,547</b> |
| 8a | Nondeductible expenses                                                                                                                                                                                               | 8a | <b>4,664</b>   |
| b  | Depletion for oil and gas                                                                                                                                                                                            | 8b |                |
| c  | Business credits (sections 50(c)(1) and (5))                                                                                                                                                                         | 8c |                |
| 9  | Add lines 8a through 8c                                                                                                                                                                                              | 9  | <b>4,664</b>   |
| 10 | Stock basis before loss and deduction items. Subtract line 9 from line 7. If the result is zero or less, enter -0-, skip lines 11 through 14, and enter -0- on line 15                                               | 10 | <b>555,883</b> |
| 11 | Allowable loss and deduction items. Enter the amount from line 47, column (c)                                                                                                                                        | 11 | <b>6,915</b>   |
| 12 | Debt basis restoration (see net increase in instructions for line 23)                                                                                                                                                | 12 |                |
| 13 | Other items that decrease stock basis                                                                                                                                                                                | 13 |                |
| 14 | Add lines 11, 12, and 13                                                                                                                                                                                             | 14 | <b>6,915</b>   |
| 15 | Stock basis at the end of the corporation's tax year. Subtract line 14 from line 10. If the result is zero or less, enter -0-                                                                                        | 15 | <b>548,968</b> |

## Part II Shareholder Debt Basis

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

| Description                                                                              | (a) Debt 1                                                                               | (b) Debt 2                                                                    | (c) Debt 3                                                                    | (d) Total    |
|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------|--------------|
|                                                                                          | <input type="checkbox"/> Formal note<br><input checked="" type="checkbox"/> Open account | <input type="checkbox"/> Formal note<br><input type="checkbox"/> Open account | <input type="checkbox"/> Formal note<br><input type="checkbox"/> Open account |              |
| 16 Loan balance at the beginning of the corporation's tax year                           |                                                                                          |                                                                               |                                                                               |              |
| 17 Additional loans (see instructions)                                                   | <b>2,172</b>                                                                             |                                                                               |                                                                               | <b>2,172</b> |
| 18 Loan balance before repayment. Add lines 16 and 17                                    | <b>2,172</b>                                                                             |                                                                               |                                                                               | <b>2,172</b> |
| 19 Principal portion of debt repayment (this line doesn't include interest)              |                                                                                          |                                                                               |                                                                               |              |
| 20 Loan balance at the end of the corporation's tax year. Subtract lines 19 from line 18 | <b>2,172</b>                                                                             |                                                                               |                                                                               | <b>2,172</b> |

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**Part II Shareholder Debt Basis (continued)****Section B—Adjustments to Debt Basis**

| Description                                                                                                                                   | (a) Debt 1 | (b) Debt 2 | (c) Debt 3 | (d) Total |
|-----------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|------------|-----------|
| <b>21</b> Debt basis at the beginning of the corporation's tax year                                                                           |            |            |            |           |
| <b>22</b> Enter the amount, if any, from line 17                                                                                              | 2,172      |            |            | 2,172     |
| <b>23</b> Debt basis restoration (see instructions)                                                                                           |            |            |            |           |
| <b>24</b> Debt basis before repayment. Add lines 21, 22, and 23                                                                               | 2,172      |            |            | 2,172     |
| <b>25</b> Divide line 24 by line 18                                                                                                           | 1.0000     |            |            |           |
| <b>26</b> Nontaxable debt repayment. Multiply line 25 by line 19                                                                              |            |            |            |           |
| <b>27</b> Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24                                                  | 2,172      |            |            | 2,172     |
| <b>28</b> Nondeductible expenses and oil and gas depletion deductions in excess of stock basis                                                |            |            |            |           |
| <b>29</b> Debt basis before losses and deductions. Subtract line 28 from line 27. If the result is zero or less, enter -0-                    | 2,172      |            |            | 2,172     |
| <b>30</b> Allowable losses in excess of stock basis. Enter the amount from line 47, column (d)                                                |            |            |            |           |
| <b>31</b> <b>Debt basis at the end of the corporation's tax year.</b> Subtract line 30 from line 29. If the result is zero or less, enter -0- | 2,172      |            |            | 2,172     |

**Section C—Gain on Loan Repayment**

|                                                                 |   |  |  |  |
|-----------------------------------------------------------------|---|--|--|--|
| <b>32</b> Repayment. Enter the amount from line 19              |   |  |  |  |
| <b>33</b> Nontaxable repayments. Enter the amount from line 26  |   |  |  |  |
| <b>34</b> <b>Reportable gain.</b> Subtract line 33 from line 32 | 0 |  |  |  |

**Part III Shareholder Allowable Loss and Deduction Items**

| Description                                                                                                                                                           | (a) Current year losses and deductions | (b) Carryover amounts (column (e)) from the previous year | (c) Allowable loss from stock basis | (d) Allowable loss from debt basis | (e) Carryover amounts |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------------|-------------------------------------|------------------------------------|-----------------------|
| <b>35</b> Ordinary business loss                                                                                                                                      |                                        |                                                           |                                     |                                    |                       |
| <b>36</b> Net rental real estate loss                                                                                                                                 |                                        |                                                           |                                     |                                    |                       |
| <b>37</b> Other net rental loss                                                                                                                                       |                                        |                                                           |                                     |                                    |                       |
| <b>38</b> Net capital loss                                                                                                                                            |                                        |                                                           |                                     |                                    |                       |
| <b>39</b> Net section 1231 loss                                                                                                                                       |                                        |                                                           |                                     |                                    |                       |
| <b>40</b> Other loss                                                                                                                                                  |                                        |                                                           |                                     |                                    |                       |
| <b>41</b> Section 179 deductions                                                                                                                                      |                                        |                                                           |                                     |                                    |                       |
| <b>42</b> Charitable contributions                                                                                                                                    | 6,915                                  |                                                           | 6,915                               |                                    |                       |
| <b>43</b> Investment interest expense                                                                                                                                 |                                        |                                                           |                                     |                                    |                       |
| <b>44</b> Section 59(e)(2) expenditures                                                                                                                               |                                        |                                                           |                                     |                                    |                       |
| <b>45</b> Other deductions                                                                                                                                            |                                        |                                                           |                                     |                                    |                       |
| <b>46</b> Foreign taxes paid or accrued                                                                                                                               |                                        |                                                           |                                     |                                    |                       |
| <b>47</b> <b>Total loss.</b> Add lines 35 through 46 for each column. Enter the total loss in column (c) on line 11 and enter the total loss in column (d) on line 30 | 6,915                                  |                                                           | 6,915                               |                                    |                       |

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# Federal Statements

## Attorney

### Statement 1 - Schedule C, Cost of Goods Sold, Line 39 - Other Costs

| Description | Amount |
|-------------|--------|
| Filing Fees | \$     |
| Total       | \$ 0   |

## Attorney

### Statement 2 - Schedule C, Page 2, Line 43 - Vehicle Information

| Date<br>In Service | Business<br>Miles | Commuting<br>Miles | Other<br>Miles | Off Duty?<br>Y N | Other Vehicle?<br>Y N | Evidence?<br>Y N | Written?<br>Y N |
|--------------------|-------------------|--------------------|----------------|------------------|-----------------------|------------------|-----------------|
| 9/21/15            | 9,532             |                    |                | X                | X                     | X                | X               |
| 11/18/19           |                   |                    |                |                  |                       | X                | X               |

### Statement 3 - Schedule E, Page 2, Line 28

| Name                                           | P For<br>S Ptr                     | Passive<br>Income | Nonpass<br>Loss | Sec 179<br>Deduct | Nonpass<br>Income |
|------------------------------------------------|------------------------------------|-------------------|-----------------|-------------------|-------------------|
| EIN                                            | Basis Comp Not at<br>Required Risk | Passive<br>Loss   |                 |                   |                   |
| Olde Kissimmee Investments Inc<br>**-***7893 X |                                    | \$                | \$              | \$                | \$ 4,909          |
| Rental Real Estate<br>**-***7893 X             |                                    |                   |                 |                   | 6,378             |
| Olde Kissimmee Investments Inc<br>**-***7893 X |                                    |                   |                 |                   | 4,910             |
| Rental Real Estate<br>**-***7893 X             |                                    |                   |                 |                   | 6,378             |
| Olde Kissimmee Realty, Inc.<br>**-***7844 X    |                                    |                   |                 |                   | 346,516           |
| Total                                          |                                    | \$ 0              | \$ 0            | \$ 0              | \$ 369,091        |