

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/18/2023

General Information

Name: Mr Vincent M Crawford

CONFIDENTIAL

Address: 900 E Summit St, Wauchula, FL 33873

PID 287363

County: Hardee

AGENCY INFORMATION

Organization	Suborganization	Title
Hardee County	Elected Constitutional Officer	Sheriff

Net Worth

My Net Worth as of December 31, 2022 was \$ 1,103,073.00.

Assets

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

The aggregate value of my household goods and personal effect is \$ 150,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
13.9 acres of pine forest land in Georgia	\$ 112,000.00
18 acres of citrus land in Florida	\$ 252,000.00
2012 Ram Pickup	\$ 20,000.00
2019 Chevrolet Tahoe	\$ 40,000.00
2019 John Deere Side X Side	\$ 15,000.00
2013 John Deere Tractor 3000 series	\$ 15,000.00
2022 Keystone Avalanche RV	\$ 70,000.00
Residence in Florida with 3 out buildings	\$ 310,000.00
2006 John Deere Tractor 6000 series x 50%	\$ 15,000.00
2013 Titian Cargo Trailer x 50%	\$ 2,000.00
2010 Gooseneck Flatbed Trailer X 50%	\$ 1,250.00
2018 Massimo Side x Side x 50%	\$ 2,600.00
Misc. implements of husbandry for citrus farming x 50%	\$ 30,000.00
Suncoast Schools Credit Union, KMV interests x 50%	\$ 2,000.00
Suncoast Schools Credit Union, Vfour intersts x 50%	\$ 7,750.00
Suncoast Schools Credit Union, Personal accounts	\$ 115,841.00
First Union Credit Union, Personal accounts	\$ 12,142.00
Equitable Retirement Fund	\$ 46,975.00
Capital Retirement Fund	\$ 30,481.00
Tandem Diabetes Stock Fund	\$ 4,595.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
AgSouth Farm Credit	1298 Enterprise Way, Griffin, GA	\$ 62,017.00
Suncoast Credit Union	1451 US Highway 17 N., Wauchula, FL	\$ 59,290.00
GM Financial	P.O. Box 183834, Arlington, TX	\$ 21,154.00
Chase	P. O. Box 182613, Columbus, OH	\$ 9,100.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income.

☒ I elect to file a copy of my 2022 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):

Business Entity	Major Sources of Business Income	Address	Principal Business Activity of Source

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

N/A

Training

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

Signature of Reporting Official or Candidate

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

Vincent M Crawford

Digitally signed: 06/18/2023

Filed with COE: 06/18/2023

**Carlson Accounting
129 S Commerce Ave
Sebring, FL 33870
863-382-4141**

April 17, 2023

CONFIDENTIAL

VINCENT & [REDACTED] M CRAWFORD
[REDACTED]
[REDACTED]

Dear VINCENT & [REDACTED]

We have prepared the following returns from information provided by you without verification or audit:

U.S. Individual Income Tax Return (Form 1040)

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,

Carlson Accounting

**Carlson Accounting
129 S Commerce Ave
Sebring, FL 33870
863-382-4141**

April 17, 2023

CONFIDENTIAL

VINCENT & [REDACTED] CRAWFORD
[REDACTED]
[REDACTED]

For professional services rendered in connection with the preparation of your 2022 individual tax return:

Form 1040 (Individual Income Tax Return)
Schedule E Page 2 (Supplemental Income & Loss)

Amount due	\$ <u>400.00</u>
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Filing Instructions
Electronically Filed
Form 1040 US Individual Income Tax Return
With
Form 1040-V Payment Voucher
Form 8879 IRS e-file Signature Authorization
Taxable Year Ended December 31, 2022

Name: VINCENT & [REDACTED] CRAWFORD

Date Due: April 18, 2023

Remittance: A check in the amount of \$11,805 should be made payable to the United States Treasury and included with the voucher. Write [REDACTED], 2022 Form 1040" and your daytime phone number on the check.

VMC

Do not attach your payment to Form 1040-V. Instead place them loose in the envelope.

Mail To: Internal Revenue Service
P.O. Box 1214
Charlotte, NC 28201-1214

Include Form 1040-V with your check.

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:

Carlson Accounting
129 S Commerce Ave
Sebring, FL 33870

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.

1040

Federal Return Summary

2022

Name

Taxpayer Identification Number

VINCENT & CRAWFORD

Tax Form 1040

Filing Status MFJ

Tax Method Used Tax Computation Wrk

Dependents

Income

Salaries & wages	183,407
Taxable interest income	87
Tax exempt interest	
Dividend income	
Qualified dividends	
Taxable state/local refunds	
Alimony received	
Business income/-loss	
Capital gain/-loss	
Other gain/-loss (Form 4797)	
Taxable IRA distributions	
Taxable pension distributions	72,752
Rental, royalty, partnership, etc. income/-loss	6,413
Farm income/-loss	
Unemployment compensation	
Taxable social security benefits	
Other income	2,570
Total income	265,229

Adjustments

Moving expenses	
Deductible part of self-employment tax	571
SEP, SIMPLE, and qualified plan deduction	
Self-employed health insurance deduction	
Alimony paid	
IRA deduction	
Student loan interest deduction	
Other adjustments	
Total adjustments	571
Adjusted gross income	264,658

Deductions

Medical and Dental expenses	
Taxes paid	
Interest paid	
Charitable contributions	
Other itemized deductions	
Total itemized deductions	
or, Standard deduction	25,900
Taxable income before Qual Bus Inc Ded (QBID)	238,758
QBID	1,187
Taxable income	237,571

Tax Computation

Regular tax	44,688
Alternative minimum tax	
Excess advance premium tax credit	
Total tax before credits	44,688
Child and dependent care credit	
Education credits	
Other credits	
Total credits	
Tax after credits	44,688
Self-employment tax	1,142
Additional tax on IRAs, etc.	
Other taxes	3
Total tax	45,833

Payments

Federal income tax withheld	34,308
Estimated payments	
Other payments/credits	
Total payments	34,308

Refund/Amount Due

Amount overpaid	
Overpayment applied	
Form 2210 penalty	280
Amount due/-refund	11,805
Failure to file penalty	
Failure to pay penalty	
Late filing interest	
Net amount due/-refund	11,805

2023 Estimates

1st quarter	4,100
2nd quarter	4,100
3rd quarter	4,100
4th quarter	4,100
Total Estimates	16,400

Tax Rates

Marginal tax rate - Ordinary income*	24.0 %
Marginal tax rate - Capital income*	%
Effective tax rate	19.0 %

* Marginal Tax Rate displayed may not reflect the true tax rate for Schedule J or Form 8615.

Form **1040****Estimated Tax Payments Worksheet****2023**

Name

VINCENT & CRAWFORD

Taxpayer Identification Number

Summary of Estimated Tax Payments

Voucher	(a) Due Date	(b) Total Estimate Amount	(c) 2022 Overpayment Applied	(d) Estimate Amt Paid	(e) Balance due Column b - Columns c & d	(f) Date paid	(g) Amount paid
1	04/18/23	4,100			4,100		
2	06/15/23	4,100			4,100		
3	09/15/23	4,100			4,100		
4	01/16/24	4,100			4,100		
Total		16,400			16,400		

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 adjustment **Safe harbor adjustment** 9. 4,583
10. Enter Total Tax from Form 1040, 1040-SR, or 1040-NR, line 24. 10. 45,833
11. **Add lines 9 and 10.** Total adjusted tax before adjustments. 11. 50,416
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.** 2022 Estimated Tax. 13. 50,416
14. Enter 2022 Federal income tax withheld (Form 1040NR filers include amounts paid with Form 1040-C.) 14. 34,308
15. Enter adjustment(s) to withholding. 15. _____
16. **Estimated 2022 Tax, including adjustments.**
 - a. Based upon adjusted 2022 Tax (line 13 - lines 14 and 15). 16a. 16,108
 - b. Based upon projected 2023 tax. 16b. _____
- Enter amount from 16a or 16b.** 16. 16,108
17. Enter 2022 overpayment applied to 2023 estimates from Form 1040, 1040-SR, or 1040-NR, line 36. 17. _____
18. Enter amounts already paid towards 2023 estimates. 18. _____
19. **Subtract lines 17 and 18 from line 16.** 19. 16,108
20. Enter Rounding adjustment. 20. 292
21. **Add lines 19 and 20.** Balance of Estimated Tax for 2023. 21. 16,400

Form 1040-ES (OCR)

Department of the Treasury
Internal Revenue Service

2023

OMB No. 1545-0074

Estimated Tax

Payment
Voucher

1

Calendar year -
Due April 18, 2023

Make your check or money order payable to **"United States Treasury."**
Write your social security number and "2023 Form 1040-ES" on your payment.
Send your payment and this voucher to the P.O. box address below.
Cross out any incorrect information and print the correct information. Get **Form 8822** to report a new address (see instructions). For Privacy Act and Paperwork Reduction Act Notice, see instructions.

**Amount of estimated tax you are
paying by check or money order.**

Dollars

4,100

18

Internal Revenue Service
P.O. Box 1300
Charlotte, NC 28201-1300

DAA

CUT HERE

Form 1040-ES (OCR)

Department of the Treasury
Internal Revenue Service

2023

OMB No. 1545-0074

Estimated Tax

Payment
Voucher

2

Calendar year -
Due June 15, 2023

Make your check or money order payable to **"United States Treasury."**
Write your social security number and "2023 Form 1040-ES" on your payment.
Send your payment and this voucher to the P.O. box address below.
Cross out any incorrect information and print the correct information. Get **Form 8822** to report a new address (see instructions). For Privacy Act and Paperwork Reduction Act Notice, see instructions.

**Amount of estimated tax you are
paying by check or money order.**

Dollars

4,100

18

Internal Revenue Service
P.O. Box 1300
Charlotte, NC 28201-1300

DAA

CUT HERE

Form 1040-ES (OCR)

Department of the Treasury
Internal Revenue Service

2023

OMB No. 1545-0074

Estimated Tax

Payment
Voucher

3

Calendar year -
Due Sept. 15, 2023

Make your check or money order payable to **"United States Treasury."**
Write your social security number and "2023 Form 1040-ES" on your payment.
Send your payment and this voucher to the P.O. box address below.
Cross out any incorrect information and print the correct information. Get **Form 8822** to report a new address (see instructions). For Privacy Act and Paperwork Reduction Act Notice, see instructions.

**Amount of estimated tax you are
paying by check or money order.**

Dollars

4,100

18

Internal Revenue Service
P.O. Box 1300
Charlotte, NC 28201-1300

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Form 1040-ES (OCR) Estimated Tax for Individuals

(on bottom of page)

CUT HERE

Form 1040-ES (OCR)

Department of the Treasury
Internal Revenue Service

2023

OMB No. 1545-0074

Estimated Tax

Payment
Voucher **4**

Calendar year -
Due Jan. 16, 2024

Make your check or money order payable to **"United States Treasury."**
Write your social security number and "2023 Form 1040-ES" on your payment.
Send your payment and this voucher to the P.O. box address below.
Cross out any incorrect information and print the correct information. Get **Form 8822** to report a new address (see instructions). For Privacy Act and Paperwork Reduction Act Notice, see instructions.

**Amount of estimated tax you are
paying by check or money order.**

Dollars

4,100

18

**Internal Revenue Service
P.O. Box 1300
Charlotte, NC 28201-1300**

V CRAWFORD

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

VINCENT**CRAWFORD**

Social security number

Spouse's social security number

Part I Tax Return Information — Tax Year Ending December 31, 2022 (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	264,658
2	Total tax	2	45,833
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	34,308
4	Amount you want refunded to you	4	
5	Amount you owe	5	11,805

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 **Carlson Accounting** 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 ►

*Vincent M. Crawford*Date ► **04/14/23****Spouse's PIN: check one box only**

☒ I authorize **Carlson Accounting** to enter or generate my PIN  as my signature on the income tax return (original or amended) I am now authorizing.

ERO firm name

Enter five digits, but
don't enter all zeros

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►

Date ► **04/14/23****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 authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ►

Date ►

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)

Taxpayer Name **VINCENT CRAWFORD**
Spouse Name [REDACTED]

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.

[REDACTED]

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) 04/14/23

PIN (enter five numbers, other than all zeroes)

Prior Year Adjusted Gross Income

Date of Birth

Prior Year PIN

Taxpayer
33870

241,860

Spouse
33870

241,860

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

2022 Form 1040-V

Department of the Treasury
Internal Revenue Service

What Is Form 1040-V

It's a statement you send with your check or money order for any balance due on the "Amount you owe" line of your 2022 Form 1040, 1040-SR, or Form 1040-NR.

Consider Making Your Tax Payment Electronically — It's Easy

You can make electronic payments online, by phone, or from a mobile device. Paying electronically is safe and secure. When you schedule your payment you will receive immediate confirmation from the IRS. Go to www.irs.gov/Payments to see all your electronic payment options.

How To Fill In Form 1040-V

Line 1. Enter your social security number (SSN).

If you are filing a joint return, enter the SSN shown first on your return.

Line 2. If you are filing a joint return, enter the SSN shown second on your return.

Line 3. Enter the amount you are paying by check or money order. If paying online at www.irs.gov/Payments don't complete this form.

Line 4. Enter your name(s) and address exactly as shown on your return. Please print clearly.

How To Prepare Your Payment

- Make your check or money order payable to **"United States Treasury."** Don't send cash. If you want to pay in cash, in person, see *Pay by cash*, later.
- Make sure your name and address appear on your check or money order.
- Enter your daytime phone number and your SSN on your check or money order. If you have an Individual Taxpayer Identification Number (ITIN), enter it wherever your SSN is requested. If you are filing a joint return, enter the SSN shown first on your return. Also enter "2022 Form 1040," "2022 Form 1040-SR," or "2022 Form 1040-NR," whichever is appropriate.
- To help us process your payment, enter the amount on the right side of your check like this: \$ XXX.XX. Don't use dashes or lines (for example, don't enter "\$ XXX—" or "\$XXX ^{xx}/100").

Mail To: Internal Revenue Service

P.O. Box 1214
Charlotte, NC 28201-1214

Notice to taxpayers presenting checks. When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic funds transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

No checks of \$100 million or more accepted. The IRS can't accept a single check (including a cashier's check) for amounts of \$100,000,000 (\$100 million) or more. If you are sending \$100 million or more by check, you will need to spread the payments over two or more checks, with each check made out for an amount less than \$100 million.

Pay by cash. This is an in-person payment option for individuals provided through retail partners with a maximum of \$1,000 per day per transaction. To make a cash payment, you must first be registered online at www.officialpayments.com/fed, our Official Payment provider.

How To Send In Your 2022 Tax Return, Payment, and Form 1040-V

- Don't staple or otherwise attach your payment or Form 1040-V to your return or to each other. Instead, just put them loose in the envelope.
- Mail your 2022 tax return, payment, and Form 1040-V to the address shown on the back that applies to you.

How To Pay Electronically Pay Online

Paying online is convenient, secure, and helps make sure we get your payments on time. You can pay using either of the following electronic payment methods. To pay your taxes online or for more information, go to www.irs.gov/Payments.

IRS Direct Pay

Pay your taxes directly from your checking or savings account at no cost to you. You receive instant confirmation that your payment has been made, and you can schedule your payment up to 30 days in advance.

Debit or Credit Card

The IRS doesn't charge a fee for this service; the card processors do. The authorized card processors and their phone numbers are all on www.irs.gov/Payments.

Form **1040-V** (2022)

Detach Here and Mail With Your Payment and Return

CUT HERE

Form **1040-V**

Department of the Treasury
Internal Revenue Service

Payment Voucher

Do not staple or attach this voucher to your payment or return.

Go to www.irs.gov/Payments for payment options and information.

OMB No. 1545-0074

2022

Print or type	1 Your social security number (SSN) (if a joint return, SSN shown first on your return)	2 If a joint return, SSN shown second on your return	3 Amount you are paying by check or money order. Make your check or money order payable to United States Treasury		11,805
	4 Your first name and middle initial VINCENT		Last name CRAWFORD		
	If a joint return, spouse's first name and middle initial		Last name		
	Home address (number and street)		Apt. no.	City, town, or post office. If you have a foreign address, also complete spaces below.	State ZIP code
	Foreign country name		Foreign province/state/county		Foreign postal code

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

DAA

Filing Status ☐ Single ☒ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying surviving spouse (QSS)
Check only one box.
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Your first name and middle initial VINCENT		Last name CRAWFORD		Your social security number [REDACTED]	
If joint return, spouse's first name and middle initial [REDACTED]		Last name [REDACTED]		Spouse's social security number [REDACTED]	
Home address (number and street). If you have a P.O. box, see instructions. [REDACTED]				Apt. no. [REDACTED]	
City, town or post office. If you have a foreign address, also complete spaces below. [REDACTED]				State [REDACTED]	
Foreign country name [REDACTED]				Foreign postal code [REDACTED]	

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

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: ☐ Were born before January 2, 1958 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1958 ☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions):	
If more than four dependents, see instr. and check here ☐	(1) First name Last name			Child tax credit	Credit for other dependents

Income 1a Total amount from Form(s) W-2, box 1 (see instructions) 1a 183,407	b Household employee wages not reported on Form(s) W-2 1b	
	c Tip income not reported on line 1a (see instructions) 1c	
	d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1d	
	e Taxable dependent care benefits from Form 2441, line 26 1e	
	f Employer-provided adoption benefits from Form 8839, line 29 1f	
	g Wages from Form 8919, line 6 1g	
	h Other earned income (see instructions) 1h	
	i Nontaxable combat pay election (see instructions) 1i	
	z Add lines 1a through 1h 1z 183,407	
	Attach Sch. B2a Tax-exempt interest 2a 2b Taxable interest 2b 87	3a Qualified dividends 3a
4a IRA distributions 4a		
5a Pensions and annuities 5a		
6a Soc. sec. ben. 6a		
b Taxable interest 2b 87		
b Ordinary dividends 3b		
b Taxable amount 4b		
b Taxable amount 5b 72,752		
b Taxable amount 6b		
c If you elect to use the lump-sum election method, check here (see instructions) ☐		
7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐	7	
8 Other income from Schedule 1, line 10 8 8,983		
9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income 9 265,229		
10 Adjustments to income from Schedule 1, line 26 10 571		
11 Subtract line 10 from line 9. This is your adjusted gross income 11 264,658		
12 Standard deduction or itemized deductions (from Schedule A) 12 25,900		
13 Qualified business income deduction from Form 8995 or Form 8995-A 13 1,187		
14 Add lines 12 and 13 14 27,087		
15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income 15 237,571		

Tax and Credits

16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972	16	44,688
3		17	
17	Amount from Schedule 2, line 3	18	44,688
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	44,688
22	Subtract line 21 from line 18. If zero or less, enter -0-	23	1,145
23	Other taxes, including self-employment tax, from Schedule 2, line 21	24	45,833
24	Add lines 22 and 23. This is your total tax		

Payments

25	Federal income tax withheld from:			25d	34,308
a	Form(s) W-2	25a	28,064		
b	Form(s) 1099	25b	6,244		
c	Other forms (see instructions)	25c			
d	Add lines 25a through 25c				
26	2022 estimated tax payments and amount applied from 2021 return			26	
27	Earned income credit (EIC)	27			
28	Additional child tax credit from Schedule 8812	28			
29	American opportunity credit from Form 8863, line 8	29			
30	Reserved for future use	30			
31	Amount from Schedule 3, line 15	31			
32	Add lines 27, 28, 29 and 31. These are your total other payments and refundable credits			32	
33	Add lines 25d, 26, and 32. These are your total payments			33	34,308

If you have a qualifying child, attach Sch. EIC.

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here ☐	35a	
b	Routing number	c	Type: ☐ Checking ☐ Savings
d	Account number		
36	Amount of line 34 you want applied to your 2023 estimated tax	36	

Direct deposit?
See instructions.**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	11,805
38	Estimated tax penalty (see instructions)	38	280

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 **JEFF CARLSON** Phone no. **863-382-4141** Personal identification number (PIN) [REDACTED]

Sign Here

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

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see instr.)
[Signature]		SHERIFF	
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.)

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

Phone no.	Email address	Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed
		JEFF CARLSON		04/17/23	P00639104	

Paid Preparer Use Only

Firm's name	129 S Commerce Ave	Phone no.	863-382-4141
Firm's address	Sebring FL 33870	Firm's EIN	59-2891574

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

Form 1040 (2022)

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

2022

Attachment
Sequence No. **01**

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

Your social security number

VINCENT & CRAWFORD

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions):		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	6,413
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 ABLE 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	
z	Other income. List type and amount: See Statement 1	8z	2,570
9	Total other income. Add lines 8a through 8z	9	2,570
10	Combine lines 1 through 7 and 9. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8	10	8,983

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

Schedule 1 (Form 1040) 2022

Part II Adjustments to Income

11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	571
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
c	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
a	Jury duty pay (see instructions)	24a	
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b	
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c	
d	Reforestation amortization and expenses	24d	
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e	
f	Contributions to section 501(c)(18)(D) pension plans	24f	
g	Contributions by certain chaplains to section 403(b) plans	24g	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h	
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i	
j	Housing deduction from Form 2555	24j	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k	
z	Other adjustments. List type and amount:	24z	
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line 10a	26	571

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

2022

Attachment
Sequence No. **02**

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

Your social security number

VINCENT CRAWFORD

Part I Tax

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

Part II Other Taxes

4 Self-employment tax. Attach Schedule SE	4	1,142
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	3
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) 2022

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 Reserved for future use _____		19	
20 Section 965 net tax liability installment from Form 965-A _____	20		
21 Add lines 4, 7 through 16, and 18. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b _____		21	1,145

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

Your social security number

VINCENT CRAWFORD**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	KMV GROVES	P				
B	V-4 LLC	P				
C	KMV GROVES	P				
D						

Passive Income and Loss			Nonpassive Income and Loss		
(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss allowed (see Schedule K-1)	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1	
A		329			
B		0			7,073
C		331			
D					
29a Totals					7,073
b Totals		660			
30 Add columns (h) and (k) of line 29a			30		7,073
31 Add columns (g), (i), and (j) of line 29b			31		660
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31			32		6,413

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	6,413
42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AD; and Schedule K-1 (Form 1041), box 14, code F. See instructions	42	31,090
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	

SCHEDULE SE
(Form 1040)

Department of the Treasury
Internal Revenue Service

Self-Employment Tax

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

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

OMB No. 1545-0074

2022

Attachment
Sequence No. **17**

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

Social security number of person
with self-employment income

VINCENT CRAWFORD

Part I Self-Employment Tax

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

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

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

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

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

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

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

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

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

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

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

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

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

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

- 6** Add lines 4c and 5b

- 7** Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2022

- 8a** Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$147,000 or more, skip lines 8b through 10, and go to line 11

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

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

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

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

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

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

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

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

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

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

Farm Optional Method. You may use this method **only** if (a) your gross farm income¹ wasn't more than \$9,060, or (b) your net farm profits² were less than \$6,540.

- 14** Maximum income for optional methods

- 15** Enter the **smaller** of: two-thirds (²/₃) of gross farm income¹ (not less than zero) or \$6,040. Also include this amount on line 4b above

Nonfarm Optional Method. You may use this method **only** if (a) your net nonfarm profits³ were less than \$6,540 and also less than 72.189% of your gross nonfarm income, **and** (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. **Caution:** You may use this method no more than five times.

- 16** Subtract line 15 from line 14

- 17** Enter the **smaller** of: two-thirds (²/₃) of gross nonfarm income⁴ (not less than zero) or the amount on line 16. Also, include this amount on line 4b above

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

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

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

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

**Qualified Business Income Deduction
Simplified Computation**

Attach to your tax return.

Go to www.irs.gov/Form8995 for instructions and the latest information.**2022**Attachment
Sequence No. **55**

Name(s) shown on return

VINCENT CRAWFORD

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 \$170,050 (\$340,100 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	CITRUS		-329
ii	FARMING		6,593
iii	CITRUS		-331
iv			
v			

2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	5,933	
3	Qualified business net (loss) carryforward from the prior year	()	
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	5,933	
5	Qualified business income component. Multiply line 4 by 20% (0.20)		1,187
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		1,187
11	Taxable income before qualified business income deduction (see instructions)	238,758	
12	Net capital gain (see instructions)		
13	Subtract line 12 from line 11. If zero or less, enter -0-	238,758	
14	Income limitation. Multiply line 13 by 20% (0.20)		47,752
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)		1,187
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** (2022)

Net Investment Income Tax—
Individuals, Estates, and Trusts

OMB No. 1545-2227

2022

Attachment
Sequence No. 72Department of the Treasury
Internal Revenue Service

Attach to your tax return.

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

Name(s) shown on your tax return

Your social security number or EIN

VINCENT CRAWFORD

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	87
2	Ordinary dividends (see instructions)	2	
3	Annuities (see instructions)	3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a	6,413
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b	-6,413
c	Combine lines 4a and 4b	4c	
5a	Net gain or loss from disposition of property (see instructions)	5a	
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b	
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c	
d	Combine lines 5a through 5c	5d	
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)	6	
7	Other modifications to investment income (see instructions)	7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7	8	87

Part II Investment Expenses Allocable to Investment Income and Modifications

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

Part III Tax Computation

12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. Estates and trusts, complete lines 18a-21. If zero or less, enter -0-	12	87
Individuals:			
13	Modified adjusted gross income (see instructions)	13	264,658
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	14,658
16	Enter the smaller of line 12 or line 15	16	87
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	3
Estates and Trusts:			
18a	Net investment income (line 12 above)	18a	
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b	
c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c	
19a	Adjusted gross income (see instructions)	19a	
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b	
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c	
20	Enter the smaller of line 18c or line 19c	20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and include on your tax return (see instructions)	21	

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

Form 8960 (2022)

Federal Statements**Statement 1 - Schedule 1 (1040), Line 8z - Other Income**

<u>Description</u>	<u>Amount</u>
1099PATR AGSOUTH FARM	\$ 1,231
STATE OF FLORIDA	1,339
Total	<u>\$ 2,570</u>

Form 1040	Partner's Basis Worksheet Page 1	2022
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Name VINCENT CRAWFORD	Taxpayer Identification Number [REDACTED]
Name of Entity V-4 LLC	EIN [REDACTED]
Passive Activity Type Not Passive	K1 Unit 2

1. Beginning of year basis. Per IRC 705(a)(2) do not enter an amount below zero	1.	0
Increases to basis:		
2. Capital contributions: Cash	2.	
3. Capital contributions: Property (adjusted basis)	3.	2,537
4. Increase in share of partnership liabilities	4.	
5. Ordinary business income	5.	7,073
6. Net rental real estate income	6.	
7. Other net rental income	7.	
8. Interest	8.	
9. Dividends	9.	
10. Royalties	10.	
11. Net short-term capital gain	11.	
12. Net long-term capital gain	12.	
13. Net 28% rate capital gain	13.	
14. Net section 1231 gain and ordinary business gains	14.	
15. Tax-exempt interest, other tax-exempt income, and recapture of credits	15.	
16. Other income	16.	
17. Excess of deductions for depletion over basis of property (other than oil and gas)	17.	
18. Other increases	18.	
19. Total increases to basis. Combined lines 2 through 18	19.	9,610
20. Adjusted basis before items decreasing basis. Add line 1 and line 19	20.	9,610
Decreases to basis:		
21. Distributions: Cash and marketable securities (Sch K-1 (1065), Box 19 A)	21.	
22. Distributions: Property (adjusted basis) (Sch K-1 (1065), Box 19 C)	22.	
23. Decrease in share of partnership liabilities	23.	
24. Total distributions. Combine lines 21 through 23	24.	0
25. Nondeductible and non-capital expenses.	25.	0
26. Oil and gas property depletion deduction up to adjusted basis of property	26.	
27. Other decreases	27.	
28. Total decreases to basis except items of loss and deductions. Combine lines 24 through 27	28.	
29. Adjusted basis before items of loss or deductions (Subtract line 28 from line 20. Do not enter less than zero)	29.	9,610
30. Partnership losses and deductions applied against basis. (See Partner's Basis Worksheet Page 2)	30.	
31. Basis at the end of the year. (Subtract line 30 from line 29. Do not enter less than zero)	31.	9,610

Gain Recognized on Distributions

32. Total distributions less property distributions. Subtract line 22 from line 24	32.	
33. Adjusted basis before items decreasing basis (line 20) less gain from entire disposition of partnership on line 27.	33.	
34. Gain recognized on excess distributions. (Subtract line 33 from line 32)	34.	
• Sch E page 2, ordinary income		
• Sch D/8949, short-term capital gain		
• Sch D/8949, long-term capital gain		
35. Gain recognized on appreciated property	35.	
36. Total gain recognized on distributions	36.	0

Federal Statements**HARDEE COUNTY SHERIFF'S OFFICE****Form W-2, Box 12**

Description	Amount
Section 457(b) contributions	\$ 26,000
Cost of employer-sponsored health coverage	8,167
Total	\$ 34,167

Federal Statements

SOUTH FLORIDA STATE COLLEGE

Form W-2, Box 12

Description	Amount
Cost of group term life insurance coverage over 50,000	\$ 189
Section 403(b) contributions	9,500
Cost of employer-sponsored health coverage	11,062
Total	\$ 20,751

SOUTH FLORIDA STATE COLLEGE

Form W-2, Box 14 - Other

Description	Amount
IRC Section 125 flexible benefits program	\$ 5,005
Total	\$ 5,005

Name
VINCENT CRAWFORDTaxpayer identification number
[REDACTED]

	Passthrough Entity Name	FIN	Entity Type	Passive Activity Type	Activity Disposed
A	KMV GROVES	[REDACTED]	Partnership	Not Passive	
B	V-4 LLC	[REDACTED]	Partnership	Not Passive	
C	KMV GROVES	[REDACTED]	Partnership	Not Passive	
D					

Form / Schedule / Worksheet	A	B	C	D	
Schedule SE:					
Taxpayer/Spouse/Joint	T	T	S		Totals:
Net earnings from self-employment	<u>-329</u>	<u>7,073</u>	<u>-331</u>		<u>6,413</u> Schedule SE, Line 2
Gross Farming or Fishing income	<u>2,760</u>	<u>25,569</u>	<u>2,761</u>		<u>31,090</u> Schedule E, line 42
Gross nonfarm income					Schedule SE, Part II
Farm partnerships:					
Net earnings from self-employment					Net Earning SE Wrk
Auto expense					Net Earning SE Wrk
Amortization					Net Earning SE Wrk
Depreciation & Section 179					Net Earning SE Wrk
Depletion					Net Earning SE Wrk
Other expenses					Net Earning SE Wrk
Home office expense					Net Earning SE Wrk
Unreimbursed partnership expenses					Net Earning SE Wrk
Debt financed acquisition interest					Net Earning SE Wrk
Conservation Reserve Program pymts					Net Earning SE Wrk
Nonfarm partnerships:					
Net earnings from self-employment	<u>-329</u>	<u>7,073</u>	<u>-331</u>		<u>6,413</u> Net Earning SE Wrk
Auto expense					Net Earning SE Wrk
Amortization					Net Earning SE Wrk
Depreciation & Section 179					Net Earning SE Wrk
Depletion					Net Earning SE Wrk
Other expenses					Net Earning SE Wrk
Home office expense					Net Earning SE Wrk
Unreimbursed partnership expenses					Net Earning SE Wrk
Debt financed acquisition interest					Net Earning SE Wrk
Unreimbursed partner expenses:					
Entered on Screen K1-6					
Auto expense					
Depr, Amortization & Sect 179 exp					
Home office expense					
Supplemental business expense					
Total unreimbursed partner expenses					Schedule E, line 28(h)

Taxpayer Identification Number

T/S

Payer

Box 7

Code Gross Distribution Rollover Taxable Amount

A	T	STATE OF FLORIDA	7	72,752	—	72,752
B	—		—		—	
C	—		—		—	
D	—		—		—	
E	—		—		—	
F	—		—		—	
G	—		—		—	
H	—		—		—	
I	—		—		—	
J	—		—		—	
K	—		—		—	
L	—		—		—	
M	—		—		—	
N	—		—		—	
O	—		—		—	
				<u>72,752</u>	—	<u>72,752</u>
		Taxpayer		<u>72,752</u>		<u>72,752</u>
		Spouse				
		Total		<u>72,752</u>		<u>72,752</u>

NIIT

Capital Gain Distribution

Public Safety Officer Exclusion

Federal Withholding

State Withholding

Local Withholding

A				6,244		
B						
C						
D						
E						
F						
G						
H						
I						
J						
K						
L						
M						
N						
O						
Taxpayer				6,244		
Spouse						
Total				6,244		

VINCENT [REDACTED] CRAWFORD

Identification Number

	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						

Name

Taxpayer Identification Number

VINCENT CRAWFORD

		2021	2022	Differences
		MFJ	MFJ	
Filing Status				
Dependents		0	0	
1. Salaries and wages	1.	166,506	183,407	16,901
2. Interest income	2.	57	87	30
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.			
9. Capital gain/loss	9.			
10. Other gains/losses	10.			
11. Taxable IRA distributions	11.			
12. Taxable pensions	12.	69,116	72,752	3,636
13. Rent and royalty income including farm rental	13.			
14. Partnership/S corp income	14.	6,582	6,413	-169
15. Estate or trust income	15.			
16. Farm income/loss	16.			
17. Unemployment compensation	17.			
18. Taxable social security	18.			
19. Other income	19.		2,570	2,570
20. Total income	20.	242,261	265,229	22,968
21. Moving expenses	21.			
22. Deductible part of self-employment tax	22.		571	571
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.	242,261	264,658	22,397
31. Medical	31.			
32. Taxes	32.		1,501	1,501
33. Interest	33.			
34. Contributions	34.			
35. Casualty losses	35.			
36. Miscellaneous expenses	36.			
37. Allowable itemized deductions	37.		1,501	1,501
38. Standard deduction	38.	25,100	25,900	800
39. Deduction taken	39.	Standard 25,100	Standard 25,900	800
40. Taxable income before Qual Bus Inc Ded (QBID)	40.	217,161	238,758	21,597
41. QBID	41.	0	1,187	1,187
42. Taxable income	42.	217,161	237,571	20,410

Name

Taxpayer Identification Number

VINCENT CRAWFORD

		2021	2022	Differences
43.	Taxable income from 2YR page 1, line 42	217,161	237,571	20,410
44.	Tax on taxable income	40,613	44,688	4,075
45.	Alternative minimum tax			
46.	Excess advance premium tax credit			
47.	Child care credit			
48.	Education credits			
49.	Retirement savings credit			
50.	Child & other dependent tax credit			
51.	General business credit			
52.	Other credits			
53. Total credits				
54. Net tax liability		40,613	44,688	4,075
55.	Self-employment taxes		1,142	1,142
56.	Other taxes		3	3
57. Total tax		40,613	45,833	5,220
58.	Income tax withheld	32,503	34,308	1,805
59.	Estimated tax payments	173		-173
60.	Earned income credit			
61.	Additional Child tax credit			
62.	Other refundable tax credits			
63.	Other payments			
64. Total payments		32,676	34,308	1,632
65. Tax due/-refund		7,937	11,525	3,588
66.	Penalties and interest		280	280
67. Net tax due/-refund		7,937	11,805	3,868
68.	Refund applied to estimated tax payments			
69.	Refund received			
70. Effective tax rate		19.0 %	19.0 %	

Two Year Comparison - Tax Reconciliation Marginal Tax Rates

	2021	2021 Marginal	2022	2022 Marginal
	Taxable Income	Tax Rate	Taxable Income	Tax Rate
Ordinary income		%	237,571	24.0 %
Capital income		%		%
Capital - Sec. 1250		%		%
Capital - Sec. 1202		%		%

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