

2024 Form 6X - Amendment to Full and Public Disclosure of Financial Interests

Filed with COE: 01/09/2026

General Information

Name: George J Albright III

PID 98587

AGENCY INFORMATION

Organization	Suborganization	Title
Marion County	Elected Constitutional Officer	Tax Collector

Net Worth

This section not amended by filer.

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 N/A.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
This section not amended by filer.	

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
This section not amended by filer.		

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
This section not amended by filer.		

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
This section not amended by filer.			

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

This section not amended by filer.

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.

Amendment Reason

Explanation of changes why are you amending your previous form 6 submission?
Year 2024 tax return upload

Signature of Reporting Official or Candidate

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

George J Albright III

Digitally signed: 01/09/2026

Filed with COE: 01/09/2026

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 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID) 

Taxpayer's name

GEORGE J. ALBRIGHT, III

Spouse's name

TAMMY ALBRIGHT

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	353,874
2	Total tax	2	57,375
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	54,449
4	Amount you want refunded to you	4	35,674
5	Amount you owe	5	

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

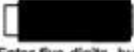
Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax 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 CRIPPEN & CO. 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 ► GEORGE J. ALBRIGHT, IIIDate ► 07/03/2025

Spouse's PIN: check one box only

- ☒ I authorize CRIPPEN & CO. 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 ► TAMMY ALBRIGHTDate ► 07/03/2025

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 ► BRENDA L. FORD

Date ►

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)

**Crippen & Co.
1900 SE 18th Ave.
Ocala, FL 34471-8312
352-732-4260**

July 2, 2025

CONFIDENTIAL

George J. Albright, III & Tammy Albright
209 S.E. 15th Avenue
Ocala, FL 34471

Dear George & Tammy:

We have prepared the enclosed returns from information provided by you without verification or audit. We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Also enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

This office is committed to using safeguards that protect your information from data theft. To further protect your identity, you can also take steps to stop thieves. IRS Publication 4524 (www.irs.gov/pub/irs-pdf/p4524.pdf) outlines simple steps that help you keep your computer secure, avoid phishing and malware, and protect your personal information.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions or if we can be of assistance in any way, please do not hesitate to call.

Sincerely,

Crippen & Co. LLP

Filing Instructions
Electronically Filed
Form 1040 US Individual Income Tax Return
With
Form 8879 IRS e-file Signature Authorization
Taxable Year Ended December 31, 2024

Name: George J. Albright, III & Tammy Albright

Date Due: October 15, 2025

Remittance: None is required. The return shows a total overpayment of \$44,474, of which \$35,674 is to be refunded, and \$8,800 is to be credited to your estimated tax liability for the coming year.

Signature: Form 8879 IRS e-file Signature Authorization authorizes your electronically filed return to be signed with a Personal Identification Number (PIN) and certifies that Part I amounts are from your tax return. Review and sign the Form 8879 IRS e-file Signature Authorization and mail it as soon as possible to:

Crippen & Co.
1900 SE 18th Ave.
Ocala, FL 34471-8312

Important: Your return will not be filed with the IRS until the signed Form 8879 IRS e-file Signature Authorization has been received by this office.

Retain a copy of the signed and dated Form 8879 for your records.

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you mail a paper copy of Form 1040 to the IRS it will delay processing of your return.

Form **1040****Estimated Tax Payments Worksheet****2025**

Name

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Taxpayer Identification Number

Summary of Estimated Tax Payments

Voucher	(a) Due Date	(b) Total Estimate Amount	(c) 2024 Overpayment Applied	(d) Estimate Amt Paid	(e) Balance due Column b - Columns c & d	(f) Date paid	(g) Amount paid
1	04/15/25	2,200	2,200		0		
2	06/16/25	2,200	2,200		0		
3	09/15/25	2,200	2,200		0		
4	01/15/26	2,200	2,200		0		
Total		8,800	8,800				

Calculation of 1040-ES Payments

If adjusting current year amounts, then complete lines 1 through 9. Otherwise, skip to line 10.

1. Taxpayer self-employment income adjustment.	1.	
2. Spouse self-employment income adjustment.	2.	
3. Other adjustments to adjusted gross income.	3.	
4. Computed adjustments to adjusted gross income.	4.	
5. Add lines 1 through 4. Total adjustments to adjusted gross income.	5.	
6. Computed adjustments to self-employment tax.	6.	
7. Computed adjustments to income tax.	7.	
8. Other planned adjustments to taxes/credits.	8.	
9. Add lines 6 through 8. Total Planned tax adjustments. SAFE HARBOR ADJUSTMENT	9.	5,738
10. Enter Total Tax from Form 1040, 1040-SR, or 1040-NR, line 24.	10.	57,375
11. Add lines 9 and 10. Total adjusted tax before adjustments.	11.	63,113
12. Allowed adjustments from Form 1040-ES Instructions:		
a. Unreported SS, Medicare tax, and RRTA tax.	12a.	
b. Tax on excess contributions to IRAs, MSAs, Coverdell ESAs, HSAs, and excess accumulations in retirement plans.	12b.	
c. Recapture of federal mortgage subsidy, excise tax on excess golden parachute payments, and look-back interest.	12c.	
d. Refundable credits from Schedule EIC, Forms 8812, 8863, 8962, and 4136.	12d.	
Add Lines 12a through 12d. Total allowed adjustments.	12.	
13. Subtract line 12 from line 11. 2024 Estimated Tax.	13.	63,113
14. Enter 2024 Federal income tax withheld (Form 1040NR filers include amounts paid with Form 1040-C.)	14.	54,449
15. Enter adjustment(s) to withholding.	15.	
16. Estimated 2024 Tax, including adjustments.		
a. Based upon adjusted 2024 Tax (line 13 - lines 14 and 15).	16a.	8,664
b. Based upon projected 2025 tax.	16b.	
Enter amount from 16a or 16b.	16.	8,664
17. Enter 2024 overpayment applied to 2025 estimates from Form 1040, 1040-SR, or 1040-NR, line 38.	17.	8,800
18. Enter amounts already paid towards 2025 estimates.	18.	
19. Subtract lines 17 and 18 from line 16.	19.	-136
20. Enter Rounding adjustment.	20.	136
21. Add lines 19 and 20. Balance of Estimated Tax for 2025.	21.	

Taxpayer Name GEORGE J. ALBRIGHT, III
 Spouse Name TAMMY ALBRIGHT

DO NOT SUBMIT THIS DOCUMENT TO IRS UNLESS REQUESTED TO DO SO

ERO Declaration

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

ERO Signature

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

ERO's PIN 

Taxpayer Declarations

Perjury Statement

Under penalties of perjury, I declare that I have examined this return, including any accompanying statements and schedules and, to the best of my knowledge and belief, it is true, correct, and complete.

Consent to Disclosure

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

Electronic Funds Withdrawal Consent

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. I further understand that this authorization may apply to future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment System (EFTPS). I authorize EFTPS to issue me a personal identification number (PIN) to access EFTPS. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To request that my PIN be mailed to me, or 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 my electronic income tax return and, if applicable, my Electronic Funds Withdrawal consent.

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

Date (all numerics) _____

Taxpayer's PIN (enter five numbers, other than all zeroes) 

Spouse's PIN (enter five numbers, other than all zeroes) 

Form 1310 Signature and Verification

Completion of this section indicates that I am requesting a refund of taxes overpaid by or on behalf of the decedent. Under penalties of perjury, I declare that I have examined this Form 1310 claim, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of person claiming refund _____

Date _____

Form 1040 (2024) **GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT**Page **2**

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972	16	56,101
	3		17	
	17	Amount from Schedule 2, line 3	18	56,101
	18	Add lines 16 and 17	19	
	19	Child tax credit or credit for other dependents from Schedule 8812	20	
	20	Amount from Schedule 3, line 8	21	
	21	Add lines 19 and 20	22	56,101
	22	Subtract line 21 from line 18. If zero or less, enter -0-	23	1,274
23	Other taxes, including self-employment tax, from Schedule 2, line 21	24	57,375	
24	Add lines 22 and 23. This is your total tax			
Payments	25	Federal income tax withheld from:	25a	54,449
	a	Form(s) W-2	25b	
	b	Form(s) 1099	25c	
	c	Other forms (see instructions)	25d	54,449
	d	Add lines 25a through 25c	26	47,400
	26	2024 estimated tax payments and amount applied from 2023 return	27	
	27	Earned income credit (EIC)	28	
	28	Additional child tax credit from Schedule 8812	29	
	29	American opportunity credit from Form 8863, line 8	30	
	30	Reserved for future use	31	
	31	Amount from Schedule 3, line 15	32	
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	33	101,849
33	Add lines 25d, 26, and 32. These are your total payments	34	44,474	
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	35a	35,674
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here ☐		
Direct deposit? See instructions.	b	Routing number	c	Type: ☐ Checking ☐ Savings
d	Account number			
36	Amount of line 34 you want applied to your 2025 estimated tax	36	8,800	
Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
	38	Estimated tax penalty (see instructions)	38	

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

Designee's name **BRENDA L. FORD** Phone no. **352-732-4260** Personal identification number (PIN) **[REDACTED]**

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

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

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

Phone no.	Email address	Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed
		BRENDA L. FORD	BRENDA L. FORD	07/02/25	[REDACTED]	
Firm's name CRIPPEN & CO.			Phone no. 352-732-4260			
Firm's address 1900 SE 18TH AVE.			Firm's EIN 59-2032210			
Firm's address OCALA			FL 34471-8312			

Go to www.irs.gov/Form1040 for instructions and the latest information.Form **1040** (2024)

SCHEDULE 1
(Form 1040)Department of the Treasury
Internal Revenue Service**Additional Income and Adjustments to Income**

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

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

OMB No. 1545-0074

2024Attachment
Sequence No. 01

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

Your social security number

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

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.**Part 1 Additional Income**

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions):		
3	Business income or (loss). Attach Schedule C	3	-9,073
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	103,868
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
a	Net operating loss	8a	
b	Gambling	8b	
c	Cancellation of debt	8c	
d	Foreign earned income exclusion from Form 2555	8d	
e	Income from Form 8853	8e	
f	Income from Form 8889	8f	
g	Alaska Permanent Fund dividends	8g	
h	Jury duty pay	8h	
i	Prizes and awards	8i	
j	Activity not engaged in for profit income	8j	
k	Stock options	8k	
l	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	8l	
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m	
n	Section 951(a) inclusion (see instructions)	8n	
o	Section 951A(a) inclusion (see instructions)	8o	
p	Section 461(l) excess business loss adjustment	8p	
q	Taxable distributions from an ABL account (see instructions)	8q	
r	Scholarship and fellowship grants not reported on Form W-2	8r	
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s	
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t	
u	Wages earned while incarcerated	8u	
v	Digital assets received as ordinary income not reported elsewhere. See instructions	8v	
z	Other income. List type and amount:	8z	
9	Total other income. Add lines 8a through 8z	9	
10	Combine lines 1 through 7 and 9. This is your additional income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10	94,795

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

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 for instructions and the latest information.

OMB No. 1545-0074

2024Attachment
Sequence No. **02**

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

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Your social security number

Part I Tax

1 Additions to tax:			
a Excess advance premium tax credit repayment. Attach Form 8962	1a		
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)	1b		
c 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)	1c		
d Recapture of net EPE from Form 4255, line 2a, column (i)	1d		
e Excessive payments (EP) from Form 4255. Check applicable box and enter amount: (i) ☐ Line 1a, column (n) (ii) ☐ Line 1c, column (n) (iii) ☐ Line 1d, column (n) (iv) ☐ Line 2a, column (n)	1e		
f 20% EP from Form 4255. Check applicable box and enter amount. See instructions: (i) ☐ Line 1a, column (o) (ii) ☐ Line 1c, column (o) (iii) ☐ Line 1d, column (o) (iv) ☐ Line 2a, column (o)	1f		
y Other additions to tax (see instructions):	1y		
z Add lines 1a through 1y		1z	
2 Alternative minimum tax. Attach Form 6251		2	
3 Add lines 1z and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17		3	

Part II Other Taxes

4 Self-employment tax. Attach Schedule SE		4	
5 Social security and Medicare tax on unreported tip income. Attach Form 4137	5		
6 Uncollected social security and Medicare tax on wages. Attach Form 8919	6		
7 Total additional social security and Medicare tax. Add lines 5 and 6		7	
8 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. If not required, check here ☐		8	
9 Household employment taxes. Attach Schedule H		9	
10 Repayment of first-time homebuyer credit. Attach Form 5405 if required		10	
11 Additional Medicare Tax. Attach Form 8959		11	
12 Net investment income tax. Attach Form 8960		12	1,274
13 Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12		13	
14 Interest on tax due on installment income from the sale of certain residential lots and timeshares		14	
15 Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000		15	
16 Recapture of low-income housing credit. Attach Form 8611		16	

(continued on page 2)

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

Schedule 2 (Form 1040) 2024

Part II Other Taxes (continued)

17 Other additional taxes:		
a Recapture of other credits. List type, form number, and amount:	17a	
b Recapture of federal mortgage subsidy, if you sold your home see instructions	17b	
c Additional tax on HSA distributions. Attach Form 8889	17c	
d Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d	
e Additional tax on Archer MSA distributions. Attach Form 8853	17e	
f Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f	
g Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g	
h Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h	
i Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i	
j Section 72(m)(5) excess benefits tax	17j	
k Golden parachute payments	17k	
l Tax on accumulation distribution of trusts	17l	
m Excise tax on insider stock compensation from an expatriated corporation	17m	
n Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n	
o Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17o	
p Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p	
q Any interest from Form 8621, line 24	17q	
z Any other taxes. List type and amount:	17z	
18 Total additional taxes. Add lines 17a through 17z		18
19 Recapture of net EPE from Form 4255, line 1d, column (I)		19
20 Section 965 net tax liability installment from Form 965-A	20	
21 Add lines 4, 7 through 16, 18, and 19. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21
		1,274

Profit or Loss From Business

(Sole Proprietorship)

Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065.

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

OMB No. 1545-0074

2024

Attachment
Sequence No. 09

Name of proprietor

GEORGE J. ALBRIGHT, III

Social security number (SSN)

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

ANTIQUE CARS

B Enter code from instructions

441227

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

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

E Business address (including suite or room no.) 209 S.E. 15TH AVENUE

City, town or post office, state, and ZIP code Ocala FL 34471

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

☐ Yes ☒ No

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

1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked ☐	1	5,659
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	5,659
4	Cost of goods sold (from line 42)	4	1,728
5	Gross profit. Subtract line 4 from line 3	5	3,931
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7	Gross income. Add lines 5 and 6	7	3,931

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

8	Advertising	8	23	18	Office expense (see instructions)	18	
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	
12	Depletion	12		b	Other business property	20b	2,384
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	1,193
16	Interest (see instructions):			24	Travel and meals:		
a	Mortgage (paid to banks, etc.)	16a		a	Travel	24a	
b	Other	16b		b	Deductible meals (see instructions)	24b	
17	Legal and professional services	17	400	25	Utilities	25	
28	Total expenses before expenses for business use of home. Add lines 8 through 27b	28		26	Wages (less employment credits)	26	
29	Tentative profit or (loss). Subtract line 28 from line 7	29		27a	Other expenses (from line 48)	27a	9,004
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. Simplified method filers only: Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30		b	Energy efficient commercial bldgs deduction (attach Form 7205)	27b	
31	Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32.	31		32a	☒ All investment is at risk.		
32	If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on Form 1041, line 3. • If you checked 32b, you must attach Form 6198. Your loss may be limited.			32b	☐ Some investment is not at risk.		
							-9,073

GEORGE J. ALBRIGHT, III

Schedule C (Form 1040) 2024

ANTIQUE CARS

Page 2

Part III Cost of Goods Sold (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? ☐ Yes ☒ No
If "Yes," attach explanation

35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	5,000
36	Purchases less cost of items withdrawn for personal use	36	26,400
37	Cost of labor. Do not include any amounts paid to yourself	37	
38	Materials and supplies	38	
39	Other costs SEE STATEMENT 1	39	3,228
40	Add lines 35 through 39	40	34,628
41	Inventory at end of year	41	32,900
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	1,728

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)

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 **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

Part V Other Expenses. 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 for instructions and the latest information.

OMB No. 1545-0074

2024Attachment
Sequence No. 12

Name(s) shown on return

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Your social security number

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

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

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

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

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11 584
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12 32,564
13 Capital gain distributions. See the instructions				13
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 ()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on the back				15 33,148

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

Schedule D (Form 1040) 2024

Part III Summary

16 Combine lines 7 and 15 and enter the result	16 33,148
• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.	
17 Are lines 15 and 16 both gains? ☒ Yes. Go to line 18. ☐ No. Skip lines 18 through 21, and go to line 22.	
18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18
19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19
20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. ☒ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.	
21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers.	21 ()
22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. ☐ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	

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

Your social security number

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

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 2					
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 4582
A			
B			
C			
D			
29a Totals			256,878
b Totals		3,546	149,464
30 Add columns (h) and (k) of line 29a			30 256,878
31 Add columns (g), (i), and (j) of line 29b			31 153,010
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31			32 103,868

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	103,868
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	

*LOSS LIMITED BY BASIS

Form **4797**

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 for instructions and the latest information.

OMB No. 1545-0184

2024Attachment
Sequence No. **27**Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Identifying number

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT**1a** 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**1a****b** Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets**1b****c** Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets**1c**

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

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	FROM K1						584

3 Gain, if any, from Form 4684, line 39**3****4** Section 1231 gain from installment sales from Form 6252, line 26 or 37**4****5** Section 1231 gain or (loss) from like-kind exchanges from Form 8824**5****6** Gain, if any, from line 32, from other than casualty or theft**6****7** Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows**7**

584

Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.

Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.

8 Nonrecaptured net section 1231 losses from prior years. See instructions**8****9** Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions**9**

Part II Ordinary Gains and Losses (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

11 Loss, if any, from line 7**11****12** Gain, if any, from line 7 or amount from line 8, if applicable**12****13** Gain, if any, from line 31**13****14** Net gain or (loss) from Form 4684, lines 31 and 38a**14****15** Ordinary gain from installment sales from Form 6252, line 25 or 36**15****16** Ordinary gain or (loss) from like-kind exchanges from Form 8824**16****17** Combine lines 10 through 16**17****18** For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.

a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions

18a

b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4

18b

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

2024Attachment
Sequence No. **32**Department of the Treasury
Internal Revenue Service

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

Go to www.irs.gov/Form6251 for instructions and the latest information.

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

Your social security number

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT**Part I Alternative Minimum Taxable Income** (See instructions for how to complete each line.)

1	Enter the amount from Form 1040 or 1040-SR, line 15, if more than zero. If Form 1040 or 1040-SR, line 15, is zero, subtract line 14 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the result here. (If less than zero, enter as a negative amount.)	1	304,165
2a	If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040 or 1040-SR, line 12	2a	30,750
b	Tax refund from Schedule 1 (Form 1040), line 1 or line 8z	2b	
c	Investment interest expense (difference between regular tax and AMT)	2c	
d	Depletion (difference between regular tax and AMT)	2d	
e	Net operating loss deduction from Schedule 1 (Form 1040), line 8a. Enter as a positive amount	2e	
f	Alternative tax net operating loss deduction	2f	
g	Interest from specified private activity bonds exempt from the regular tax	2g	
h	Qualified small business stock, see instructions	2h	
i	Exercise of incentive stock options (excess of AMT income over regular tax income)	2i	
j	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	2j	
k	Disposition of property (difference between AMT and regular tax gain or loss)	2k	
l	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	2l	
m	Passive activities (difference between AMT and regular tax income or loss)	2m	
n	Loss limitations (difference between AMT and regular tax income or loss)	2n	12,698
o	Circulation costs (difference between regular tax and AMT)	2o	
p	Long-term contracts (difference between AMT and regular tax income)	2p	
q	Mining costs (difference between regular tax and AMT)	2q	
r	Research and experimental costs (difference between regular tax and AMT)	2r	
s	Income from certain installment sales before January 1, 1987	2s	
t	Intangible drilling costs preference	2t	
3	Other adjustments, including income-based related adjustments	3	
4	Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$875,950, see instructions.)	4	347,613

Part II Alternative Minimum Tax (AMT)

5	Exemption. IF your filing status is... AND line 4 is not over... THEN enter on line 5... Single or head of household \$ 609,350 \$ 85,700 Married filing jointly or qualifying surviving spouse 1,218,700 133,300 Married filing separately 609,350 66,650 If line 4 is over the amount shown above for your filing status, see instructions.	5	133,300
6	Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9, and 11, and go to line 10	6	214,313
7	• If you are filing Form 2555, see instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here. • All others: If line 6 is \$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.	7	52,140
8	Alternative minimum tax foreign tax credit (see instructions)	8	
9	Tentative minimum tax. Subtract line 8 from line 7	9	52,140
10	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	10	56,101
11	AMT. Subtract line 10 from line 9. If zero or less, enter -0-. Enter here and on Schedule 2 (Form 1040), line 2	11	0

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

Form **6251** (2024)

Form 6251 (2024)

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	214,313
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	32,564
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	
15 If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as figured for the AMT, if necessary). If you are filing Form 2555, see instructions for the amount to enter	15	32,564
16 Enter the smaller of line 12 or line 15	16	32,564
17 Subtract line 16 from line 12	17	181,749
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	47,255
19 Enter: \$94,050 if married filing jointly or qualifying surviving spouse, \$47,025 if single or married filing separately, or \$63,000 if head of household.	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	271,017
21 Subtract line 20 from line 19. If zero or less, enter -0-	21	0
22 Enter the smaller of line 12 or line 13	22	32,564
23 Enter the smaller of line 21 or line 22. This amount is taxed at 0%	23	
24 Subtract line 23 from line 22	24	32,564
25 Enter: \$518,900 if single, \$291,850 if married filing separately, \$583,750 if married filing jointly or qualifying surviving spouse, or \$551,350 if head of household.	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	271,017
28 Add line 26 and line 27	28	271,017
29 Subtract line 28 from line 25. If zero or less, enter -0-	29	312,733
30 Enter the smaller of line 24 or line 29	30	32,564
31 Multiply line 30 by 15% (0.15)	31	4,885
32 Add lines 23 and 30	32	32,564
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	0
34 Multiply line 33 by 20% (0.20)	34	
If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35.		
35 Add lines 17, 32, and 33	35	
36 Subtract line 35 from line 12	36	
37 Multiply line 36 by 25% (0.25)	37	
38 Add lines 18, 31, 34, and 37	38	52,140
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	55,721
40 Enter the smaller of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7	40	52,140

Form 6251 (2024)

Form **4952**Department of the Treasury
Internal Revenue Service**Investment Interest Expense Deduction**

Attach to your tax return.

Go to www.irs.gov/Form4952 for the latest information.

OMB No. 1545-0191

2024Attachment
Sequence No. **51**

Name(s) shown on return

Identifying number

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 2024 (see instructions)	1	1,594
2	Disallowed investment interest expense from 2023 Form 4952, line 7	2	900
3	Total investment interest expense. Add lines 1 and 2	3	2,494

Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	4a	955	
b	Qualified dividends included on line 4a	4b		
c	Subtract line 4b from line 4a			4c 955
d	Net gain from the disposition of property held for investment	4d	32,564	
e	Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions	4e	32,564	
f	Subtract line 4e from line 4d			4f
g	Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions			4g
h	Investment income. Add lines 4c, 4f, and 4g			4h 955
5	Investment expenses (see instructions)			5
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-			6 955

Part III Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 2025. Subtract line 6 from line 3. If zero or less, enter -0-	7	1,539
8	Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions	8	955

For Paperwork Reduction Act Notice, see page 4.

Form **4952** (2024)

Investment Interest Expense Deduction

OMB No. 1545-0191

Form **4952**Department of the Treasury
Internal Revenue Service

Attach to your tax return.

Go to www.irs.gov/Form4952 for the latest information.**2024**Attachment
Sequence No. **51**

Name(s) shown on return

Identifying number

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Part I Total Investment Interest Expense

1	Investment interest expense paid or accrued in 2024 (see instructions)	1	1,594
2	Disallowed investment interest expense from 2023 Form 4952, line 7	2	900
3	Total investment interest expense. Add lines 1 and 2	3	2,494

Part II Net Investment Income

4a	Gross income from property held for investment (excluding any net gain from the disposition of property held for investment)	4a	955	
b	Qualified dividends included on line 4a	4b		
c	Subtract line 4b from line 4a			4c 955
d	Net gain from the disposition of property held for investment	4d	32,564	
e	Enter the smaller of line 4d or your net capital gain from the disposition of property held for investment. See instructions	4e	32,564	
f	Subtract line 4e from line 4d			4f
g	Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions			4g
h	Investment income. Add lines 4c, 4f, and 4g			4h 955
5	Investment expenses (see instructions)			5
6	Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-			6 955

Part III Investment Interest Expense Deduction

7	Disallowed investment interest expense to be carried forward to 2025. Subtract line 6 from line 3. If zero or less, enter -0-	7	1,539
8	Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions	8	955

For Paperwork Reduction Act Notice, see page 4.

Form **4952** (2024)

Form **8995**

Qualified Business Income Deduction Simplified Computation

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.

OMB No. 1545-2294

2024Attachment
Sequence No. **55**Department of the Treasury
Internal Revenue Service

Name(s) shown on return

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Your taxpayer identification number

Note: You can claim the qualified business income deduction only if you have qualified business income from a qualified trade or business, real estate investment trust dividends, publicly traded partnership income, or a domestic production activities deduction passed through from an agricultural or horticultural cooperative. See instructions.

Use this form if your taxable income, before your qualified business income deduction, is at or below \$191,950 (\$383,900 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)
i	Ocala Landscape Management	59-3564793	107,414
ii	River Retreat Partnership	59-3480433	-2,811
iii	Closet Envy Online Boutique Inc	84-3360285	-174
iv	Antique Cars		-9,073
v			

2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	95,356	
3	Qualified business net (loss) carryforward from the prior year	561	
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	94,795	
5	Qualified business income component. Multiply line 4 by 20% (0.20)		18,959
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)		
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	0	
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		
10	Qualified business income deduction before the income limitation. Add lines 5 and 9		18,959
11	Taxable income before qualified business income deduction (see instructions)	323,124	
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	33,148	
13	Subtract line 12 from line 11. If zero or less, enter -0-	289,976	
14	Income limitation. Multiply line 13 by 20% (0.20)		57,995
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions)		18,959
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-		0
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-		

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

Form **8995** (2024)

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

Attach to your tax return.

OMB No. 1545-2227

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

Your social security number or EIN

Name(s) shown on your tax return

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT**Part I Investment Income**

Section 6013(g) election (see instructions)

Section 6013(h) election (see instructions)

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

1	Taxable interest (see instructions)	1	955
2	Ordinary dividends (see instructions)	2	
3	Annuities (see instructions)	3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a	94,795
4b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b	-94,795
4c	Combine lines 4a and 4b	4c	
5a	Net gain or loss from disposition of property (see instructions)	5a	33,148
5b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b	-584
5c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c	
5d	Combine lines 5a through 5c	5d	32,564
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)	6	
7	Other modifications to investment income (see instructions)	7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7	8	33,519

Part II Investment Expenses Allocable to Investment Income and Modifications

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

Part III Tax Computation

12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. Estates and trusts, complete lines 18a-21. If zero or less, enter -0-	12	33,519
13	Modified adjusted gross income (see instructions)	13	353,874
14	Threshold based on filing status (see instructions)	14	250,000
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	103,874
16	Enter the smaller of line 12 or line 15	16	33,519
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include on your tax return (see instructions)	17	1,274
18a	Net investment income (line 12 above)	18a	
18b	Deductions for distributions of net investment income and charitable deductions (see instructions)	18b	
18c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c	
19a	Adjusted gross income (see instructions)	19a	
19b	Highest tax bracket for estates and trusts for the year (see instructions)	19b	
19c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c	
20	Enter the smaller of line 18c or line 19c	20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and include on your tax return (see instructions)	21	

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

Form **8960** (2024)

Form **4562****Depreciation and Amortization**
(Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

2024Attachment
Sequence No. **179**Department of the Treasury
Internal Revenue ServiceGo to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Business or activity to which this form relates

PASS-THROUGH EXPENSE FROM K-1**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,220,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	3,050,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	1,220,000
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
	FROM SCHEDULE K-1 (FORM 1120-S)		149,464
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	149,464
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	149,464
10	Carryover of disallowed deduction from line 13 of your 2023 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	431,348
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	149,464
13	Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

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

17	MACRS deductions for assets placed in service in tax years beginning before 2024	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2024 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	149,464
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

DAA

Form **4562** (2024)

THERE ARE NO AMOUNTS FOR PAGE 2

Form **7203**

(Rev. December 2022)

Department of the Treasury
Internal Revenue Service**S Corporation Shareholder Stock and
Debt Basis Limitations**

Attach to your tax return.

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

OMB No. 1545-2302

Attachment
Sequence No. **203**

Name of shareholder

GEORGE J. ALBRIGHT, III

Identification number

A Name of S corporation

OCALA LANDSCAPE MANAGEMENT, INC.

B Employer identification number

59-3564793

C Stock block (see instructions):

D Check applicable box(es) to indicate how stock was acquired:

(1) ☐ Original shareholder (2) ☐ Purchased (3) ☐ Inherited (4) ☐ Gifted (5) ☐ Other:E Check if you have a Regulations section 1.1367-1(g) election in effect during the tax year for this S corporation ☐**Part I Shareholder Stock Basis**

1	Stock basis at the beginning of the corporation's tax year	1	51,666
2	Basis from any capital contributions made or additional stock acquired during the tax year	2	3,165
3a	Ordinary business income (enter losses in Part III)	3a	256,878
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	334
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	257,212
5	Stock basis before distributions. Add lines 1, 2, and 4	5	312,043
6	Distributions (excluding dividend distributions) Note: If line 6 is larger than line 5, subtract line 5 from line 6 and report the result as a capital gain on Form 8949 and Schedule D. See instructions.	6	100,000
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	212,043
8a	Nondeductible expenses	8a	
b	Depletion for oil and gas	8b	
c	Business credits (sections 50(c)(1) and (5))	8c	
9	Add lines 8a through 8c	9	
10	Stock basis before loss and deduction items. Subtract line 9 from line 7. If the result is zero or less, enter -0-, skip lines 11 through 14, and enter -0- on line 15	10	212,043
11	Allowable loss and deduction items. Enter the amount from line 47, column (c)	11	150,858
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	150,858
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	61,185

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
	☐ Formal note ☐ Open account	☐ Formal note ☐ Open account	☐ Formal note ☐ Open account	
16 Loan balance at the beginning of the corporation's tax year				
17 Additional loans (see instructions)				
18 Loan balance before repayment. Add lines 16 and 17				
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				

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

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

Section C—Gain on Loan Repayment

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

Part III Shareholder Allowable Loss and Deduction Items

Description	(a) Current year losses and deductions	(b) Carryover amounts (column (e)) from the previous year	(c) Allowable loss from stock basis	(d) Allowable loss from debt basis	(e) Carryover amounts
35 Ordinary business loss					
36 Net rental real estate loss					
37 Other net rental loss					
38 Net capital loss					
39 Net section 1231 loss					
40 Other loss					
41 Section 179 deductions	149,464		149,464		
42 Charitable contributions	1,394		1,394		
43 Investment interest expense					
44 Section 59(e)(2) expenditures					
45 Other deductions					
46 Foreign taxes paid or accrued					
47 Total loss. 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	150,858		150,858		

Form **7203**(Rev. December 2022)
Department of the Treasury
Internal Revenue Service**S Corporation Shareholder Stock and
Debt Basis Limitations**Attach to your tax return.
Go to www.irs.gov/Form7203 for instructions and the latest information.

OMB No. 1545-2302

Attachment
Sequence No. **203**

Name of shareholder

TAMMY ALBRIGHT

Identification number

A Name of S corporation

CLOSET ENVY ONLINE BOUTIQUE INC

Employer identification number

84-3360285

C Stock block (see instructions):

D Check applicable box(es) to indicate how stock was acquired:

(1) ☐ Original shareholder (2) ☐ Purchased (3) ☐ Inherited (4) ☐ Gifted (5) ☐ Other:E Check if you have a Regulations section 1.1367-1(g) election in effect during the tax year for this S corporation ☐**Part I Shareholder Stock Basis**

1	Stock basis at the beginning of the corporation's tax year	1	18,805
2	Basis from any capital contributions made or additional stock acquired during the tax year	2	
3a	Ordinary business income (enter losses in Part III)	3a	
b	Net rental real estate income (enter losses in Part III)	3b	
c	Other net rental income (enter losses in Part III)	3c	
d	Interest income	3d	
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	250
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	250
5	Stock basis before distributions. Add lines 1, 2, and 4	5	19,055
6	Distributions (excluding dividend distributions) Note: If line 6 is larger than line 5, subtract line 5 from line 6 and report the result as a capital gain on Form 8949 and Schedule D. See instructions.	6	9,444
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	9,611
8a	Non deductible expenses	8a	
b	Depletion for oil and gas	8b	
c	Business credits (sections 50(c)(1) and (5))	8c	
9	Add lines 8a through 8c	9	
10	Stock basis before loss and deduction items. Subtract line 9 from line 7. If the result is zero or less, enter -0-, skip lines 11 through 14, and enter -0- on line 15	10	9,611
11	Allowable loss and deduction items. Enter the amount from line 47, column (c)	11	174
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	174
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	9,437

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
	☐ Formal note ☒ Open account	☐ Formal note ☐ Open account	☐ Formal note ☐ Open account	
16 Loan balance at the beginning of the corporation's tax year	8,357			8,357
17 Additional loans (see instructions)				
18 Loan balance before repayment. Add lines 16 and 17	8,357			8,357
19 Principal portion of debt repayment (this line doesn't include interest)	8,357			8,357
20 Loan balance at the end of the corporation's tax year. Subtract lines 19 from line 18				

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

Description	(a) Debt 1	(b) Debt 2	(c) Debt 3	(d) Total
21 Debt basis at the beginning of the corporation's tax year	8,357			8,357
22 Enter the amount, if any, from line 17				
23 Debt basis restoration (see instructions)				
24 Debt basis before repayment. Add lines 21, 22, and 23	8,357			8,357
25 Divide line 24 by line 18	1.0000			
26 Nontaxable debt repayment. Multiply line 25 by line 19	8,357			8,357
27 Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24	0			
28 Nondeductible expenses and oil and gas depletion deductions in excess of stock basis				
29 Debt basis before losses and deductions. Subtract line 28 from line 27. If the result is zero or less, enter -0-	0			
30 Allowable losses in excess of stock basis. Enter the amount from line 47, column (d)				
31 Debt basis at the end of the corporation's tax year. Subtract line 30 from line 29. If the result is zero or less, enter -0-	0			

Section C—Gain on Loan Repayment

32 Repayment. Enter the amount from line 19	8,357			8,357
33 Nontaxable repayments. Enter the amount from line 26	8,357			8,357
34 Reportable gain. 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
35 Ordinary business loss	174		174		
36 Net rental real estate loss					
37 Other net rental loss					
38 Net capital loss					
39 Net section 1231 loss					
40 Other loss					
41 Section 179 deductions					
42 Charitable contributions					
43 Investment interest expense					
44 Section 59(e)(2) expenditures					
45 Other deductions					
46 Foreign taxes paid or accrued					
47 Total loss. 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	174		174		

Federal Statements

Antique Cars

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

Description	Amount
PARTS	\$ 3,228
TOTAL	<u>\$ 3,228</u>

Federal Statements

Statement 2 - Schedule E, Page 2, Line 28

Name	P S	For Ptr	EIN	Basis Comp Required	Not at Risk	Passive Loss	Passive Income	Nonpass Loss	Sec 179 Deduct	Nonpass Income
OCALA LANDSCAPE MANAGEMENT, INC.	S		59-3564793	X	\$	\$	\$	\$	\$ 149,464	\$ 256,878
RIVER RETREAT PARTNERSHIP	P		59-3480433					2,811		
WEIR PARTNERS	P		59-3486884							
PYA - BASIS LIMITATION	P		59-3486884					561		
CLOSET ENVY ONLINE BOUTIQUE INC	S		84-3360285	X	\$	\$	\$	174	\$ 149,464	\$ 256,878
TOTAL						\$ 0	\$ 0	\$ 3,546	\$ 149,464	\$ 256,878

Form **1040****Shareholder's Basis Worksheet Page 1****2024**

Name

Taxpayer Identification Number

GEORGE J. ALBRIGHT, III

Name of Entity **OCALA LANDSCAPE MANAGEMENT, INC.**EIN **59-3564793**Passive Activity Type **NOT PASSIVE**K1 Unit **1****Shareholder Stock Basis**

1. Beginning of year stock basis. Per IRC 1367(a)(2) do not enter an amount below zero 1. 51,666
- Increases to stock basis**
2. Capital contributions made or additional stock acquired 2. 3,165
3. Ordinary business income 3. 256,878
4. Net rental real estate income 4. _____
5. Other net rental income 5. _____
6. Interest, dividends and royalties 6. _____
7. Net capital gains 7. _____
8. Net section 1231 gain and ordinary business gain 8. 334
9. Tax-exempt interest, other tax-exempt income and recapture credits 9. _____
10. Other income 10. _____
11. Excess of deductions for depletion over basis of property (other than oil and gas) 11. _____
12. Other increases to stock basis 12. _____
13. Total increases to stock basis. Combine lines 2 through 12 13. 260,377
14. Stock basis before distributions and items of loss or deductions. Add line 1 and line 13 and enter the result here 14. 312,043
- Decreases to stock basis**
15. Distributions allowed 15. 100,000
16. Stock basis after distributions and before items of loss or deductions. Subtract line 15 from line 14. If zero or less, enter -0- 16. 212,043
17. Losses and deductions applied against stock basis. (See Shareholder Basis Worksheet Page 2) ... 17. 150,858
18. Other decreases to stock basis 18. _____
19. Amount used to restore loan basis 19. _____
20. Total decreases (other than distributions) to stock basis. Combine lines 17 through 19 20. 150,858
21. Stock basis at the end of year. (Subtract line 20 from line 16). Per IRC 1367(a)(2) do not enter an amount below zero 21. 61,185

Shareholder Debt Basis

22. Debt basis at the beginning of corporation's tax year 22. _____
23. Additional loans 23. _____
24. Debt basis restoration 24. _____
25. Nontaxable debt repayment 25. _____
26. Debt basis before losses and deductions. Combine lines 22 through 25 26. _____
27. Losses and deductions applied against debt basis. (See Shareholder Basis Worksheet Page 3) 27. _____
28. Debt basis at the end of year (Subtract line 28 from line 27). 28. 0
29. Stock and debt basis at the end of the year (Add lines 21 and line 28) 29. 61,185

Gain Recognized on Excess Distributions

30. Property distributions reported in Box 16, Code D, Schedule K-1 (1120S) 30. 100,000
31. Stock basis before distributions and loss items (line 14) less gain from the entire disposition of stock reported on line 18. 31. 312,043
32. Total gain recognized on excess distributions. (Subtract line 31 from line 30) 32. 0

● Sch D/8949, short-term capital gain _____

● Sch D/8949, long-term capital gain _____

Form **1040**

Shareholder's Basis Worksheet Page 3

2024

Name **GEORGE J. ALBRIGHT, III**Id No. XXXXXXXXXXEntity Name **OCALA LANDSCAPE MANAGEMENT, INC.** EIN **59-3564793** Passive Activity Type **NOT PASSIVE**K1 Unit **1**

BASIS REDUCED BY NONDEDUCTIBLE ITEMS BEFORE LOSS AND DEDUCTION ITEMS

Loss Allocated to Shareholder Stock and Debt Basis

	Suspended Losses	Current Year Loss	Total Loss	Percent	Allowed Stock Loss	Disallowed Stock Loss	Percent	Allowed Loan Loss	Disallowed Loss Carryforward	Total Allowed Loss
Nondeductible expenses										
Depletion for oil and gas										
Losses and deductions:										
Ordinary business loss										
Net rental real estate loss										
Other net rental loss										
Short-term capital loss										
Long-term capital loss										
28% capital loss										
Section 1231 loss										
4797 - Ordinary loss										
Other portfolio loss										
1256 contracts and straddles										
Other losses - Schedule E										
Other losses - 1040 Sch 1										
Section 179 expense		149,464	149,464	0.9908	149,464					149,464
Cash contributions		1,394	1,394	0.0092	1,394					1,394
Cash contributions (30%)										
Noncash contributions (50%)										
Noncash contributions (30%)										
Cap gain prop 50% org (30%)										
Cap gain prop (20%)										
Portfolio deductions (other)										
Investment interest expense										
Deductions-royalty income										
Section 59(e)(2) expenditures										
Preproductive period exp.										
Reforestation expense ded.										
Other deductions										
Foreign taxes										
Total losses and deductions	150,858	150,858	150,858	1.0000	150,858					150,858
Total nonded and deductible items	150,858	150,858	150,858		150,858					150,858

Form **1040****Shareholder's Basis Worksheet Page 1****2024**

Name

Taxpayer Identification Number

TAMMY ALBRIGHT

Name of Entity CLOSET ENVY ONLINE BOUTIQUE INC

EIN 84-3360285

Passive Activity Type NOT PASSIVE

K1 Unit 6

Shareholder Stock Basis

1. Beginning of year stock basis. Per IRC 1367(a)(2) do not enter an amount below zero 1. 18,805
- Increases to stock basis**
2. Capital contributions made or additional stock acquired 2. _____
3. Ordinary business income 3. _____
4. Net rental real estate income 4. _____
5. Other net rental income 5. _____
6. Interest, dividends and royalties 6. _____
7. Net capital gains 7. _____
8. Net section 1231 gain and ordinary business gain 8. 250
9. Tax-exempt interest, other tax-exempt income and recapture credits 9. _____
10. Other income 10. _____
11. Excess of deductions for depletion over basis of property (other than oil and gas) 11. _____
12. Other increases to stock basis 12. _____
13. Total increases to stock basis. Combine lines 2 through 12 13. 250
14. Stock basis before distributions and items of loss or deductions. Add line 1 and line 13 and enter the result here 14. 19,055
- Decreases to stock basis**
15. Distributions allowed 15. 9,444
16. Stock basis after distributions and before items of loss or deductions. Subtract line 15 from line 14. If zero or less, enter -0- 16. 9,611
17. Losses and deductions applied against stock basis. (See Shareholder Basis Worksheet Page 2) 17. 174
18. Other decreases to stock basis 18. _____
19. Amount used to restore loan basis 19. _____
20. Total decreases (other than distributions) to stock basis. Combine lines 17 through 19 20. 174
21. Stock basis at the end of year. (Subtract line 20 from line 16). Per IRC 1367(a)(2) do not enter an amount below zero 21. 9,437

Shareholder Debt Basis

22. Debt basis at the beginning of corporation's tax year 22. 8,357
23. Additional loans 23. _____
24. Debt basis restoration 24. _____
25. Nontaxable debt repayment 25. 8,357
26. Debt basis before losses and deductions. Combine lines 22 through 25 26. _____
27. Losses and deductions applied against debt basis. (See Shareholder Basis Worksheet Page 3) 27. _____
28. Debt basis at the end of year (Subtract line 28 from line 27). 28. 0
29. Stock and debt basis at the end of the year (Add lines 21 and line 28) 29. 9,437

Gain Recognized on Excess Distributions

30. Property distributions reported in Box 16, Code D, Schedule K-1 (1120S) 30. 9,444
31. Stock basis before distributions and loss items (line 14) less gain from the entire disposition of stock reported on line 18. 31. 19,055
32. Total gain recognized on excess distributions. (Subtract line 31 from line 30) 32. 0

• Sch D/8949, short-term capital gain _____ • Sch D/8949, long-term capital gain _____

Form 1040

Shareholder's Basis Worksheet Page 2

2024

Name TAMMY ALBRIGHT

Id No.

Entity Name CLOSET ENVY ONLINE BOUTIQUE INC EIN 84-3360285 Passive Activity Type NOT PASSIVE

K1 Unit 6

BASIS REDUCED BY NONDEDUCTIBLE ITEMS BEFORE LOSS AND DEDUCTION ITEMS

Shareholder Debt Basis

Form 7203 Line #	Description	Debt 1 ☐ Formal note ☒ Open account	Debt 2 ☐ Formal note ☐ Open account	Debt 3 ☐ Formal note ☐ Open account	Debt 4 ☐ Formal note ☐ Open account	Debt 5 ☐ Formal note ☐ Open account	Debt 6 ☐ Formal note ☐ Open account	Total
16	Loan balance at the beginning of the corporation's tax year	8,357						8,357
17	Additional loans							
18	Loan balance before repayment. Add lines 16 and 17	8,357						8,357
19	Principal portion of debt repayment (this line doesn't include interest)	8,357						8,357
20	Loan balance at the end of the corporation's tax year. Subtract lines 19 from line 18							
21	Debt basis at the beginning of the corporation's tax year	8,357						8,357
22	Enter the amount, if any, from line 17							
23	Debt basis restoration (see instructions)							
24	Debt basis before repayment. Add lines 21, 22, and 23	8,357						8,357
25	Divide line 24 by line 18	1.0000						
26	Nontaxable debt repayment. Multiply line 25 by line 19	8,357						8,357
27	Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24							
28	Nondeductible expenses and oil and gas depletion deductions in excess of stock basis							
29	Debt basis before losses and deductions. Subtract line 28 from line 27. If the result is zero or less, enter -0-							
30	Allowable losses in excess of stock basis. Enter the amount from line 47, column (d)							
31	Debt basis at the end of the corporation's tax year. Subtract line 30 from line 29. If the result is zero or less, enter -0-	0						

Gain on Loan Repayment

32	Repayment. Enter the amount from line 19	8,357						8,357
33	Nontaxable repayments. Enter the amount from line 26	8,357						8,357
34	Reportable gain. Subtract line 33 from line 32							

Form **1040**

Shareholder's Basis Worksheet Page 3

2024

Name TAMMY ALBRIGHT

Id No.

K1 Unit 6

Entity Name CLOSET ENVY ONLINE BOUTIQUE INC EIN 84-3360285 Passive Activity Type NOT PASSIVE

BASIS REDUCED BY NONDEDUCTIBLE ITEMS BEFORE LOSS AND DEDUCTION ITEMS

Loss Allocated to Shareholder Stock and Debt Basis

	Suspended Losses	Current Year Loss	Total Loss	Percent	Allowed Stock Loss	Disallowed Stock Loss	Percent	Allowed Loan Loss	Disallowed Loss Carryforward	Total Allowed Loss
Nondeductible expenses										
Depletion for oil and gas										
Losses and deductions:										
Ordinary business loss										
Net rental real estate loss		174	174	1.0000	174					174
Other net rental loss										
Short-term capital loss										
Long-term capital loss										
28% capital loss										
Section 1231 loss										
4797 - Ordinary loss										
Other portfolio loss										
1256 contracts and straddles										
Other losses - Schedule E										
Other losses - 1040 Sch 1										
Section 179 expense										
Cash contributions										
Cash contributions (30%)										
Noncash contributions (50%)										
Noncash contributions (30%)										
Cap gain prop 50% org (30%)										
Cap gain prop (20%)										
Portfolio deductions (other)										
Investment interest expense										
Deductions-royalty income										
Section 59(e)(2) expenditures										
Preproductive period exp.										
Reforestation expense ded.										
Other deductions										
Foreign taxes										
Total losses and deductions		174	174	1.0000	174					174
Total nonded and deductible items		174	174		174					174

Form **1040****Partner's Basis Worksheet Page 1****2024**

Name **GEORGE J. ALBRIGHT, III** Taxpayer Identification Number **[REDACTED]**
 Name of Entity **RIVER RETREAT PARTNERSHIP** EIN **59-3480433**
 Passive Activity Type **NOT PASSIVE** K1 Unit **2**

Part 1 - Partners Basis

1. Adjusted basis at the beginning of tax year, 1. 76,434

Section A - Increases

2. Acquisitions of partnership interests and contributions of money and property 2. _____
 3. Increase in liabilities 3. _____

4a. Ordinary business income 4a. _____

4b. Net rental real estate income 4b. _____

4c. Other net rental income 4c. _____

4d. Interest income 4d. 778

4e. Ordinary dividends 4e. _____

4f. Dividend equivalents 4f. _____

4g. Royalties 4g. _____

4h. Net short-term capital gain 4h. _____

4i. Net long-term capital gain 4i. 32,564

4j. Net section 1231 gain and ordinary business gains 4j. _____

4k. Other income 4k. _____

4l. Tax-exempt interest, other tax-exempt income, and recapture of credits 4l. _____

4m. Other increases to basis 4m. _____

4n. Business interest expense (BIE) 4n. _____

4o. Total increases (add lines 4a through 4n) 4o. 33,342

5. Gain recognized on contributions of property during the year 5. _____

6. Excess of deductions for depletion over basis of property (other than oil and gas) 6. _____

7. Total basis before decreases (add lines 1,2,3, 4o, 5 and 6) 7. 109,776

Section B - Decreases

8. Withdrawals, distributions of money, and the adjusted basis of distributed property

8a. Cash and marketable securities distributed 8a. 69,024

8b. Distributions subject to section 737 8b. _____

8c. Other property distributed 8c. _____

8d. Total distributions (add lines 8a through 8c) 8d. 69,024

9a. Decrease in share of partnership liabilities 9a. _____

9b. Partner's liabilities assumed by the partnership during the tax year 9b. _____

9c. Decrease in liabilities (sum of lines 9a and 9b) 9c. _____

10. Total distributions and decrease in liabilities (add lines 8d and 9c) 10. 69,024

11. Basis after distributions (subtract lines 10 and 7) 11. 40,752

12. Nondeductible expenses. (See Partner's Basis Worksheet Page 2) 12. 0

13a. Oil and gas property depletion deduction up to adjusted basis of property 13a. _____

13b. Other decreases 13b. _____

13c. Total decreases other than distributions. Combine lines 12 to 13b. 13c. _____

14. Basis after nondeductible expenses and depletion. (line 11 less line 13c) 14. 40,752

15. Total deductions and losses (See Partner's Basis Worksheet Page 2) 15. 2,811

16. Allowable deductions and losses. (See Partner's Basis Worksheet Page 2) 16. 2,811

17. Unutilized EBIIE on sale of partnership interest 17. _____

18. Adjusted basis at the end of the year. (Subtract lines 16 and 17 from line 14. Do not enter less than zero) 18. 37,941

Gain Recognized on Distributions

19. Total distributions less property distributions. Subtract line 8c from line 8d 19. 69,024

20. Total basis before decreases (line 7) 20. 109,776

21. Gain recognized on excess distributions. (Subtract line 20 from line 19) 21. 0

• Sch E page 2, ordinary income

• Sch D/8949, short-term capital gain

• Sch D/8949, long-term capital gain

22. Gain recognized on disposition of section 737 property 22. _____

Form 1040	Partner's Basis Worksheet Page 2	2024
Name GEORGE J. ALBRIGHT, III		Taxpayer Identification Number
Name of Entity RIVER RETREAT PARTNERSHIP		EIN 59-3480433
Passive Activity Type NOT PASSIVE		K1 Unit 2

Description	Suspended Amount	Current Year	Total Loss	Percent	Allowed loss and Deductions	Disallowed Loss Carryforward
12. Nondeductible expenses						
13. Depletion for oil and gas						
15. Partnership losses and deductions						
Ordinary business loss		2,811	2,811	1.0000	2,811	
Net rental real estate loss						
Other net rental loss						
Short-term capital loss						
Long-term capital loss						
28% capital loss						
Section 1231 loss						
4797 - Ordinary loss						
Other portfolio loss						
1256 contracts/straddles						
Other losses - Sch E						
Other losses - 1040 Sch 1						
Section 179 expense						
Cash contributions						
Cash contributions (30%)						
Noncash contrib (50%)						
Noncash contrib (30%)						
Cap gain prop 50% (30%)						
Cap gain prop (20%)						
Portfolio deduct (other)						
Investment interest expense						
Deductions-royalty income						
Section 59(e)(2) expenditures						
Preproductive period exp.						
Reforestation expense ded.						
Foreign taxes						
Other deductions						
Total losses and deductions		2,811	2,811	1.0000	2,811	

Form **1040****Partner's Basis Worksheet Page 1****2024**

Name

GEORGE J. ALBRIGHT, III

Taxpayer Identification Number

Name of Entity **WEIR PARTNERS**EIN **59-3486884**Passive Activity Type **NOT PASSIVE**K1 Unit **3****Part 1 - Partners Basis**1. Adjusted basis at the beginning of tax year, 1. 0**Section A - Increases**

2. Acquisitions of partnership interests and contributions of money and property 2. _____

3. Increase in liabilities **SEE STATEMENT** 3. 561

4a. Ordinary business income 4a. _____

4b. Net rental real estate income 4b. _____

4c. Other net rental income 4c. _____

4d. Interest income 4d. _____

4e. Ordinary dividends 4e. _____

4f. Dividend equivalents 4f. _____

4g. Royalties 4g. _____

4h. Net short-term capital gain 4h. _____

4i. Net long-term capital gain 4i. _____

4j. Net section 1231 gain and ordinary business gains 4j. _____

4k. Other income 4k. _____

4l. Tax-exempt interest, other tax-exempt income, and recapture of credits 4l. _____

4m. Other increases to basis 4m. _____

4n. Business interest expense (BIE) 4n. _____

4o. Total increases (add lines 4a through 4n) 4o. 0

5. Gain recognized on contributions of property during the year 5. _____

6. Excess of deductions for depletion over basis of property (other than oil and gas) 6. _____

7. Total basis before decreases (add lines 1,2,3, 4o, 5 and 6) 7. 561**Section B - Decreases**

8. Withdrawals, distributions of money, and the adjusted basis of distributed property

8a. Cash and marketable securities distributed 8a. _____

8b. Distributions subject to section 737 8b. _____

8c. Other property distributed 8c. _____

8d. Total distributions (add lines 8a through 8c) 8d. _____

9a. Decrease in share of partnership liabilities 9a. _____

9b. Partner's liabilities assumed by the partnership during the tax year 9b. _____

9c. Decrease in liabilities (sum of lines 9a and 9b) 9c. _____

10. Total distributions and decrease in liabilities (add lines 8d and 9c) 10. 011. Basis after distributions (subtract lines 10 and 7) 11. 56112. Nondeductible expenses. (See Partner's Basis Worksheet Page 2) 12. 0

13a. Oil and gas property depletion deduction up to adjusted basis of property 13a. _____

13b. Other decreases 13b. _____

13c. Total decreases other than distributions. Combine lines 12 to 13b. 13c. _____

14. Basis after nondeductible expenses and depletion. (line 11 less line 13c) 14. 56115. Total deductions and losses (See Partner's Basis Worksheet Page 2) 16. 1,34816. Allowable deductions and losses. (See Partner's Basis Worksheet Page 2) 16. 561

17. Unused EBIT on sale of partnership interest 17. _____

18. Adjusted basis at the end of the year. (Subtract lines 16 and 17 from line 14. Do not enter less than zero) 18. 0**Gain Recognized on Distributions**

19. Total distributions less property distributions. Subtract line 8c from line 8d 19. _____

20. Total basis before decreases (line 7) 20. _____

21. Gain recognized on excess distributions. (Subtract line 20 from line 19) 21. _____

• Sch E page 2, ordinary income _____

• Sch D/8949, short-term capital gain _____

• Sch D/8949, long-term capital gain _____

22. Gain recognized on disposition of section 737 property 22. _____

Form 1040	Partner's Basis Worksheet Page 2	2024
Name GEORGE J. ALBRIGHT, III		Taxpayer Identification Number
Name of Entity WEIR PARTNERS		EIN 59-3486884
Passive Activity Type NOT PASSIVE		K1 Unit 3

Description	Suspended Amount	Current Year	Total Loss	Percent	Allowed loss and Deductions	Disallowed Loss Carryforward
12. Nondeductible expenses						
13. Depletion for oil and gas						
15. Ptrship losses and deductions						
Ordinary business loss	1,259	89	1,348	1.0000	561	787
Net rental real estate loss						
Other net rental loss						
Short-term capital loss						
Long-term capital loss						
28% capital loss						
Section 1231 loss						
4797 - Ordinary loss						
Other portfolio loss						
1256 contracts/straddles						
Other losses - Sch E						
Other losses - 1040 Sch 1						
Section 179 expense						
Cash contributions						
Cash contributions (30%)						
Noncash contrib (50%)						
Noncash contrib (30%)						
Cap gain prop 50% (30%)						
Cap gain prop (20%)						
Portfolio deduct (other)						
Investment interest expense						
Deductions-royalty income						
Section 59(e)(2) expenditures						
Preproductive period exp.						
Reforestation expense ded.						
Foreign taxes						
Other deductions						
Total losses and deductions	1,259	89	1,348	1.0000	561	787

Federal Statements**Weir Partners****Partner's Basis Worksheet Page 1 - Increase in Share of Partnership Liabilities**

Description	Amount	Amount
2024 SHARE OF PARTNERSHIP LIABILITIES (SCH K-1 (1065) ITEM L)	\$	\$
1. NONRECOURSE		
2. QUALIFIED NONRECOURSE FINANCING		
3. RECOURSE	561	
4. 2024 TOTAL SHARE OF PARTNERSHIP LIABILITIES. COMBINE LINES 1 THROUGH 3.		561
2023 SHARE OF PARTNERSHIP LIABILITIES (SCH K-1 (1065) ITEM L)		
5. NONRECOURSE		
6. QUALIFIED NONRECOURSE FINANCING		
7. RECOURSE		
8. 2023 TOTAL SHARE OF PARTNERSHIP LIABILITIES. COMBINE LINES 5 THROUGH 7.		
9. SUBTRACT LINE 8 FROM LINE 4		561
10. PARTNERSHIP LIABILITIES ASSUMED DURING THE TAX YEAR		
11. INCREASE IN SHARE OF PARTNERSHIP LIABILITIES. COMBINE LINES 9 AND 10.		561

Year Ending: December 31, 2024

George J. Albright, III & Tammy Albright
209 S.E. 15th Avenue
Ocala, FL 34471

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

Under IRC Regulation 1.263(a)-1(f), the taxpayer hereby elects to apply the de minimis safe harbor election to all qualifying property placed in service during the tax year.

Form **1040****Form 8960 - Net Investment Income Worksheet 1****2024**

Name

Taxpayer Identification Number

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Form 8960, Line 4b, Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business

Activity	Profit or loss on Sch C / Net Rental Income(Loss) on Sch E	Net Royalty Income(Loss) on Sch E	Net K-1 Nonpassive Income(Loss) on Sch E	Net K-1 Passive Income(Loss) on Sch E	Non-section 1411 Adjustment
ANTIQUE CARS	-9,073				9,073
OCALA LANDSCAPE MANAGEMENT, INC.			107,414		-107,414
RIVER RETREAT PARTNERSHIP			-2,811		2,811
WEIR PARTNERS			-561		561
CLOSET ENVY ONLINE BOUTIQUE INC			-174		174
Totals	-9,073		103,868		
Additional adjustment					
Total adjustment. Enter on Form 8960, line 4b					-94,795

Form 8960, Line 5b, Net gain or loss from disposition of property not subject to net investment income tax

Description	Schedule D Short Term Gain(Loss)	Schedule D Long Term Gain(Loss)	Form 4797 Short Term Gain(Loss)	Form 4797 Long Term Gains (Losses)	Non-section 1411 Adjustment
OCALA LANDSCAPE MANAGEMENT, INC.				334	-334
CLOSET ENVY ONLINE BOUTIQUE INC				250	-250
Totals				584	
Adjustment for capital loss carryforward from 2023					
Total capital gain/(loss)			Total ordinary gain/(loss)		584
Additional adjustment					
Total net gain or loss from disposition of property not subject to net investment income tax					-584
Adjustment for capital loss carryover to 2025. Lesser of line 3 or 4 from worksheet below, entered as a negative number					0
Total adjustment. Enter on Form 8960, line 5b					-584

Adjustment for capital loss carryover to 2025

Complete this worksheet if there is a capital loss carryover to next year

- Enter the Total capital gain/(loss) excluded. If a gain, enter as a negative. If a loss, enter as a positive. 1. _____
- Enter the Total adjustment from disposition of partnership interest or S corporation stock
from Net Investment Income Worksheet 3 2. _____
- Combine lines 1 and 2. If zero or less, enter -0- 3. _____
- Enter the amount of capital loss carried over to the following year, as a positive number 4. _____

Schedule **C****Qualified Business Income Calculation Worksheet****2024**

Name

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Taxpayer Identification Number

Principle business or profession

ANTIQUE CARS

Form/Schedule

C

Unit

1

1.	Schedule C, Line 31, Net profit or (loss)	1.	-9,073
Additions for qualified business income:			
2.	Form 4797, Ordinary income	2.	
Prior suspended losses utilized this year			
3.	Passive suspended losses	3.	
4.	At-Risk suspended losses	4.	
5.	Section 179 carryover	5.	
6.	Total additions to net profit or (loss). Add lines 2 through 5.	6.	
Subtractions for qualified business income			
7.	Form 4797, Ordinary loss (includes share of Net section 1231 losses)	7.	
8.	Deductible portion of self-employment taxes	8.	
9.	Self-employed SEP, SIMPLE, and qualified plans	9.	
10.	Self-employed health insurance deduction	10.	
11.	Reserved	11.	
12.	Reserved	12.	
13.	Total subtraction to net profit or (loss). Add lines 7 through 12.	13.	
14.	Qualified business income for this activity. Line 1 plus line 6 less line 13.	14.	-9,073

Carryovers:	Beginning of Year		Allowed loss (C)	End of Year		QBI Portion of Allowed Losses
	Pre -2018 (A)	After 2017 (B)		Pre -2018 (D)	After 2017 (E)	
Passive activity:						
Operating						
Form 4797, Part II						
Section 1231 loss						
At-Risk:						
Operating						
Form 4797, Part II						
Section 1231 loss						
Section 179						
Section 179 - COGS						
Other:						
Section 179						
Section 179 - COGS						

Amount to Form 8995, line 3 or Schedule C (Form 8995-A), line 2 qualified business loss carryforward

Schedule E

K-1 Reconciliation Worksheet - Qualified Business Income

2024

Name GEORGE J. ALBRIGHT, III

Entity Name OCALA LANDSCAPE MANAGEMENT, INC. EIN 59-3564793

Taxpayer Identification Number

Screen K1

K1 Unit 1

Entity Type S CORPORATION

Activity

Passive Activity Type

NOT PASSIVE

Entire disposition of activity

Qualified Business Income	Screen K1QBI Amount	QBI Items from Schedule K-1	Passive Limit Adjustment	At-risk Limit Adjustment	Passive Limitation	Qualified Business Income	Prior Year Suspended QBI Losses Allowed	At-risk
Ordinary business inc/loss	256,878	256,878				256,878		
Net rental real estate inc/loss								
Other net rental income/loss								
Royalties								
Section 1231 gain (loss)	334					0 *		
Section 179 expense	149,464	-149,464				-149,464		
Disallowed Section 179 exp								
Other income (loss)								
Other income/loss Form 1040								
Reserved								
Other deductions								
4787 ordinary income / -loss								
Depletion								
UPE + Debt financed acqisiti								
Deductible part of SE tax								
Self-employed health insurance								
Self-employed qualified plans								
Ordinary gains on distribution								
Total Qualified Business Income	334					107,414		

CG NOT INCLUDED 334

Form 8995 or 8995-A

Qualified business net (loss) carryforward from prior years Form 8995, line 3 or Form 8995-A (Schedule C), line 2

Suspended Loss Carryforwards	Pre -TCJA Passive	Post -TCJA Passive	Pre -TCJA Basis	Post -TCJA Basis	Pre -TCJA At-Risk	Post -TCJA At-Risk	Other carryovers
Ordinary business loss							
Net rental real estate loss							
Other net rental loss							
Section 179 expense							
Depletion							
Section 59(e)(2) expenditure							
Preproductive period exp							
Reforestation expense ded							
Other deductions							
Other losses - Schedule E							
Dependent care expense							
4797 - Ordinary loss							
Other losses - 1040 Sch 1							
Section 1231 loss							

Schedule E

K-1 Reconciliation Worksheet - Qualified Business Income

2024

Name		GEORGE J. ALBRIGHT, III	
Entity Name		RIVER RETREAT PARTNERSHIP	
Activity		PARTNERSHIP	
EIN		59-3480433	
Entity Type		NOT PASSIVE	
Taxpayer Identification Number		Screen K1	
K1 Unit		2	

Qualified Business Income	Screen K1QBI Amount	QBI Items from Schedule K-1	Passive Activity Type		Qualified Business Income	Entire disposition of activity		
			Basis Limit Adjustment	At-risk Limit Adjustment		Passive Limitation	Prior Year Suspended QBI Losses Allowed	At-risk
Ordinary business income/loss	-2,811	-2,811			-2,811			
Net rental real estate income/loss								
Other net rental income/loss								
Royalties								
Section 1231 gain (loss)								
Section 179 expense								
Disallowed Section 179 exp								
Other income (loss)								
Other income/loss Form 1040								
Reserved								
Other deductions								
4797 ordinary income / -loss								
Depletion								
UPE + Debt financed acquisition								
Deductible part of SE tax								
Self-employed health insurance								
Self-employed qualified plans								
Ordinary gains on distribution								
Total Qualified Business Income					-2,811			

Form 8995 or 8995-A

Qualified business net (loss) carryforward from prior years Form 8995, line 3 or Form 8995-A (Schedule C), line 2

Suspended Loss Carryforwards	Pre -TCJA Passive	Post- TCJA Passive	Pre -TCJA Basis	Post - TCJA Basis	Pre -TCJA At-Risk	Post- TCJA At-Risk	Other carryovers
Ordinary business loss							
Net rental real estate loss							
Other net rental loss							
Section 179 expense							
Depletion							
Section 59(e)(2) expenditure							
Preproductive period exp							
Reforestation expense ded							
Other deductions							
Other losses - Schedule E							
Dependent care expense							
4797 - Ordinary loss							
Other losses - 1040 Sch 1							
Section 1231 loss							

Schedule E | K-1 Reconciliation Worksheet - Qualified Business Income

2024

Name	GEORGE J. ALBRIGHT, III	Taxpayer Identification Number	Screen K1	K1 Unit	3
Entity Name	WEIR PARTNERS	EIN	59-3486884	Entity Type	PARTNERSHIP
Activity		Passive Activity Type	NOT PASSIVE	Entire disposition of activity	

Qualified Business Income	Screen K1QBI Amount	QBI Items from Schedule K-1	Basis Limit Adjustment	At-risk Limit Adjustment	Passive Limitation	Qualified Business Income	Prior Year Suspended QBI Losses Allowed	At-risk
Ordinary business incl-loss	-89	-89	89				Passive / 179	Basis
Net rental real estate incl-loss								561
Other net rental income/loss								
Royalties								
Section 1231 gain (loss)								
Section 179 expense								
Disallowed Section 179 exp								
Other income (loss)								
Other income/loss Form 1040								
Reserved								
Other deductions								
4797 ordinary income / -loss								
Depletion								
UPE + Debt financed acquisit								
Deductible part of SE tax								
Self-employed health insurance								
Self-employed qualified plans								
Ordinary gains on distribution								
Total Qualified Business Income								561

Form 8995 or 8995-A

Qualified business net (loss) carryforward from prior years
Form 8995, line 3 or Form 8995-A (Schedule C), line 2

Suspended Loss Carryforwards	Pre -TCJA Passive	Post- TCJA Passive	Pre -TCJA Basis	Post - TCJA Basis	Pre -TCJA At-Risk	Post- TCJA At-Risk	Other carryovers
Ordinary business loss				787			
Net rental real estate loss							
Other net rental loss							
Section 179 expense							
Depletion							
Section 59(e)(2) expenditure							
Preproductive period exp							
Reforestation expense ded							
Other deductions							
Other losses - Schedule E							
Dependent care expense							
4797 - Ordinary loss							
Other losses - 1040 Sch 1							
Section 1231 loss							

K-1 Reconciliation Worksheet - Qualified Business Income

2024

Name	TAMMY ALBRIGHT								
Entity Name	CLOSET ENVY ONLINE BOUTIQUE INC	EIN	84-3360285	Entity Type	S CORPORATION	Taxpayer Identification Number	Screen K-1	K1 Unit	6
Activity	Screen K1QBI Amount	QBI Items from Schedule K-1	Basis Limit Adjustment	At-risk Limit Adjustment	Passive Limitation	Qualified Business Income	Prior Year Suspended QBI Losses Allowed Passive / 179	Basis	At-risk
Qualified Business Income	-174	-174				-174			
Ordinary business incl-loss									
Net rental real estate incl-loss									
Other net rental income/-loss									
Royalties									
Section 1231 gain (loss)									
Section 179 expense									
Disallowed Section 179 exp									
Other income (loss)									
Other income/-loss Form 1040									
Reserved									
Other deductions									
4797 ordinary income / -loss									
Depletion									
UPE + Debt financed acquisition									
Deductible part of SE tax									
Self-employed health insurance									
Self-employed qualified plans									
Ordinary gains on distribution									
Total Qualified Business Income						-174			

Form 8995 or 8995-A

Qualified business net (loss) carryforward from prior years
Form 9995, line 3 or Form 9995-A (Schedule C), line 2

Suspended Loss Carryforwards	Pre -TCJA Passive	Post- TCJA Passive	Pre -TCJA Basis	Post - TCJA Basis	Pre -TCJA At-Risk	Post- TCJA At-Risk	Other carryovers
Ordinary business loss							
Net rental real estate loss							
Other net rental loss							
Section 179 expense							
Depletion							
Section 59(e)(2) expenditure							
Preproductive period exp							
Reforestation expense ded							
Other deductions							
Other losses - Schedule E							
Dependent care expense							
4797 - Ordinary loss							
Other losses - 1040 Sch 1							
Section 1231 loss							

Schedule **E****K-1 Reconciliation Worksheet - Qualified Business Income - Totals****2024**

Name

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Taxpayer identification number

Entity Name OCALA LANDSCAPE MANAGEMENT, INC.

EIN 59-3564793

Entity Type S CORPORATION

	Activity Description	PTP	Aggregated	SSTB
Column A	OCALA LANDSCAPE MANAGEMENT	☐	☐	☐
Column B		☐	☐	☐
Column C		☐	☐	☐
Column D		☐	☐	☐
Column E		☐	☐	☐

QBI or Qualified PTP Items:

	Column A	Column B	Column C	Column D	Column E
Ordinary business income (loss)	256,878				
Net rental real estate income (loss)					
Other net rental income (loss)					
Royalty income (loss)					
Other income (loss) to Schedule E					
Other income (loss) to 1040 Statement 1					
Section 179 expense	-149,464				
Reserved					
Other deductions					
Section 1231 gain (loss)					
4797 ordinary income (loss)					
Depletion					
Basis - limitation adjustments					
At-risk - limitation adjustment					
Passive limitation adjustments					
Unreimbursed partnership expenses					
Debt financed acquisition					
Deductible part of SE tax					
Self-employed health insurance expense					
Self-employed qualified plans deduction					
Ordinary gains on distributions					
Qualified business income	107,414				
Passive - post-TCJA carryover allowed					
Basis - post-TCJA carryover allowed					
At-risk - post-TCJA carryover allowed					

W-2 wages 558,340
 Qualified property 700,064

Other Information:

QBI allocable to cooperative prmts received
 W-2 wages allocable to qualified payments
 Section 199A(g) deduction

Form **1040****Carryover Report****2024**

Name

Taxpayer Identification Number

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Carryover Item	Available to 2024	2024 Amounts	Carryover to 2025
Minimum tax credit			
Investment interest	900	GENERATED 639	1,539
Investment interest - AMT	900	GENERATED 639	1,539
Short-term capital loss			
Short-term capital loss - AMT			
Long-term capital loss			
Long-term capital loss - AMT			
Residential energy efficient property			
D.C. first-time homebuyer credit			
Tax credit bonds			
Qualified business income loss			
Qualified REIT income and PTP loss			
Excess business loss portion of NOL			

Nonrecaptured Section 1231 Losses - Line 8, Form 4797		AMT Nonrecaptured Section 1231 Losses - Line 8, Form 4797	
2019 Amounts		2019 Amounts	
2020 Amounts		2020 Amounts	
2021 Amounts		2021 Amounts	GENERATED 1,360
2022 Amounts		2022 Amounts	
2023 Amounts		2023 Amounts	
Available to 2024		Available to 2024	1,360
2024 Amounts		2024 Amounts	UTILIZED -584
Carryover to 2025		Carryover to 2025	776

Form **1040****Salaries & Wages Report****2024**

Name

Taxpayer Identification Number

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

T/S	Employer	Federal Wages	Federal Withheld	Soc Sec Wages
A	T MARION COUNTY TAX COLLECTOR	186,505	54,449	168,600
B				
C				
D				
E				
F				
G				
H				
I				
J				
K				
L				
M				
	Taxpayer	186,505	54,449	168,600
	Spouse			
	Totals	186,505	54,449	168,600

	Soc Sec Withheld	Medicare Wages	Medicare Withheld	Soc Sec Tips	Allocated Tips	Dep Care Ben	Other, Box 14
A	10,453	186,505	2,704				
B							
C							
D							
E							
F							
G							
H							
I							
J							
K							
L							
M							
Taxpayer	10,453	186,505	2,704				
Spouse							
Totals	10,453	186,505	2,704				

	State	State Wages	State Withheld	Name of Locality	Local Wages	Local Withheld
A						
B						
C						
D						
E						
F						
G						
H						
I						
J						
K						
L						
M						
Taxpayer						
Spouse						
Totals						

Form **1040****Two Year Comparison Report - Page 1****2023 & 2024**

Name

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Taxpayer Identification Number

		2023	2024	Differences
		MFJ	MFJ	
Filing Status				
Dependents		0	0	
1. Salaries and wages	1.	163,603	186,505	22,902
2. Interest income	2.	1,225	955	-270
3. Tax exempt interest income	3.			
4. Dividend income	4.			
5. Qualified dividend income	5.			
6. Taxable state/local refunds	6.			
7. Alimony received	7.			
8. Business income/loss	8.	-13,248	-9,073	4,175
9. Capital gain/loss	9.	107	33,148	33,041
10. Other gains/losses	10.			
11. Taxable IRA distributions	11.			
12. Taxable pensions	12.			
13. Rent and royalty income including farm rental	13.			
14. Partnership/S corp income	14.	140,361	103,868	-36,493
15. Estate or trust income	15.			
16. Farm income/loss	16.			
17. Unemployment compensation	17.			
18. Taxable social security	18.	33,744	38,471	4,727
19. Other income	19.			
20. Total income	20.	325,792	353,874	28,082
21. Moving expenses	21.			
22. Deductible part of self-employment tax	22.			
23. SEP/SIMPLE/Qualified plans deductions	23.			
24. SE health insurance	24.			
25. Penalty on early withdrawal of savings	25.			
26. Alimony paid	26.			
27. IRA deductions	27.			
28. Student loan interest	28.			
29. Other adjustments	29.			
30. Adjusted gross income	30.	325,792	353,874	28,082
31. Medical	31.			
32. Taxes	32.	8,601	7,500	-1,101
33. Interest	33.	1,225	955	-270
34. Contributions	34.	40,049	2,797	-37,252
35. Casualty losses	35.			
36. Miscellaneous expenses	36.			
37. Allowable itemized deductions	37.	49,875	11,252	-38,623
38. Standard deduction	38.	29,200	30,750	1,550
		ITEMIZED	STANDARD	
39. Deduction taken	39.	49,875	30,750	-19,125
40. Taxable income before Qual Bus Inc Ded (QBID)	40.	275,917	323,124	47,207
41. QBID	41.	25,722	18,959	-6,763
42. Taxable income	42.	250,195	304,165	53,970

Form **1040****Two Year Comparison Report - Page 2****2023 & 2024**

Name

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Number

		2023	2024	Differences
43.	Taxable income from 2YR page 1, line 42	250,195	304,165	53,970
44.	Tax on taxable income	46,837	56,101	9,264
45.	Alternative minimum tax			
46.	Excess advance premium tax credit & other advanced repayments			
47.	Child care credit			
48.	Education credits			
T 49.	Retirement savings credit			
a 50.	Child & other dependent tax credit			
x 51.	General business credit			
52.	Other credits			
C 53.	Total credits			
o 54.	Net tax liability	46,837	56,101	9,264
m 55.	Self-employment taxes			
p 56.	Other taxes		1,274	1,274
u 57.	Total tax	46,837	57,375	10,538
t 58.	Income tax withheld	39,252	54,449	15,197
a 59.	Estimated tax payments	30,000	47,400	17,400
t 60.	Earned income credit			
i 61.	Additional Child tax credit			
o 62.	Other refundable tax credits			
n 63.	Other payments			
64.	Total payments	69,252	101,849	32,597
65.	Tax due/-refund	-22,415	-44,474	-22,059
66.	Penalties and interest			
67.	Net tax due/-refund	-22,415	-44,474	-22,059
68.	Refund applied to estimated tax payments	12,400	8,800	-3,600
69.	Refund received	-10,015	-35,674	-25,659
70.	Effective tax rate	19.0 %	19.0 %	

Two Year Comparison - Tax Reconciliation Marginal Tax Rates

	2023 Taxable Income	2023 Marginal Tax Rate	2024 Taxable Income	2024 Marginal Tax Rate
Ordinary income	250,088	24.0 %	271,017	24.0 %
Capital income	107	15.0 %	33,148	15.0 %
Capital - Sec. 1250		%		%
Capital - Sec. 1202		%		%

Form **1040****Two Year Comparison Report - Schedule C****2023 & 2024**

Name

GEORGE J. ALBRIGHT, III

Taxpayer identification number

Principal business or profession

ANTIQUE CARS

Unit

1

Income		2023	2024	Differences
1. Gross receipts or sales	1.	24,620	5,659	-18,961
2. Returns and allowances	2.			
3. Cost of goods sold	3.	28,040	1,728	-26,312
4. Gross profit	4.	-3,420	3,931	7,351
5. Other income	5.			
6. Gross income	6.	-3,420	3,931	7,351

Expenses		2023	2024	Differences
7. Advertising	7.		23	23
8. Car and truck expenses	8.			
9. Commissions and fees	9.			
10. Contract labor	10.			
11. Depletion	11.			
12. Depreciation and section 179 expense deduction	12.			
13. Employee benefit programs	13.			
14. Insurance (other than health)	14.			
15. Interest - mortgage (paid to banks, etc.)	15.			
16. Interest - other	16.			
17. Legal and professional services	17.	350	400	50
18. Office expense	18.			
19. Pension and profit-sharing plans	19.			
20. Rent or lease - vehicles, machinery, and equipment	20.			
21. Rent or lease - other business property	21.		2,384	2,384
22. Repairs and maintenance	22.			
23. Supplies (not included in cost of goods sold)	23.			
24. Taxes and licenses	24.	256	1,193	937
25. Travel	25.			
26. Total meals and entertainment	26.			
26a. Nondeductible meals and entertainment	26a.			
26b. Deductible meals and entertainment	26b.			
27. Utilities	27.			
28. Wages (less employment credits)	28.			
29. Other expenses	29.	9,222	9,004	-218
30. Energy efficient commercial buildings deduction (Form 7205)	30.			
31. Total expenses	31.	9,828	13,004	3,176

Profit/ (loss)		2023	2024	Differences
32. Tentative profit (loss)	32.	-13,248	-9,073	4,175
33. Expenses for business use of home	33.			
34. Net profit or (loss)	34.	-13,248	-9,073	4,175

Cost of Goods Sold		2023	2024	Differences
35. Inventory - Beginning of year	35.	20,461	5,000	-15,461
36. Purchases	36.	5,000	26,400	21,400
37. Labor	37.			
38. Materials	38.			
39. Other costs	39.	7,579	3,228	-4,351
40. Goods available for sale (sum of lines 34-38)	40.	33,040	34,628	1,588
41. Inventory - End of year	41.	5,000	32,900	27,900

Form **1040****Return Carryover Summary****2024**

Name

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Taxpayer Identification Number

Activity/Form	Unit	Description	Carryover to 2025
K-1	3	WEIR PARTNERS	
		BASIS - ORDINARY BUSINESS	787
		ORDINARY BUSINESS AMT	787
4952		DISALLOWED INVESTMENT INTEREST EXPENSES	1,539
4952		DISALLOWED INVESTMENT INTEREST EXPENSES AMT	1,539
4797		NON-RECAPTURED NET SECTION 1231 LOSSES AMT	776
IRA		TRADITIONAL IRA BASIS - TAXPAYER	1,181
1040		OVERPAYMENT APPLIED TO NEXT YEAR'S ESTIMATES	8,800

Form **1040****Reconciliation Worksheet - Taxable Income & Tax****2024**

Name

GEORGE J. ALBRIGHT, III & TAMMY ALBRIGHT

Taxpayer Identification Number

Tax brackets are rates applied to specific levels of taxable income. Various rates apply to different portions of the total taxable income. Type of income, further determines the rate applied. Marginal Tax Rate is the tax paid on the highest level of taxable income. This worksheet details how tax is calculated on ordinary income and capital gain income, the percentage of taxable income, marginal tax rate and the tax method used.

Filing Status **MARRIED FILING JOINTLY**Tax Pct Total Tax (In 27) divided Total Taxable Income (In 19) **18.0 %**Tax Method **SCHEDULE D TAX WORKSHEET**

Tax using ordinary and capital gains rates exceeds tax using only ordinary rates. Taxable income is taxed only using ordinary rates:

Tax using capital gains rates

Tax using Ordinary rates

Tax savings

	Taxable Amount	Marginal Tax Rate	Tax on Taxable Income	Marginal Tax Rate - Income Range	Amount of Income to Next Tax Bracket
Ordinary Income	271,017	24.0 %	51,129	\$201,050 - \$383,900	112,883
Capital Income	33,148	15.0 %	4,972	\$94,300 - \$731,200	698,052
Capital Income - 1250		%			
Capital Income - 1202		%			

*Tax on taxable ordinary income under \$100,000 is determined using IRS Tax Tables that impose the same amount of tax on taxable income within \$50 intervals. Therefore, the column (b) Tax may not be calculated as column (a) times the applicable line tax rate.

Income taxed at ordinary rates

	(a) Taxable Income	(b) Tax*
1. 10% rate ... MAXIMUM TAXABLE INCOME PER THIS BRACKET: \$23,200	1a. 23,200	1b. 2,323
2. 12% rate ... MAXIMUM TAXABLE INCOME PER THIS BRACKET: \$71,100	2a. 71,100	2b. 8,535
3. 22% rate ... MAXIMUM TAXABLE INCOME PER THIS BRACKET: \$106,750	3a. 106,750	3b. 23,479
4. 24% rate ... MAXIMUM TAXABLE INCOME PER THIS BRACKET: \$162,850	4a. 69,967	4b. 16,792
5. 32% rate	5a.	5b.
6. 35% rate	6a.	6b.
7. 37% rate	7a.	7b.
8. Total ordinary taxable income and ordinary tax. Add lines 1 through 7	8a. 271,017	8b. 51,129

Income taxed at capital gains rates

9. 0% capital gains rate	9a.	9b.
10. 15% capital gains rate ... MAXIMUM TAXABLE INCOME PER THIS BRACKET: \$469,700	10a. 33,148	10b. 4,972
11. 20% capital gains rate	11a.	11b.
12. 25% capital gains rate ... Unrecaptured Section 1250 Gain	12a.	12b.
13. 28% capital gains rate ... Small business stock, collectibles	13a.	13b.
14. Total taxable capital gains and capital gains tax. Add lines 9 through 13	14a. 33,148	14b. 4,972

Total taxable income

15. Total ordinary taxable income. Enter the amount from line 8a.	15. 271,017
16. Total capital gains taxable income. Enter the amount from line 14a.	16. 33,148
17. Add lines 15 and 16.	17. 304,165
18. Enter the net foreign exclusion amount from the Foreign Earned Income Tax Worksheet, line 2c.	18.
19. Taxable income reported on 1040/1040SR, line 15, (1040NR, line 15). Subtract line 18 from line 17.	19. 304,165

Total tax

20. Total ordinary tax. Enter the amount from line 8b.	20. 51,129
21. Total capital gains tax. Enter the amount from line 14b.	21. 4,972
22. Tax on child's interest and dividend.	22.
23. Tax on lump-sum distribution.	23.
24. Other taxes.	24.
25. Add lines 20 through 24.	25. 56,101
26. Enter the tax allocated to the net exclusion amount from the Foreign Earned Income Tax Worksheet, line 5.	26.
27. Total tax reported on 1040/1040SR, line 16, (1040NR, line 16). Subtract line 26 from line 25.	27. 56,101