2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/24/2024

General Information

Name: Cheryl Lynn Grieb

PID 209757

AGENCY INFORMATION

Organization	Suborganization	Title
Florida PACE Funding Agency	Board of Directors	Board Member
Osceola County	Elected Constitutional Officer	County Commissioner District 4

Net Worth

My Net Worth as of December 31, 2023 was $ 2,643,214.00.

Filed with COE: 06/24/2024

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 $ 30,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER $1,000:

Description of Asset	Value of Asset
612 Lakeshore Blvd, Kissimmee, FL 34744 (50% ownership)	$ 237,500.00
608 Jacaranda Lane, Kissimmee, FL 24744 (50% ownership)	$ 115,000.00
815 Hastings Dr, Kissimmee, FL 34744 (50% ownership)	$ 165,000.00
1015 Newfound Harbor Dr, Merritt Island, FL (50% ownership)	$ 500,000.00
Newfound Acre lots, Leisester, NC (50% ownership)	$ 37,500.00
908/910 Mabbette St/112 N Clyde Ave, Kissimmee, FL 34741 (50% ownership Corp held)	$ 425,000.00
7/11 N Vernon Ave, Kissimmee, FL 34741 (50% ownership, Corp held)	$ 350,000.00
Addition Financial	$ 74,325.00
SouthState Bank - Jt acct (50%)	$ 10,379.00
SouthState Bank	$ 23,830.00
SouthState Bank Money Market	$ 18,178.00
Public Service Enterprise Group stock	$ 167,245.00
AT&T stock	$ 6,022.00
Ameritas Sep IRA	$ 24,277.00
Ameritas Roth IRA	$ 75,646.00
FRS Investment Plan Acct	$ 109,475.00
SouthState Bank CD	$ 50,000.00

Filed with COE: 06/24/2024

Liabilities

LIABILITIES IN EXCESS OF $1,000:

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

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income

Identify each separate source and amount of income which exceeded $1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2023 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 2023 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

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

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

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

Filed with COE: 06/24/2024

Interests in Specified Businesses

Business Entity # 1
N/A

Training

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

☑ I certify that I have completed the required training under Section 112.3142, F.S.

☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

Signature of Reporting Official or Candidate

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

Cheryl Lynn Grieb

Digitally signed: **06/24/2024**

Filed with COE: 06/24/2024

Form **1040** | **Two Year Comparison Report - Page 1** | **2022 & 2023**

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**-[redacted]

			2022	2023	Differences
	Filing Status		MFJ	MFJ	
	Dependents		0	0	
Income	1. Salaries and wages	1.	84,233	92,049	7,816
	2. Interest income	2.	1,291	858	-433
	3. Tax exempt interest income	3.			
	4. Dividend income	4.	6,243	6,824	581
	5. Qualified dividend income	5.	6,114	6,599	485
	6. Taxable state/local refunds	6.			
	7. Alimony received	7.			
	8. Business income/loss	8.	67,974	45,892	-22,082
	9. Capital gain/loss	9.	722	360	-362
	10. Other gains/losses	10.			
	11. Taxable IRA distributions	11.			
	12. Taxable pensions	12.			
	13. Rent and royalty income including farm rental	13.	11,171	-3,974	-15,145
	14. Partnership/S corp income	14.	45,537	123,521	77,984
	15. Estate or trust income	15.			
	16. Farm income/loss	16.			
	17. Unemployment compensation	17.			
	18. Taxable social security	18.			
	19. Other income	19.			
	20. **Total income**	20.	217,171	265,530	48,359
Adjustments	21. Moving expenses	21.			
	22. Deductible part of self-employment tax	22.	4,802	3,243	-1,559
	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.	1,150		-1,150
	28. Student loan interest	28.			
	29. Other adjustments	29.			
	30. **Adjusted gross income**	30.	211,219	262,287	51,068
Deductions	31. Medical	31.			
	32. Taxes	32.	10,000	1,766	-8,234
	33. Interest	33.			
	34. Contributions	34.	1,050	6,350	5,300
	35. Casualty losses	35.			
	36. Miscellaneous expenses	36.			
	37. **Allowable itemized deductions**	37.	11,050	8,116	-2,934
	38. Standard deduction	38.	25,900	29,200	3,300
	39. Deduction taken	39.	STANDARD 25,900	STANDARD 29,200	3,300
	40. Taxable income before Qual Bus Inc Ded (QBID)	40.	185,319	233,087	47,768
	41. QBID	41.	23,976	32,539	8,563
	42. **Taxable income**	42.	161,343	200,548	39,205

Form **1040** | **Two Year Comparison Report - Page 2** | **2022 & 2023**

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**-[redacted]

			2022	2023	Differences
	43. Taxable income from 2YR page 1, line 42	43.	161,343	200,548	39,205
	44. Tax on taxable income	44.	26,251	34,305	8,054
	45. Alternative minimum tax	45.			
	46. Excess advance premium tax credit	46.			
	47. Child care credit	47.			
	48. Education credits	48.			
T	49. Retirement savings credit	49.			
a	50. Child & other dependent tax credit	50.			
x	51. General business credit	51.			
	52. Other credits	52.			
C	53. **Total credits**	53.			
o	54. **Net tax liability**	54.	26,251	34,305	8,054
m	55. Self-employment taxes	55.	9,604	6,484	-3,120
p	56. Other taxes	56.		467	467
u	57. **Total tax**	57.	35,855	41,256	5,401
t	58. Income tax withheld	58.	16,559	17,803	1,244
a	59. Estimated tax payments	59.	3,975	23,200	19,225
t	60. Earned income credit	60.			
i	61. Additional Child tax credit	61.			
o	62. Other refundable tax credits	62.			
n	63. Other payments	63.			
	64. **Total payments**	64.	20,534	41,003	20,469
	65. **Tax due/-refund**	65.	15,321	253	-15,068
	66. Penalties and interest	66.	219		-219
	67. **Net tax due/-refund**	67.	15,540	253	-15,287
	68. Refund applied to estimated tax payments	68.			
	69. Refund received	69.			
	70. **Effective tax rate**	70.	22.0 %	21.0 %	

Two Year Comparison - Tax Reconciliation Marginal Tax Rates

	2022 Taxable Income	2022 Marginal Tax Rate	2023 Taxable Income	2023 Marginal Tax Rate
Ordinary income	154,507	22.0 %	193,589	24.0 %
Capital income	6,836	15.0 %	6,959	15.0 %
Capital - Sec. 1250		%		%
Capital - Sec. 1202		%		%

Form **1040** | **Estimated Tax Payments Worksheet** | **2024**

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**-[redacted]

Summary of Estimated Tax Payments

Voucher	(a) Due Date	(b) Total Estimate Amount	(c) 2023 Overpayment Applied	(d) Estimate Amt Paid	(e) Balance due Column b - Columns c & d	(f) Date paid	(g) Amount paid
1	04/15/24	7,100			7,100		
2	06/17/24	7,100			7,100		
3	09/16/24	7,100			7,100		
4	01/15/25	7,100			7,100		
Total ▶		28,400			28,400		

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 adjustments.		**9.**	
10.	Enter Total Tax from Form 1040, 1040-SR, or 1040-NR , line 24.		**10.**	
11.	**Add lines 9 and 10.**Total adjusted tax before adjustments.		**11.**	
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. 2023 Estimated Tax.**		**13.**	
14.	Enter 2023 Federal income tax withheld (Form 1040NR filers include amounts paid with Form 1040-C.)		**14.**	
15.	Enter adjustment(s) to withholding.		**15.**	
16.	**Estimated 2023 Tax, including adjustments.**			
	a. Based upon adjusted **2023** Tax (line 13 - lines 14 and 15).	**16a.**		
	b. Based upon projected **2024** tax.	**16b.** 28,208		
	Enter amount from 16a or 16b.		**16.**	28,208
17.	Enter 2023 overpayment applied to 2024 estimates from Form 1040, 1040-SR, or 1040-NR, line 36.		**17.**	
18.	Enter amounts already paid towards 2024 estimates.		**18.**	
19.	**Subtract lines 17 and 18 from line 16.**		**19.**	28,208
20.	Enter Rounding adjustment.		**20.**	192
21.	**Add lines 19 and 20. Balance of Estimated Tax for 2024.**		**21.**	28,400

Form **1040** Department of the Treasury—Internal Revenue Service **U.S. Individual Income Tax Return** **2023** OMB No. 1545-0074 IRS Use Only–Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 20 . See separate instructions.

Your first name and middle initial	Last name	Your social security number
CHERYL L	GRIEB	***-**-[redacted]
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number
PATRICIA L	DAUGHERTY	***-**-[redacted]

Home address (number and street). If you have a P.O box, see instructions. Apt. no.
612 LAKESHORE BLVD

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

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

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

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

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:

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

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

Age/Blindness **You:** ☐ Were born before January 2, 1959 ☐ Are blind **Spouse:** ☒ Was born before January 2, 1959 ☐ Is blind

Dependents (see instructions):

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

Income

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

If you did not get a Form W-2, see instructions.

Attach Sch. B if required.

Standard Deduction for –
- Single or Married filing separately, $13,850
- Married filing jointly or Qualifying surviving spouse, $27,700
- Head of household, $20,800
- If you checked any box under *Standard Deduction*, see instructions.

1a	Total amount from Form(s) W-2, box 1 (see instructions)				1a	92,049
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	92,049
2a	Tax-exempt interest	2a		b Taxable interest	2b	858
3a	Qualified dividends	3a	6,599	b Ordinary dividends	3b	6,824
4a	IRA distributions	4a		b Taxable amount	4b	
5a	Pensions and annuities	5a		b Taxable amount	5b	
6a	Soc. sec. ben.	6a		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	360
8	Other income from Schedule 1, line 10				8	165,439
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income**				9	265,530
10	Adjustments to income from Schedule 1, line 26				10	3,243
11	Subtract line 10 from line 9. This is your **adjusted gross income**				11	262,287
12	**Standard deduction or itemized deductions** (from Schedule A)				12	29,200
13	Qualified business income deduction from Form 8995 or Form 8995-A				13	32,539
14	Add lines 12 and 13				14	61,739
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income				15	200,548

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form **1040** (2023)

DAA

Tax and Credits	16	**Tax** (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐	16	34,305
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	34,305
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	34,305
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	6,951
	24	Add lines 22 and 23. This is your **total tax**	24	41,256
Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2 — 25a: 17,803		
	b	Form(s) 1099 — 25b:		
	c	Other forms (see instructions) — 25c:		
	d	Add lines 25a through 25c	25d	17,803
If you have a qualifying child, attach Sch. EIC.	26	2023 estimated tax payments and amount applied from 2022 return	26	23,200
	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	41,003
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	
Direct deposit? See instructions.	b	Routing number [redacted] c Type: ☐ Checking ☐ Savings		
	d	Account number [redacted]		
	36	Amount of line 34 you want **applied to your 2024 estimated tax** — 36:		
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	253
	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: DAVID J MCCARRON, CPA | Phone no.: 407-897-7050 | 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.)
		REALTOR	
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.)
		ATTORNEY	

Phone no. 407-944-4822 | Email address

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if:
DAVID J MCCARRON, CPA	DAVID J MCCARRON, CPA	04/01/24	*********	☐ Self-employed

Firm's name: MCCARRON CPAS | Phone no. 407-897-7050

Firm's address: 628 ELLEN DR WINTER PARK FL 32789-2902 | Firm's EIN 59-3543103

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

2023

Attachment Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
CHERYL L GRIEB & PATRICIA L DAUGHERTY

Your social security number
***-**-[redacted]

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	45,892
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E			5	119,547
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:	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	165,439

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	3,243
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, 1040-SR, or 1040-NR, line 10			26	3,243

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

2023

Attachment Sequence No. **02**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
CHERYL L GRIEB & PATRICIA L DAUGHERTY

Your social security number
***-**-[redacted]

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	6,484
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	467
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12			13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares			14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over $150,000			15	
16	Recapture of low-income housing credit. Attach Form 8611			16	

(continued on page 2)

Part II Other Taxes *(continued)*

17	Other additional taxes:				
a	Recapture of other credits. List type, form number, and amount:	17a			
b	Recapture of federal mortgage subsidy, if you sold your home 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	6,951

Form 1040 | Tax Return Reconciliation Worksheet | 2023

Filing Status: ☐ 1 Single ☒ 2 Married filing jointly ☐ 3 Married filing separately ☐ 4 Head of household* ☐ 5 Qualifying widow(er)*

MFS spouse name: *Qualifying person that is a child but not a dependent:

Taxpayer first name and initial	Last name	Taxpayer social security number
CHERYL L	GRIEB	***-**-[redacted]
If a joint return, spouse's first name and initial	**Last name**	**Spouse's social security number**
PATRICIA L	DAUGHERTY	***-**-[redacted]

Home address (number and street). If you have a P.O. box, see instructions. 612 LAKESHORE BLVD — Apt. no. — Presidential Election Campaign: Taxpayer ☐ Spouse

City, town or post office, state, and ZIP code. KISSIMMEE FL 34744-5747

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

At anytime during 2023, did you receive, sell, send, exchange, or otherwise acquire financial interest in any digital assets? Yes ☒ No

6a ☒ **Taxpayer.** If someone can claim you as a dependent, **do not** check box 6a

b ☒ **Spouse**

Boxes checked on 6a and 6b	2
Children on 6c who lived with you	
Children on 6c who did not live with you	
Dependents on 6c not entered above	
Total. Add lines above	2

6c Dependents:

(1) First name Last name	(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for: Child tax credit	Other dependents	If more than four dependents, ✓ here
			☐	☐	☐
			☐	☐	
			☐	☐	
			☐	☐	

Income (Schedule 1)	7	Wages, salaries, tips, etc. Attach Form(s) W-2		7	92,049
	8a	**Taxable** interest. Attach Schedule B if required		8a	858
	b	**Tax-exempt** interest. **Do not** include on line 8a	8b		
	9a	Ordinary dividends. Attach Schedule B if required		9a	6,824
	b	Qualified dividends	9b 6,599		
	10	Taxable refunds, credits, or offsets of state and local income taxes		10	
	11	Alimony received		11	
	12	Business income or (loss). Attach Schedule C or C-EZ		12	45,892
	13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐		13	360
	14	Other gains or (losses). Attach Form 4797		14	
	15a	IRA distributions — 15a — b Taxable amount		15b	
	16a	Pensions and annuities — 16a — b Taxable amount		16b	
	17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17	119,547
	18	Farm income or (loss). Attach Schedule F		18	
	19	Unemployment compensation		19	
	20a	Social security benefits — 20a — b Taxable amount		20b	
	21	Other income. List type and amount		21	
	22	Combine the amounts in the far right column for lines 7 through 21. This is your **total income** ▶		22	265,530
Adjusted Gross Income (Schedule 1)	23	Educator expenses	23		
	24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24		
	25	Health savings account deduction. Attach Form 8889	25		
	26	Moving expenses. Attach Form 3903	26		
	27	Deductible part of self-employment tax. Attach Schedule SE	27 3,243		
	28	Self-employed SEP, SIMPLE, and qualified plans	28		
	29	Self-employed health insurance deduction	29		
	30	Penalty on early withdrawal of savings	30		
	31a	Alimony paid b Recipient's SSN ▶	31a		
	32	IRA deduction	32		
	33	Student loan interest deduction	33		
	34	Reserved for future use	34		
	35	Reserved for future use	35		
	36	Add lines 23 through 35		36	3,243
	37	Subtract line 36 from line 22. This is your **adjusted gross income** ▶		37	262,287

Form **1040** | **Tax Return Reconciliation Worksheet, Page 2** | **2023**

Name **CHERYL L GRIEB & PATRICIA L DAUGHERTY** | Tp TIN ***-**-[redacted]

	38	Amount from line 37 (adjusted gross income)		38	262,287
Tax and Credits (Schedules 2, 3)	39a	Check if: [ ] **You** were born before January 2,1959, [ ] Blind. [X] **Spouse** was born before January 2,1959, [ ] Blind. } **Total boxes checked** ▶	39a 1		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶	39b [ ]		
Standard Deduction for— • People who check any box on line 39a or 39b **or** who can be claimed as a dependent, see instructions. • All others: Single or Married filing separately, $13,850 Married filing jointly or Qualifying widow(er), $27,700 Head of household, $20,800	40	**Itemized deductions** (from Schedule A) **or** your **standard deduction** (see left margin)		40	29,200
	a			40b	
	41	Subtract line 40 and 40b from line 38		41	233,087
	42	Qualified business income deduction (see instructions)		42	32,539
	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-		43	200,548
	44	Tax (see instr.). Check if any from: a [ ] Form(s) 8814 b [ ] Form 4972 c [ ]		44	34,305
	45	**Alternative minimum tax** (see instructions). Attach Form 6251		45	
	46	Excess advance premium tax credit repayment. Attach Form 8962		46	
	47	Add lines 44, 45, and 46 ▶		47	34,305
	48	Foreign tax credit. Attach Form 1116 if required	48		
	49	Credit for child and dependent care expenses. Attach Form 2441	49		
	50	Education credits from Form 8863, line 19	50		
	51	Retirement savings contributions credit. Attach Form 8880	51		
	52	Child tax credit/credit for other dependents	52		
	53	Residential energy credits. Attach Form 5695	53		
	54	Other credits from Form: a [ ] 3800 b [ ] 8801 c [ ]	54		
	55	Add lines 48 through 54. These are your **total credits**		55	
	56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- ▶		56	34,305
Other Taxes (Schedule 2)	57	Self-employment tax. Attach Schedule SE		57	6,484
	58	Unreported social security and Medicare tax from Form: **a** [ ] 4137 **b** [ ] 8919		58	
	59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required		59	
	60a	Household employment taxes from Schedule H		60a	
	b	First-time homebuyer credit repayment. Attach Form 5405 if required		60b	
	61	Taxes from: a [ ] Form 8959 b [X] Form 8960 c [ ] Instructions; enter code(s) FORM 8960		61	467
[ ]	62	Section 965 net tax liability installment from Form 965-A	62		
	63	Add lines 56 through 61. This is your total tax ▶		63	41,256
	64	Federal income tax withheld from:			
	a	Form(s) W-2	64a 17,803		
	b	Form(s) 1099	64b		
	c	Other forms	64c		
	65	2023 estimated tax payments and amount applied from 2022 return	65 23,200		
Payments (Schedule 3)	66	**Earned income credit (EIC)**	66		
	67	Additional child tax credit. Attach Schedule 8812	67		
	68	American opportunity credit from Form 8863, line 8	68		
	69	Recovery rebate credit	69		
	70	Net premium tax credit. Attach Form 8962	70		
	71	Amount paid with request for extension to file	71		
	72	Excess social security and tier 1 RRTA tax withheld	72		
	73	Credit for federal tax on fuels. Attach Form 4136	73		
	74	Other payments and refundable credits	74		
	75	**Total pymts.** Add lines 64 - 74.		75	41,003
Refund	76	If line 75 is more than line 63, subtract line 63 from line 75. This is the amount you **overpaid**		76	
	77a	Amount of line 76 you want **refunded to you.** If Form 8888 is attached, check here ▶ [ ]		77a	
	▶ b	Routing number	▶ c Type: [ ] Checking [ ] Savings		
	▶ d	Account number			
	78	Amount of line 76 you want **applied to your** 2024 estimated tax ▶	78		
Amount You Owe	79	**Amount you owe.** Subtract line 75 from line 63. For details on how to pay, see instructions ▶		79	253
	80	Estimated tax penalty (see instructions)	80		

Int/Pen Date filed | Int | Fail to file | Fail to pay | Total

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see instructions)? [X] **Yes.** Complete below. [ ] **No** Personal identification no. (PIN) ▶ [redacted]

Designee's Name ▶ **DAVID J MCCARRON, CPA** Phone no. ▶ **407-897-7050**

Other Info Taxpayer Daytime phone number **407-944-4822** Taxpayer: Occupation **REALTOR** IRS Identity Protection PIN

Spouse: Occupation **ATTORNEY** IRS Identity Protection PIN

[ ] Taxpayer [ ] Spouse Email address

Taxpayer Name CHERYL L GRIEB
Spouse Name PATRICIA L DAUGHERTY

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) 04/01/24

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

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

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

SCHEDULE B
(Form 1040)

Department of the Treasury
Internal Revenue Service

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR.
Go to *www.irs.gov/ScheduleB* for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. **08**

Name(s) shown on return
CHERYL L GRIEB & PATRICIA L DAUGHERTY

Your social security number
***-**-[redacted]

Part I Interest

(See instructions and the Instructions for Form 1040, line 2b.)

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

			Amount
1	List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:		
	ADDDITION FINANCIAL		515
	BETTY M DOBBIE		14
	SOUTH STATE BANK		123
	SOUTH STATE BANK		2
	AMERITAS ADVISORY SERVICES		13
	OLDE KISSIMMEE INVESTMENTS, INC. 59-3687893	1	95
	OLDE KISSIMMEE INVESTMENTS, INC. 59-3687893		96
2	Add the amounts on line 1	2	858
3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3	
4	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b	4	858

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

Part II Ordinary Dividends

(See instructions and the Instructions for Form 1040, line 3b.)

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

			Amount
5	List name of payer:		
	AT&T		411
	PUBLIC SERVICE ENTERPRISE		6,051
	AMERITAS ADVISORY SERVICES		362
6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6	6,824

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

Part III Foreign Accounts and Trusts

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

Caution: If required, failure to file FinCEN Form 114 may result in substantial penalties. Additionally, you may be required to file Form 8938, Statement of Specified Foreign Financial Assets. See instructions.

		Yes	No
7a	At any time during 2023, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions		X
	If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements		
b	If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the financial account(s) is (are) located:		
8	During 2023, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions		X

SCHEDULE C (Form 1040)

Department of the Treasury
Internal Revenue Service

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

2023

Attachment Sequence No. **09**

Name of proprietor	Social security number (SSN)
PATRICIA L DAUGHERTY	***-**-[redacted]

A	Principal business or profession, including product or service (see instructions)	B Enter code from instructions
	ATTORNEY	541100
C	Business name. If no separate business name, leave blank.	D Employer ID number (EIN) (see instr.)
	PATRICIA L DAUGHERTY, ATTORNEY	59-3717441
E	Business address (including suite or room no.) 11 N VERNON AVE	
	City, town or post office, state, and ZIP code KISSIMMEE FL 34741-5110	

F	Accounting method: (1) [X] Cash (2) [ ] Accrual (3) [ ] Other (specify)			
G	Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses	[X] Yes	[ ] No	
H	If you started or acquired this business during 2023, check here	[ ]		
I	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions	[ ] Yes	[X] 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	107,427
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	107,427
4	Cost of goods sold (from line 42)	4	4,875
5	**Gross profit.** Subtract line 4 from line 3	5	102,552
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	102,552

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

8	Advertising	8	200	18	Office expense (see instructions)	18	6,906
9	Car and truck expenses (see instructions)	9	8,531	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	6,415
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	200
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	1,951
15	Insurance (other than health)	15	5,949	23	Taxes and licenses	23	1,471
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	689
17	Legal and professional services	17	6,205	25	Utilities	25	2,125
				26	Wages (less employment credits)	26	17,418
				27a	Other expenses (from line 48)	27a	
				b	Energy efficient commercial bldgs deduction (attach Form 7205)	27b	

28	**Total expenses** before expenses for business use of home. Add lines 8 through 27b	28	58,060
29	Tentative profit or (loss). Subtract line 28 from line 7	29	44,492
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	
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	44,492
32	If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both **Schedule 1 (Form 1040), line 3,** and on **Schedule SE, line 2.** (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on **Form 1041, line 3.** • If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.	32a [ ] All investment is at risk. 32b [ ] Some investment is not at risk.	

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? If "Yes," attach explanation ☐ Yes ☐ No

35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	0
36	Purchases less cost of items withdrawn for personal use	36	
37	Cost of labor. Do not include any amounts paid to yourself	37	
38	Materials and supplies	38	
39	Other costs SEE STATEMENT 1	39	4,875
40	Add lines 35 through 39	40	4,875
41	Inventory at end of year	41	0
42	**Cost of goods sold.** Subtract line 41 from line 40. Enter the result here and on line 4	42	4,875

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) 09/21/15

44 Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:

a Business 9,933 b Commuting (see instructions) c Other 367

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.

48	**Total other expenses.** Enter here and on line 27a	48

SCHEDULE C (Form 1040)

Department of the Treasury
Internal Revenue Service

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

2023

Attachment Sequence No. **09**

Name of proprietor: **CHERYL L GRIEB**

Social security number (SSN): ***-**-[redacted]

A Principal business or profession, including product or service (see instructions): **ADVISORY SERVICES**

B Enter code from instructions: **541600**

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.): **612 LAKESHORE BLVD**

City, town or post office, state, and ZIP code: **KISSIMMEE FL 34744-5747**

F Accounting method: (1) [X] Cash (2) [ ] Accrual (3) [ ] Other (specify)

G Did you "materially participate" in the operation of this business during 2023? If "No," see instructions for limit on losses — [X] Yes [ ] No

H If you started or acquired this business during 2023, check here [ ]

I Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions — [ ] Yes [X] 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	1,400
2	Returns and allowances	2	
3	Subtract line 2 from line 1	3	1,400
4	Cost of goods sold (from line 42)	4	
5	**Gross profit.** Subtract line 4 from line 3	5	1,400
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7	**Gross income.** Add lines 5 and 6	7	1,400

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

8	Advertising	8		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	
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13		21	Repairs and maintenance	21	
14	Employee benefit programs (other than on line 19)	14		22	Supplies (not included in Part III)	22	
15	Insurance (other than health)	15		23	Taxes and licenses	23	
16	Interest (see instructions):			24	Travel and meals:		
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		25	Utilities	25	
				26	Wages (less employment credits)	26	
				27a	Other expenses (from line 48)	27a	
				b	Energy efficient commercial bldgs deduction (attach Form 7205)	27b	

28	**Total expenses** before expenses for business use of home. Add lines 8 through 27b	28	0
29	Tentative profit or (loss). Subtract line 28 from line 7	29	1,400
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	
31	**Net profit or (loss).** Subtract line 30 from line 29. • If a profit, enter on both **Schedule 1 (Form 1040), line 3,** and on **Schedule SE, line 2.** (If you checked the box on line 1, see instructions.) Estates and trusts, enter on **Form 1041, line 3.** • If a loss, you **must** go to line 32.	31	1,400
32	If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both **Schedule 1 (Form 1040), line 3,** and on **Schedule SE, line 2.** (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on **Form 1041, line 3.** • If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.	32a [ ] All investment is at risk. 32b [ ] Some investment is not at risk.	

SCHEDULE D
(Form 1040)

Department of the Treasury
Internal Revenue Service

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

2023

Attachment Sequence No. **12**

Name(s) shown on return
CHERYL L GRIEB & PATRICIA L DAUGHERTY

Your social security number
***-**-[redacted]

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	4,000	4,228	1	-227
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**	
12	Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1	**12**	
13	Capital gain distributions. See the instructions	**13**	587
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**	360

Part III Summary

16	Combine lines 7 and 15 and enter the result	16	360

- 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?

[X] **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 are you not filing Form 4952?

[X] **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)

21 ( )

Note: When figuring which amount is smaller, treat both amounts as positive numbers.

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. Name and SSN or taxpayer identification no. not required if shown on other side

CHERYL L GRIEB & PATRICIA L DAUGHERTY

Social security number or taxpayer identification number

***-**-[redacted]

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

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

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

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

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

1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the **Note** below and see *Column (e)* in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). **See the separate instructions.** (f) Code(s) from instructions	(g) Amount of adjustment	(h) **Gain or (loss)** Subtract column (e) from column (d) and combine the result with column (g).
AMERITAS ADVISORY SERVICES	VARIOUS	VARIOUS	4,000	4,228	W	1	-227
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked)			4,000	4,228		1	-227

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

SCHEDULE E (Form 1040)

Department of the Treasury
Internal Revenue Service

Supplemental Income and Loss

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

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

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

OMB No. 1545-0074

2023

Attachment Sequence No. **13**

Name(s) shown on return

CHERYL L GRIEB & PATRICIA L DAUGHERTY

Your social security number

***-**-[redacted]

Part I Income or Loss From Rental Real Estate and Royalties

Note: If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

A	Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions	☐ Yes	☒ No
B	If "Yes," did you or will you file required Form(s) 1099?	☐ Yes	☐ No

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

A	608 JACARANDA LN, KISSIMMEE, FL 34744
B	815 HASTINGS DR, KISSIMMEE, FL 34744
C	

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

Type of Property:

1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe)

		Properties: A	B	C
Income:				
3 Rents received	3	13,000	18,000	
4 Royalties received	4			
Expenses:				
5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7	851	417	
8 Commissions	8			
9 Insurance	9	3,541	3,582	
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see instructions)	12			
13 Other interest	13			
14 Repairs	14	13,493	1,720	
15 Supplies	15			
16 Taxes	16	2,605	3,082	
17 Utilities	17			
18 Depreciation expense or depletion	18	2,418	3,265	
19 Other (list)	19			
20 Total expenses. Add lines 5 through 19	20	22,908	12,066	
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file **Form 6198**	21	-9,908	5,934	
22 Deductible rental real estate loss after limitation, if any, on **Form 8582** (see instructions)	22	(9,908)	( )	( )

23a Total of all amounts reported on line 3 for all rental properties	23a	31,000	
b Total of all amounts reported on line 4 for all royalty properties	23b		
c Total of all amounts reported on line 12 for all properties	23c		
d Total of all amounts reported on line 18 for all properties	23d	5,683	
e Total of all amounts reported on line 20 for all properties	23e	34,974	

24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses	24	5,934
25 **Losses.** Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	(9,908)
26 **Total rental real estate and royalty income or (loss).** Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	26	-3,974

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

CHERYL L GRIEB & PATRICIA L DAUGHERTY

Your social security number ***-**-[redacted]

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 4562**	(k) Nonpassive income from **Schedule K-1**
A					
B					
C					
D					
29a Totals					123,521
b Totals					

30	Add columns (h) and (k) of line 29a	30	123,521
31	Add columns (g), (i), and (j) of line 29b	31	( )
32	**Total partnership and S corporation income or (loss).** Combine lines 30 and 31	32	123,521

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	119,547
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	119,547

SCHEDULE SE
(Form 1040)

Department of the Treasury
Internal Revenue Service

Self-Employment Tax

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

OMB No. 1545-0074
2023
Attachment Sequence No. **17**

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

Social security number of person with **self-employment** income ***-**-[redacted]

Part I Self-Employment Tax

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

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

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

1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A		1a	
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AQ		1b	( )

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

2	Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order		2	1,400
3	Combine lines 1a, 1b, and 2		3	1,400
4a	If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3		4a	1,293
	Note: If line 4a is less than $400 due to Conservation Reserve Program payments on line 1b, see instructions.			
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here		4b	
c	Combine lines 4a and 4b. If less than $400, **stop;** you don't owe self-employment tax. **Exception:** If less than $400 and you had **church employee income,** enter -0- and continue		4c	1,293
5a	Enter your **church employee income** from Form W-2. See instructions for definition of church employee income	5a		
b	Multiply line 5a by 92.35% (0.9235). If less than $100, enter -0-		5b	0
6	Add lines 4c and 5b		6	1,293
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 2023		7	160,200
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 $160,200 or more, skip lines 8b through 10, and go to line 11	8a 108,083		
b	Unreported tips subject to social security tax from Form 4137, line 10	8b		
c	Wages subject to social security tax from Form 8919, line 10	8c		
d	Add lines 8a, 8b, and 8c		8d	108,083
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11		9	52,117
10	Multiply the **smaller** of line 6 or line 9 by 12.4% (0.124)		10	160
11	Multiply line 6 by 2.9% (0.029)		11	37
12	**Self-employment tax.** Add lines 10 and 11. Enter here and on **Schedule 2 (Form 1040), line 4,** or **Form 1040-SS, Part I, line 3**		12	197
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**	13 99		

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

Farm Optional Method. You may use this method **only** if **(a)** your gross farm income[1] wasn't more than $9,840, **or (b)** your net farm profits[2] were less than $7,103.

14	Maximum income for optional methods	**14**	6,560
15	Enter the **smaller** of: two-thirds (2/3) of gross farm income[1] (not less than zero) **or** $6,560. Also, include this amount on line 4b above	**15**	

Nonfarm Optional Method. You may use this method **only** if **(a)** your net nonfarm profits[3] were less than $7,103 and also less than 72.189% of your gross nonfarm income,[4] **and (b)** you had net earnings from self-employment of at least $400 in 2 of the prior 3 years. **Caution:** You may use this method no more than five times.

16	Subtract line 15 from line 14	**16**	
17	Enter the **smaller** of: two-thirds (2/3) of gross nonfarm income[4] (not less than zero) **or** the amount on line 16. Also, include this amount on line 4b above	**17**	

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

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

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

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

SCHEDULE SE
(Form 1040)

Department of the Treasury
Internal Revenue Service

Self-Employment Tax

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

OMB No. 1545-0074

2023

Attachment Sequence No. **17**

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

PATRICIA L DAUGHERTY

Social security number of person with **self-employment** income ***-**-[redacted]

Part I Self-Employment Tax

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

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

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

1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A		1a	
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AQ		1b	( )

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

2	Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order		2	44,492
3	Combine lines 1a, 1b, and 2		3	44,492
4a	If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3		4a	41,088
	Note: If line 4a is less than $400 due to Conservation Reserve Program payments on line 1b, see instructions.			
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here		4b	
c	Combine lines 4a and 4b. If less than $400, **stop;** you don't owe self-employment tax. **Exception:** If less than $400 and you had **church employee income,** enter -0- and continue		4c	41,088
5a	Enter your **church employee income** from Form W-2. See instructions for definition of church employee income	5a		
b	Multiply line 5a by 92.35% (0.9235). If less than $100, enter -0-		5b	0
6	Add lines 4c and 5b		6	41,088
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 2023		7	160,200
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 $160,200 or more, skip lines 8b through 10, and go to line 11	8a		
b	Unreported tips subject to social security tax from Form 4137, line 10	8b		
c	Wages subject to social security tax from Form 8919, line 10	8c		
d	Add lines 8a, 8b, and 8c		8d	
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11		9	160,200
10	Multiply the **smaller** of line 6 or line 9 by 12.4% (0.124)		10	5,095
11	Multiply line 6 by 2.9% (0.029)		11	1,192
12	**Self-employment tax.** Add lines 10 and 11. Enter here and on **Schedule 2 (Form 1040), line 4,** or **Form 1040-SS, Part I, line 3**		12	6,287
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**	13	3,144	

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

Farm Optional Method. You may use this method **only** if **(a)** your gross farm income[1] wasn't more than $9,840, **or (b)** your net farm profits[2] were less than $7,103.

14	Maximum income for optional methods	**14**	6,560
15	Enter the **smaller** of: two-thirds (2/3) of gross farm income[1] (not less than zero) **or** $6,560. Also, include this amount on line 4b above	**15**	

Nonfarm Optional Method. You may use this method **only** if **(a)** your net nonfarm profits[3] were less than $7,103 and also less than 72.189% of your gross nonfarm income,[4] **and (b)** you had net earnings from self-employment of at least $400 in 2 of the prior 3 years. **Caution:** You may use this method no more than five times.

16	Subtract line 15 from line 14	**16**	
17	Enter the **smaller** of: two-thirds (2/3) of gross nonfarm income[4] (not less than zero) **or** the amount on line 16. Also, include this amount on line 4b above	**17**	

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

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

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

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

Form **8606**

Department of the Treasury
Internal Revenue Service

Nondeductible IRAs

Attach to 2023 Form 1040, 1040-SR, or 1040-NR.

Go to *www.irs.gov/Form8606* **for instructions and the latest information.**

OMB No. 1545-0074

2023

Attachment Sequence No. **48**

Name. If married, file a separate form for each spouse required to file 2023 Form 8606. See instructions.

CHERYL L GRIEB

Your social security number

***-**-[redacted]

Fill in Your Address Only if You Are Filing This Form by Itself and Not With Your Tax Return

Home address (number and street, or P.O. box if mail is not delivered to your home)

Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instructions).

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

Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, Traditional SEP, and Traditional SIMPLE IRAs

Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2023.
- You took distributions from a traditional, traditional SEP, or traditional SIMPLE IRA in 2023 **and** you made nondeductible contributions to a traditional IRA in 2023 or an earlier year. For this purpose, a distribution does not include a rollover (other than certain qualified disaster distribution repayments from 2023 Form(s) 8915-F), qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023 **and** you made nondeductible contributions to a traditional IRA in 2023 or an earlier year.

1	Enter your nondeductible contributions to traditional IRAs for 2023, including those made for 2023 from January 1, 2024, through April 15, 2024. See instructions	1	
2	Enter your total basis in traditional IRAs. See instructions	2	
3	Add lines 1 and 2	3	
	In 2023, did you take a distribution from traditional, traditional SEP, or traditional SIMPLE IRAs, or make a Roth, Roth SEP, or Roth SIMPLE IRA conversion? **No** — Enter the amount from line 3 on line 14. Do not complete the rest of Part I. **Yes** — Go to line 4.		
4	Enter those contributions included on line 1 that were made from January 1, 2024, through April 15, 2024	4	
5	Subtract line 4 from line 3	5	
6	Enter the value of **all** your traditional, traditional SEP, and traditional SIMPLE IRAs as of December 31, 2023, plus any outstanding rollovers. Subtract certain repayments of qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions)	6	
7	Enter your distributions from traditional, traditional SEP, and traditional SIMPLE IRAs in 2023. **Do not** include rollovers (other than repayments of qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions)); qualified charitable distributions; a one-time distribution to fund an HSA; conversions to a Roth, Roth SEP, or Roth SIMPLE IRA; certain returned contributions; or recharacterizations of traditional IRA contributions (see instructions)	7	
8	Enter the net amount you converted from traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023. Also, enter this amount on line 16	8	
9	Add lines 6, 7, and 8	9	
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000"	10	x
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth, Roth SEP, or Roth SIMPLE IRAs. Also, enter this amount on line 17	11	
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth, Roth SEP, or Roth SIMPLE IRA	12	
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions	13	
14	Subtract line 13 from line 3. This is **your total basis in traditional IRAs for 2023 and earlier years**	14	
15a	Subtract line 12 from line 7	15a	
b	Enter the amount on line 15a attributable to qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions). Also, enter this amount on 2023 Form(s) 8915-F, line 18, as applicable (see instructions)	15b	
c	**Taxable amount.** Subtract line 15b from line 15a. If more than zero, also include this amount on 2023 Form 1040, 1040-SR, **or** 1040-NR, line 4b	15c	
	Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age 59½ at the time of the distribution. See instructions.		

Part II 2023 Conversions From Traditional, Traditional SEP, or Traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs

Complete this part if you converted part or all of your traditional, traditional SEP, and traditional SIMPLE IRAs to a Roth, Roth SEP, or Roth SIMPLE IRA in 2023.

16	If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023	16	
17	If you completed Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on line 16 (see instructions)	17	
18	**Taxable amount.** Subtract line 17 from line 16. If more than zero, also include this amount on 2023 Form 1040, 1040-SR, or 1040-NR, line 4b	18	

Part III Distributions From Roth, Roth SEP, or Roth SIMPLE IRAs

Complete this part only if you took a distribution from a Roth, Roth SEP, or Roth SIMPLE IRA in 2023. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution from 2023 Form(s) 8915-F (see instructions)), qualified charitable distribution, one-time distribution to fund an HSA, recharacterization, or return of certain contributions (see instructions).

19	Enter your total nonqualified distributions from Roth, Roth SEP, and Roth SIMPLE IRAs in 2023, including any qualified first-time homebuyer distributions, and any qualified disaster distributions from 2023 Form(s) 8915-F (see instructions)	19	
20	Qualified first-time homebuyer expenses (see instructions). **Do not** enter more than $10,000 reduced by the total of all your prior qualified first-time homebuyer distributions	20	
21	Subtract line 20 from line 19. If zero or less, enter -0-	21	
22	Enter your basis in Roth, Roth SEP, and Roth SIMPLE IRA contributions (see instructions). If line 21 is zero, **stop here**	22	1,150
23	Subtract line 22 from line 21. If zero or less, enter -0- and skip lines 24 and 25. If more than zero, you may be subject to an additional tax (see instructions)	23	0
24	Enter your basis in conversions from traditional, traditional SEP, and traditional SIMPLE IRAs and rollovers from qualified retirement plans to a Roth, Roth SEP, or Roth SIMPLE IRA. See instructions	24	
25a	Subtract line 24 from line 23. If zero or less, enter -0- and skip lines 25b and 25c	25a	0
b	Enter the amount on line 25a attributable to qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions). Also, enter this amount on 2023 Form(s) 8915-F, line 19, as applicable (see instructions)	25b	
c	**Taxable amount.** Subtract line 25b from line 25a. If more than zero, also include this amount on 2023 Form 1040, 1040-SR, **or** 1040-NR, line 4b	25c	

Sign Here Only if You Are Filing This Form by Itself and Not With Your Tax Return

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

Your signature _____ Date _____

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name			Firm's EIN	
Firm's address			Phone no.	

Form **8606**

Department of the Treasury
Internal Revenue Service

Nondeductible IRAs

Attach to 2023 Form 1040, 1040-SR, or 1040-NR.

Go to *www.irs.gov/Form8606* **for instructions and the latest information.**

OMB No. 1545-0074

2023

Attachment Sequence No. **48**

Name. If married, file a separate form for each spouse required to file 2023 Form 8606. See instructions.

PATRICIA L DAUGHERTY

Your social security number

***-**-[redacted]

Fill in Your Address Only if You Are Filing This Form by Itself and Not With Your Tax Return

Home address (number and street, or P.O. box if mail is not delivered to your home) | Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instructions).

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

Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, Traditional SEP, and Traditional SIMPLE IRAs

Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2023.
- You took distributions from a traditional, traditional SEP, or traditional SIMPLE IRA in 2023 **and** you made nondeductible contributions to a traditional IRA in 2023 or an earlier year. For this purpose, a distribution does not include a rollover (other than certain qualified disaster distribution repayments from 2023 Form(s) 8915-F), qualified charitable distribution, one-time distribution to fund an HSA, conversion, recharacterization, or return of certain contributions.
- You converted part, but not all, of your traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023 **and** you made nondeductible contributions to a traditional IRA in 2023 or an earlier year.

1	Enter your nondeductible contributions to traditional IRAs for 2023, including those made for 2023 from January 1, 2024, through April 15, 2024. See instructions			1	
2	Enter your total basis in traditional IRAs. See instructions			2	
3	Add lines 1 and 2			3	
	In 2023, did you take a distribution from traditional, traditional SEP, or traditional SIMPLE IRAs, or make a Roth, Roth SEP, or Roth SIMPLE IRA conversion? — **No** — Enter the amount from line 3 on line 14. Do not complete the rest of Part I. — **Yes** — Go to line 4.				
4	Enter those contributions included on line 1 that were made from January 1, 2024, through April 15, 2024			4	
5	Subtract line 4 from line 3			5	
6	Enter the value of **all** your traditional, traditional SEP, and traditional SIMPLE IRAs as of December 31, 2023, plus any outstanding rollovers. Subtract certain repayments of qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions)			6	
7	Enter your distributions from traditional, traditional SEP, and traditional SIMPLE IRAs in 2023. **Do not** include rollovers (other than repayments of qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions)); qualified charitable distributions; a one-time distribution to fund an HSA; conversions to a Roth, Roth SEP, or Roth SIMPLE IRA; certain returned contributions; or recharacterizations of traditional IRA contributions (see instructions)			7	
8	Enter the net amount you converted from traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023. Also, enter this amount on line 16			8	
9	Add lines 6, 7, and 8	9			
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000"	10	x		
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth, Roth SEP, or Roth SIMPLE IRAs. Also, enter this amount on line 17	11			
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth, Roth SEP, or Roth SIMPLE IRA	12			
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions			13	
14	Subtract line 13 from line 3. This is **your total basis in traditional IRAs for 2023 and earlier years**			14	
15a	Subtract line 12 from line 7			15a	
b	Enter the amount on line 15a attributable to qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions). Also, enter this amount on 2023 Form(s) 8915-F, line 18, as applicable (see instructions)			15b	
c	**Taxable amount.** Subtract line 15b from line 15a. If more than zero, also include this amount on 2023 Form 1040, 1040-SR, **or** 1040-NR, line 4b			15c	
	Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age 59½ at the time of the distribution. See instructions.				

Part II 2023 Conversions From Traditional, Traditional SEP, or Traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs

Complete this part if you converted part or all of your traditional, traditional SEP, and traditional SIMPLE IRAs to a Roth, Roth SEP, or Roth SIMPLE IRA in 2023.

16	If you completed Part I, enter the amount from line 8. Otherwise, enter the net amount you converted from traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2023	16	
17	If you completed Part I, enter the amount from line 11. Otherwise, enter your basis in the amount on line 16 (see instructions)	17	
18	**Taxable amount.** Subtract line 17 from line 16. If more than zero, also include this amount on 2023 Form 1040, 1040-SR, or 1040-NR, line 4b	18	

Part III Distributions From Roth, Roth SEP, or Roth SIMPLE IRAs

Complete this part only if you took a distribution from a Roth, Roth SEP, or Roth SIMPLE IRA in 2023. For this purpose, a distribution does not include a rollover (other than a repayment of a qualified disaster distribution from 2023 Form(s) 8915-F (see instructions)), qualified charitable distribution, one-time distribution to fund an HSA, recharacterization, or return of certain contributions (see instructions).

19	Enter your total nonqualified distributions from Roth, Roth SEP, and Roth SIMPLE IRAs in 2023, including any qualified first-time homebuyer distributions, and any qualified disaster distributions from 2023 Form(s) 8915-F (see instructions)	19	
20	Qualified first-time homebuyer expenses (see instructions). **Do not** enter more than $10,000 reduced by the total of all your prior qualified first-time homebuyer distributions	20	
21	Subtract line 20 from line 19. If zero or less, enter -0-	21	
22	Enter your basis in Roth, Roth SEP, and Roth SIMPLE IRA contributions (see instructions). If line 21 is zero, **stop here**	22	1,150
23	Subtract line 22 from line 21. If zero or less, enter -0- and skip lines 24 and 25. If more than zero, you may be subject to an additional tax (see instructions)	23	0
24	Enter your basis in conversions from traditional, traditional SEP, and traditional SIMPLE IRAs and rollovers from qualified retirement plans to a Roth, Roth SEP, or Roth SIMPLE IRA. See instructions	24	
25a	Subtract line 24 from line 23. If zero or less, enter -0- and skip lines 25b and 25c	25a	0
b	Enter the amount on line 25a attributable to qualified disaster distributions, if any, from 2023 Form(s) 8915-F (see instructions). Also, enter this amount on 2023 Form(s) 8915-F, line 19, as applicable (see instructions)	25b	
c	**Taxable amount.** Subtract line 25b from line 25a. If more than zero, also include this amount on 2023 Form 1040, 1040-SR, **or** 1040-NR, line 4b	25c	

Sign Here Only if You Are Filing This Form by Itself and Not With Your Tax Return

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

Your signature _____ Date _____

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name			Firm's EIN	
Firm's address			Phone no.	

Form **8995**

Department of the Treasury
Internal Revenue Service

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

2023

Attachment Sequence No. **55**

Name(s) shown on return

CHERYL L GRIEB & PATRICIA L DAUGHERTY

Your taxpayer identification number

***-**-[redacted]

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 $182,100 ($364,200 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	SEE STATEMENT 3		
ii			
iii			
iv			
v			

2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)	2	162,696		
3	Qualified business net (loss) carryforward from the prior year	3	( )		
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-	4	162,696		
5	Qualified business income component. Multiply line 4 by 20% (0.20)			5	32,539
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)	6			
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year	7	( )		
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-	8	0		
9	REIT and PTP component. Multiply line 8 by 20% (0.20)			9	
10	Qualified business income deduction before the income limitation. Add lines 5 and 9			10	32,539
11	Taxable income before qualified business income deduction (see instructions)	11	233,087		
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	12	6,959		
13	Subtract line 12 from line 11. If zero or less, enter -0-	13	226,128		
14	Income limitation. Multiply line 13 by 20% (0.20)			14	45,226
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)			15	32,539
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-			16	(0)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-			17	( )

Form **8960**

Department of the Treasury
Internal Revenue Service

Net Investment Income Tax—Individuals, Estates, and Trusts

Attach to your tax return.

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

OMB No. 1545-2227

2023

Attachment Sequence No. **72**

Name(s) shown on your tax return

CHERYL L GRIEB & PATRICIA L DAUGHERTY

Your social security number or EIN

***-**-[redacted]

Part I Investment Income

- ☐ Section 6013(g) election (see instructions)
- ☐ Section 6013(h) election (see instructions)
- ☐ Regulations section 1.1411-10(g) election (see instructions)

1	Taxable interest (see instructions)			1	858
2	Ordinary dividends (see instructions)			2	6,824
3	Annuities (see instructions)			3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a	165,439		
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b	-159,505		
c	Combine lines 4a and 4b			4c	5,934
5a	Net gain or loss from disposition of property (see instructions)	5a	360		
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	360
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	13,976

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	13,976
	Individuals:				
13	Modified adjusted gross income (see instructions)	13	262,287		
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	12,287		
16	Enter the smaller of line 12 or line 15			16	12,287
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	467
	Estates and Trusts:				
18a	Net investment income (line 12 above)	18a			
b	Deductions for distributions of net investment income and charitable deductions (see instructions)	18b			
c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c			
19a	Adjusted gross income (see instructions)	19a			
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b			
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c			
20	Enter the smaller of line 18c or line 19c			20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). **Enter here and include on your tax return** (see instructions)			21	

Form **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
CHERYL L GRIEB

Identifying number
***-**-[redacted]

A Name of S corporation
OLDE KISSIMMEE INVESTMENTS, INC.

B Employer identification number
59-3687893

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	0
2	Basis from any capital contributions made or additional stock acquired during the tax year			2	
3a	Ordinary business income (enter losses in Part III)	3a			
b	Net rental real estate income (enter losses in Part III)	3b	9,127		
c	Other net rental income (enter losses in Part III)	3c			
d	Interest income	3d	95		
e	Ordinary dividends	3e			
f	Royalties	3f			
g	Net capital gains (enter losses in Part III)	3g			
h	Net section 1231 gain (enter losses in Part III)	3h			
i	Other income (enter losses in Part III)	3i			
j	Excess depletion adjustment	3j			
k	Tax-exempt income	3k			
l	Recapture of business credits	3l			
m	Other items that increase stock basis	3m			
4	Add lines 3a through 3m			4	9,222
5	Stock basis before distributions. Add lines 1, 2, and 4			5	9,222
6	Distributions (excluding dividend distributions)			6	
	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.				
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	9,222
8a	Nondeductible expenses	8a	750		
b	Depletion for oil and gas	8b			
c	Business credits (sections 50(c)(1) and (5))	8c			
9	Add lines 8a through 8c			9	750
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	8,472
11	Allowable loss and deduction items. Enter the amount from line 47, column (c)			11	
12	Debt basis restoration (see net increase in instructions for line 23)			12	8,472
13	Other items that decrease stock basis			13	
14	Add lines 11, 12, and 13			14	8,472
15	**Stock basis at the end of the corporation's tax year.** Subtract line 14 from line 10. If the result is zero or less, enter -0-			15	0

Part II Shareholder Debt Basis

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

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

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	309,199			309,199
22	Enter the amount, if any, from line 17				
23	Debt basis restoration (see instructions)	8,472			8,472
24	Debt basis before repayment. Add lines 21, 22, and 23	317,671			317,671
25	Divide line 24 by line 18	0.6290			
26	Nontaxable debt repayment. Multiply line 25 by line 19				
27	Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24	317,671			317,671
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-	317,671			317,671
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-	317,671			317,671

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	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					
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 on line 11 and enter the total loss in column (d) on line 30					

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
CHERYL L GRIEB

Identifying number
***-**-[redacted]

A Name of S corporation
OLDE KISSIMMEE REALTY, INC.

B Employer identification number
59-3507844

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	145,026
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	104,767		
b	Net rental real estate income (enter losses in Part III)	3b			
c	Other net rental income (enter losses in Part III)	3c			
d	Interest income	3d			
e	Ordinary dividends	3e			
f	Royalties	3f			
g	Net capital gains (enter losses in Part III)	3g			
h	Net section 1231 gain (enter losses in Part III)	3h			
i	Other income (enter losses in Part III)	3i			
j	Excess depletion adjustment	3j			
k	Tax-exempt income	3k			
l	Recapture of business credits	3l			
m	Other items that increase stock basis	3m			
4	Add lines 3a through 3m			4	104,767
5	Stock basis before distributions. Add lines 1, 2, and 4			5	249,793
6	Distributions (excluding dividend distributions)			6	27,473
	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.				
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	222,320
8a	Nondeductible expenses	8a	4,439		
b	Depletion for oil and gas	8b			
c	Business credits (sections 50(c)(1) and (5))	8c			
9	Add lines 8a through 8c			9	4,439
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	217,881
11	Allowable loss and deduction items. Enter the amount from line 47, column (c)			11	3,850
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	3,850
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	214,031

Part II Shareholder Debt Basis

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

	Description	(a) Debt 1 ☐ Formal note ☒ Open account	(b) Debt 2 ☐ Formal note ☐ Open account	(c) Debt 3 ☐ Formal note ☐ Open account	(d) Total
16	Loan balance at the beginning of the corporation's tax year	27			27
17	Additional loans (see instructions)				
18	Loan balance before repayment. Add lines 16 and 17	27			27
19	Principal portion of debt repayment (this line doesn't include interest)	27			27
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	27			27
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	27			27
25	Divide line 24 by line 18	1.0000			
26	Nontaxable debt repayment. Multiply line 25 by line 19	27			27
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	27			27
33	Nontaxable repayments. Enter the amount from line 26	27			27
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					
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	3,850		3,850		
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 on line 11 and enter the total loss in column (d) on line 30	3,850		3,850		

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
PATRICIA L DAUGHERTY

Identifying number
***-**-[redacted]

A Name of S corporation
OLDE KISSIMMEE INVESTMENTS, INC.

B Employer identification number
59-3687893

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	0
2	Basis from any capital contributions made or additional stock acquired during the tax year			2	
3a	Ordinary business income (enter losses in Part III)	3a			
b	Net rental real estate income (enter losses in Part III)	3b	9,627		
c	Other net rental income (enter losses in Part III)	3c			
d	Interest income	3d	96		
e	Ordinary dividends	3e			
f	Royalties	3f			
g	Net capital gains (enter losses in Part III)	3g			
h	Net section 1231 gain (enter losses in Part III)	3h			
i	Other income (enter losses in Part III)	3i			
j	Excess depletion adjustment	3j			
k	Tax-exempt income	3k			
l	Recapture of business credits	3l			
m	Other items that increase stock basis	3m			
4	Add lines 3a through 3m			4	9,723
5	Stock basis before distributions. Add lines 1, 2, and 4			5	9,723
6	Distributions (excluding dividend distributions)			6	
	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.				
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	9,723
8a	Nondeductible expenses	8a	750		
b	Depletion for oil and gas	8b			
c	Business credits (sections 50(c)(1) and (5))	8c			
9	Add lines 8a through 8c			9	750
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	8,973
11	Allowable loss and deduction items. Enter the amount from line 47, column (c)			11	
12	Debt basis restoration (see net increase in instructions for line 23)			12	8,973
13	Other items that decrease stock basis			13	
14	Add lines 11, 12, and 13			14	8,973
15	**Stock basis at the end of the corporation's tax year.** Subtract line 14 from line 10. If the result is zero or less, enter -0-			15	0

Part II Shareholder Debt Basis

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

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

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	309,198			309,198
22	Enter the amount, if any, from line 17				
23	Debt basis restoration (see instructions)	8,973			8,973
24	Debt basis before repayment. Add lines 21, 22, and 23	318,171			318,171
25	Divide line 24 by line 18	0.6300			
26	Nontaxable debt repayment. Multiply line 25 by line 19				
27	Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24	318,171			318,171
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-	318,171			318,171
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-	318,171			318,171

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	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					
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 on line 11 and enter the total loss in column (d) on line 30					

Federal Statements

Attorney

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

Description	Amount
FILING FEES	$ 4,875
TOTAL	$ 4,875

Federal Statements

Statement 2 - Schedule E, Page 2, Line 28

Name	P/S	For Ptr	EIN	Basis Required	Comp Not at Risk	Passive Loss	Passive Income	Nonpass Loss	Sec 179 Deduct	Nonpass Income
OLDE KISSIMMEE INVESTMENTS, INC.	S		59-3687893	X		$	$	$	$	$
RENTAL REAL ESTATE	S		59-3687893	X						9,127
OLDE KISSIMMEE REALTY, INC.	S		59-3507844	X						104,767
OLDE KISSIMMEE INVESTMENTS, INC.	S		59-3687893	X						
RENTAL REAL ESTATE	S		59-3687893	X						9,627
TOTAL						$ 0	$ 0	$ 0	$ 0	$ 123,521

Statement 3 - Form 8995, Line 1 - Trade, Business, or Aggregation Name, Identification Number, and Qualified Business Income or (Loss)

Trade, Business Or Aggregate	Taxpayer Indentification ID	Qualified Business Income
608 JACARANDA LN	***-**-[redacted]	$ -9,908
815 HASTINGS DR	***-**-[redacted]	5,934
910 MABBETTE	59-3687893	4,988
7 AND 11 N. VERNON	59-3687893	4,638
OLDE KISSIMMEE REALTY, INC.	59-3507844	104,767
910 MABBETTE	59-3687893	4,989
7 AND 11 N. VERNON	59-3687893	4,639
PATRICIA L DAUGHERTY, ATTORNEY	59-3717441	41,348
ADVISORY SERVICES	***-**-[redacted]	1,301
TOTAL		$ 162,696

Form 1040	Shareholder's Basis Worksheet Page 1	2023

Name: CHERYL L GRIEB

Taxpayer Identification Number: ***-**-[redacted]

Name of Entity: OLDE KISSIMMEE INVESTMENTS, INC. EIN 59-3687893

Passive Activity Type: REAL ESTATE PROFESSIONAL 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.		0
	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.	9,127	
5.	Other net rental income	5.		
6.	Interest, dividends and royalties	6.	95	
7.	Net capital gains	7.		
8.	Net section 1231 gain and ordinary business gain	8.		
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.		9,222
14.	Stock basis before distributions and items of loss or deductions. Add line 1 and line 13 and enter the result here	14.		9,222
	Decreases to stock basis			
15.	Distributions allowed	15.		
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.		9,222
17.	Losses and deductions applied against stock basis. (See Shareholder Basis Worksheet Page 2)	17.	750	
18.	Other decreases to stock basis	18.		
19.	Amount used to restore loan basis SEE STATEMENT	19.	8,472	
20.	Total decreases (other than distributions) to stock basis. Combine lines 17 through 19	20.		9,222
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.		0

Shareholder Debt Basis

22.	Debt basis at the beginning of corporation's tax year	22.	309,199	
23.	Additional loans	23.		
24.	Debt basis restoration	24.	8,472	
25.	Nontaxable debt repayment	25.		
26.	Debt basis before losses and deductions. Combine lines 22 through 25	26.		317,671
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.		317,671
29.	Stock and debt basis at the end of the year (Add lines 21 and line 28)	29.		317,671

Gain Recognized on Excess Distributions

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

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

Form **1040** | **Shareholder's Basis Worksheet Page 2** | **2023**

Name CHERYL L GRIEB | Id No. ***-**-[redacted]

Entity Name OLDE KISSIMMEE INVESTMENTS, INC. EIN 59-3687893 Passive Activity Type REAL ESTATE PROFESSIONAL K1 Unit 1

BASIS REDUCED BY NONDEDUCTIBLE ITEMS BEFORE LOSS AND DEDUCTION ITEMS

Shareholder Debt Basis

Form 7203 Line #	Description	Debt 1 [X] 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	505,073						505,073
17	Additional loans							
18	Loan balance before repayment. Add lines 16 and 17	505,073						505,073
19	Principal portion of debt repayment (this line doesn't include interest)							
20	Loan balance at the end of the corporation's tax year. Subtract lines 19 from line 18	505,073						505,073
21	Debt basis at the beginning of the corporation's tax year	309,199						309,199
22	Enter the amount, if any, from line 17							
23	Debt basis restoration (see instructions)	8,472						8,472
24	Debt basis before repayment. Add lines 21, 22, and 23	317,671						317,671
25	Divide line 24 by line 18	0.6290						
26	Nontaxable debt repayment. Multiply line 25 by line 19							
27	Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24	317,671						317,671
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-	317,671						317,671
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-	317,671						317,671

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							

Form **1040** | **Shareholder's Basis Worksheet Page 3** | **2023**

Name CHERYL L GRIEB | Id No. ***-**-[redacted]

Entity Name OLDE KISSIMMEE INVESTMENTS, INC. EIN 59-3687893 Passive Activity Type REAL ESTATE PROFESSIONAL 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 noncapital exp & oil/gas depletion deduction:		750	750	1.0000	750					750
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										
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										
Depletion										
Deductions-royalty income										
Section 59(e)(2) expenditures										
Preproductive period exp.										
Reforestation expense ded.										
Other deductions										
Foreign taxes										
Total losses and deductions				1.0000						
Total nonded and deductible items		750	750		750					750

Form 1040	Shareholder's Basis Worksheet Page 1	2023

Name: CHERYL L GRIEB

Taxpayer Identification Number: ***-**-[redacted]

Name of Entity: OLDE KISSIMMEE REALTY, INC. EIN 59-3507844

Passive Activity Type: REAL ESTATE PROFESSIONAL K1 Unit 2

Shareholder Stock Basis

1.	Beginning of year stock basis. Per IRC 1367(a)(2) do not enter an amount below zero		145,026
	Increases to stock basis		
2.	Capital contributions made or additional stock acquired		
3.	Ordinary business income	104,767	
4.	Net rental real estate income		
5.	Other net rental income		
6.	Interest, dividends and royalties		
7.	Net capital gains		
8.	Net section 1231 gain and ordinary business gain		
9.	Tax-exempt interest, other tax-exempt income and recapture credits		
10.	Other income		
11.	Excess of deductions for depletion over basis of property (other than oil and gas)		
12.	Other increases to stock basis		
13.	Total increases to stock basis. Combine lines 2 through 12		104,767
14.	Stock basis before distributions and items of loss or deductions. Add line 1 and line 13 and enter the result here		249,793
	Decreases to stock basis		
15.	Distributions allowed		27,473
16.	Stock basis after distributions and before items of loss or deductions. Subtract line 15 from line 14. If zero or less, enter - 0 -		222,320
17.	Losses and deductions applied against stock basis. (See Shareholder Basis Worksheet Page 2)	8,289	
18.	Other decreases to stock basis		
19.	Amount used to restore loan basis		
20.	Total decreases (other than distributions) to stock basis. Combine lines 17 through 19		8,289
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		214,031

Shareholder Debt Basis

22.	Debt basis at the beginning of corporation's tax year	27	
23.	Additional loans		
24.	Debt basis restoration		
25.	Nontaxable debt repayment	27	
26.	Debt basis before losses and deductions. Combine lines 22 through 25		
27.	Losses and deductions applied against debt basis. (See Shareholder Basis Worksheet Page 3)		
28.	Debt basis at the end of year (Subtract line 28 from line 27).		0
29.	Stock and debt basis at the end of the year (Add lines 21 and line 28)		214,031

Gain Recognized on Excess Distributions

30.	Property distributions reported in Box 16, Code D, Schedule K-1 (1120S)	27,473
31.	Stock basis before distributions and loss items (line 14) less gain from the entire disposition of stock reported on line 18.	249,793
32.	Total gain recognized on excess distributions. (Subtract line 31 from line 30)	0

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

Form **1040** | **Shareholder's Basis Worksheet Page 2** | **2023**

Name CHERYL L GRIEB | Id No. ***-**-[redacted]

Entity Name OLDE KISSIMMEE REALTY, INC. EIN 59-3507844 Passive Activity Type REAL ESTATE PROFESSIONAL K1 Unit 2

BASIS REDUCED BY NONDEDUCTIBLE ITEMS BEFORE LOSS AND DEDUCTION ITEMS

Shareholder Debt Basis

Form 7203 Line #	Description	Debt 1 [ ] Formal note [X] 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	27						27
17	Additional loans							
18	Loan balance before repayment. Add lines 16 and 17	27						27
19	Principal portion of debt repayment (this line doesn't include interest)	27						27
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	27						27
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	27						27
25	Divide line 24 by line 18	1.0000						
26	Nontaxable debt repayment. Multiply line 25 by line 19	27						27
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	27						27
33	Nontaxable repayments. Enter the amount from line 26	27						27
34	**Reportable gain.** Subtract line 33 from line 32							

Form **1040** | **Shareholder's Basis Worksheet Page 3** | **2023**

Name CHERYL L GRIEB | Id No. ***-**-[redacted]

Entity Name OLDE KISSIMMEE REALTY, INC. EIN 59-3507844 Passive Activity Type REAL ESTATE PROFESSIONAL K1 Unit 2

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 noncapital exp & oil/gas depletion deduction:		4,439	4,439	1.0000	4,439					4,439
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										
Cash contributions		3,850	3,850	1.0000	3,850					3,850
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										
Depletion										
Deductions-royalty income										
Section 59(e)(2) expenditures										
Preproductive period exp.										
Reforestation expense ded.										
Other deductions										
Foreign taxes										
Total losses and deductions		3,850	3,850	1.0000	3,850					3,850
Total nonded and deductible items		8,289	8,289		8,289					8,289

Form 1040	Shareholder's Basis Worksheet Page 1	2023

Name: PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**-[redacted]

Name of Entity: OLDE KISSIMMEE INVESTMENTS, INC. EIN 59-3687893

Passive Activity Type: REAL ESTATE PROFESSIONAL K1 Unit 3

Shareholder Stock Basis

1.	Beginning of year stock basis. Per IRC 1367(a)(2) do not enter an amount below zero	1.	0
	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.	9,627
5.	Other net rental income	5.	
6.	Interest, dividends and royalties	6.	96
7.	Net capital gains	7.	
8.	Net section 1231 gain and ordinary business gain	8.	
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.	9,723
14.	Stock basis before distributions and items of loss or deductions. Add line 1 and line 13 and enter the result here	14.	9,723
	Decreases to stock basis		
15.	Distributions allowed	15.	
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.	9,723
17.	Losses and deductions applied against stock basis. (See Shareholder Basis Worksheet Page 2)	17.	750
18.	Other decreases to stock basis	18.	
19.	Amount used to restore loan basis SEE STATEMENT	19.	8,973
20.	Total decreases (other than distributions) to stock basis. Combine lines 17 through 19	20.	9,723
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.	0

Shareholder Debt Basis

22.	Debt basis at the beginning of corporation's tax year	22.	309,198
23.	Additional loans	23.	
24.	Debt basis restoration	24.	8,973
25.	Nontaxable debt repayment	25.	
26.	Debt basis before losses and deductions. Combine lines 22 through 25	26.	318,171
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.	318,171
29.	Stock and debt basis at the end of the year (Add lines 21 and line 28)	29.	318,171

Gain Recognized on Excess Distributions

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

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

Form **1040** | **Shareholder's Basis Worksheet Page 2** | **2023**

Name PATRICIA L DAUGHERTY | Id No. ***-**-[redacted]

Entity Name OLDE KISSIMMEE INVESTMENTS, INC. EIN 59-3687893 Passive Activity Type REAL ESTATE PROFESSIONAL K1 Unit 3

BASIS REDUCED BY NONDEDUCTIBLE ITEMS BEFORE LOSS AND DEDUCTION ITEMS

Shareholder Debt Basis

Form 7203 Line #	Description	Debt 1 [X] 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	505,073						505,073
17	Additional loans							
18	Loan balance before repayment. Add lines 16 and 17	505,073						505,073
19	Principal portion of debt repayment (this line doesn't include interest)							
20	Loan balance at the end of the corporation's tax year. Subtract lines 19 from line 18	505,073						505,073
21	Debt basis at the beginning of the corporation's tax year	309,198						309,198
22	Enter the amount, if any, from line 17							
23	Debt basis restoration (see instructions)	8,973						8,973
24	Debt basis before repayment. Add lines 21, 22, and 23	318,171						318,171
25	Divide line 24 by line 18	0.6300						
26	Nontaxable debt repayment. Multiply line 25 by line 19							
27	Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24	318,171						318,171
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-	318,171						318,171
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-	318,171						318,171

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							

Form **1040** | **Shareholder's Basis Worksheet Page 3** | **2023**

Name PATRICIA L DAUGHERTY | Id No. ***-**-[redacted]

Entity Name OLDE KISSIMMEE INVESTMENTS, INC. EIN 59-3687893 Passive Activity Type REAL ESTATE PROFESSIONAL K1 Unit 3

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 noncapital exp & oil/gas depletion deduction:		750	750	1.0000	750					750
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										
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										
Depletion										
Deductions-royalty income										
Section 59(e)(2) expenditures										
Preproductive period exp.										
Reforestation expense ded.										
Other deductions										
Foreign taxes										
Total losses and deductions				1.0000						
Total nonded and deductible items		750	750		750					750

Federal Statements

OLDE KISSIMMEE INVESTMENTS, INC.

Shareholder's Basis Page 1, Line 19 - Amount Used to Restore Loan

Description	Amount	Amount
1A. BEGINNING LOAN FACE AMOUNT	$ 505,073	$
1B. LESS: BEGINNING OF YEAR LOAN BASIS	309,199	
1. TOTAL BASIS AVAILABLE FOR RESTORATION		195,874
2. TOTAL INCOME AND OTHER INCREASES TO SHAREHOLDER'S BASIS WRK PG 1 LN 3-12	9,222	
3. DISTRIBUTIONS ON SHAREHOLDER'S BASIS WRK PG 1 LN 15		
4. LOSSES AND DEDUCTIONS ON SHAREHOLDER'S BASIS WRK PG 1 LINE 17	-750	
5. OTHER DECREASES ON SHAREHOLDER'S BASIS WRK PG 1 LINE 18		
6. NET INCREASE FOR RESTORATION. COMBINE LINES 2 THROUGH 5		8,472
7. ENTER THE LOWER OF LINE 1 OR LINE 6. LOAN BASIS RESTORED. ENTER ON LINE 19 SHAREHOLDER'S BASIS WRK PG 1		8,472

OLDE KISSIMMEE INVESTMENTS, INC.

Shareholder's Basis Page 1, Line 19 - Amount Used to Restore Loan

Description	Amount	Amount
1A. BEGINNING LOAN FACE AMOUNT	$ 505,073	$
1B. LESS: BEGINNING OF YEAR LOAN BASIS	309,198	
1. TOTAL BASIS AVAILABLE FOR RESTORATION		195,875
2. TOTAL INCOME AND OTHER INCREASES TO SHAREHOLDER'S BASIS WRK PG 1 LN 3-12	9,723	
3. DISTRIBUTIONS ON SHAREHOLDER'S BASIS WRK PG 1 LN 15		
4. LOSSES AND DEDUCTIONS ON SHAREHOLDER'S BASIS WRK PG 1 LINE 17	-750	
5. OTHER DECREASES ON SHAREHOLDER'S BASIS WRK PG 1 LINE 18		
6. NET INCREASE FOR RESTORATION. COMBINE LINES 2 THROUGH 5		8,973
7. ENTER THE LOWER OF LINE 1 OR LINE 6. LOAN BASIS RESTORED. ENTER ON LINE 19 SHAREHOLDER'S BASIS WRK PG 1		8,973

Year Ending: December 31, 2023 ***-**-[redacted]

Cheryl L Grieb & Patricia L Daugherty
612 Lakeshore Blvd
Kissimmee, FL 34744-5747

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.

Year Ending: December 31, 2023 ***-**-[redacted]

Cheryl L Grieb & Patricia L Daugherty
612 Lakeshore Blvd
Kissimmee, FL 34744-5747

Section 1.263(a)-3(h) Safe Harbor Election for Small Taxpayers

The taxpayer hereby elects, pursuant to Regulation 1.263(a)-3(h), to apply the safe harbor provisions to all amounts paid during the tax year for repairs, maintenance, improvements, and similar activities performed on the following eligible building(s).

Schedule E: 608 Jacaranda Ln

608 Jacaranda Ln Kissimmee FL 34744

Year Ending: December 31, 2023 ***-**[redacted]

Cheryl L Grieb & Patricia L Daugherty
612 Lakeshore Blvd
Kissimmee, FL 34744-5747

Section 1.263(a)-3(h) Safe Harbor Election for Small Taxpayers

The taxpayer hereby elects, pursuant to Regulation 1.263(a)-3(h), to apply the safe harbor provisions to all amounts paid during the tax year for repairs, maintenance, improvements, and similar activities performed on the following eligible building(s).

Schedule E: 815 Hastings Dr

815 Hastings Dr Kissimmee FL 34744

Form **1040** | **Auto Worksheet** | **2023**

Name: **CHERYL L GRIEB & PATRICIA L DAUGHERTY**

Taxpayer Identification Number: ***-**-[redacted]

Description: **ATTORNEY**

Form/Schedule: **C** Unit number: **1**

	Asset Listing Number	Date	Description
Vehicle 1	1	09/21/15	VEHICLE
Vehicle 2			
Vehicle 3			
Vehicle 4			

		Vehicle 1	Vehicle 2	Vehicle 3	Vehicle 4
General Information					
1.	Total mileage	10,300			
2.	Business miles before 7/1 (65.5 cents per mile)	9,933			
3.	Commuting mileage				
4.	Other mileage	367			
5.	Business use percentage	96.44 %	%	%	%
Actual Expenses					
6.	Parking fees and tolls	284			
7 a.	Gasoline	2,990			
b.	Oil				
c.	Repairs	3,391			
d.	Maintenance				
e.	Tires				
f.	Car washes				
g.	Insurance	2,170			
h.	Interest				
i.	Registration				
j.	Licenses				
k.	Property taxes				
l.	Other vehicle expenses				
m.	Vehicle rentals (net of inclusion amount)				
8.	Total expenses. Add lines 7a - 7m	8,551			
9.	Business use percentage from line 5	96.44 %	%	%	%
10.	Business use portion of actual expenses	8,247			
11.	Depreciation				
12.	Total actual expense allowable. Add lines 6, 10 and 11	8,531			
Standard Mileage Rate Method					
13.	Business mileage (line 2) multiplied by applicable rate	6,506			
14.	Parking fees and tolls from line 6	284			
15.	Line 7h and 7k (Int & taxes) multiplied by bus pct (line 5)				
16.	Standard mileage rate	6,790			

	Vehicle expense	Vehicle rentals	Vehicle depreciation	Total allowable deduction
Allowable Deduction	8,531			8,531

Form **1040** | **Broker Capital Transactions Detail Summary Report** | **2023**

Name(s) shown on return: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**-[redacted]

	Broker Account Name	Account No.	T/S/J
A	AMERITAS ADVISORY SERVICES	3573	T
B			
C			
D			
E			

	Column A	Column B	Column C	Column D	Column E	Total Col A - E*
Basis reported to the IRS						
Short-term - Sch D line 1a						
Proceeds +						
Basis -						
Gain/-Loss =						0
Long-term - Sch D line 8a						
Proceeds +						
Basis -						
Gain/-Loss =						0
Short-term - 8949 Box A / Sch D line 1b						
Proceeds +						
Basis -						
Adjustment +						
Gain/-Loss =						0
Long-term - 8949 Box D / Sch D line 8b						
Proceeds +	4,000					4,000
Basis -	4,228					4,228
Adjustment +	1					1
Gain/-Loss =	-227					-227
Basis not reported to the IRS						
Short-term - 8949 Box B / Sch D line 2						
Proceeds +						
Basis -						
Adjustment +						
Gain/-Loss =						0
Long-term - 8949 Box E / Sch D line 9						
Proceeds +						
Basis -						
Adjustment +						
Gain/-Loss =						0
Not reported on 1099B/Substitute statement						
Short-term - 8949 Box C / Sch D line 3						
Proceeds +						
Basis -						
Adjustment +						
Gain/-Loss =						0
Long-term - 8949 Box F / Sch D line 10						
Proceeds +						
Basis -						
Adjustment +						
Gain/-Loss =						0
Account Total						
Proceeds +	4,000					4,000
Basis -	4,228					4,228
Adjustment +	1					1
Gain/-Loss =	-227					-227

*Total column completed on last unit

Form **1040** | **Broker Reconciliation Worksheet** | **2023**

Name(s) of Account holder
CHERYL L GRIEB

Taxpayer identification number
***-**-[redacted]

Payer's name
AMERITAS ADVISORY SERVICES

Account number
3573

Form/Schedule/Worksheet	Form/Sch Line No.	Form 1099 Name	Form 1099 Box No(s)	Amount
Schedule B				
Part I - Interest	1	1099-INT	1, 3, 10	13
Part II - Ordinary Dividends	5	1099-DIV	1a	362
Nondividend distributions		1099-DIV	3	
Schedule D				
Short-term 1099B transactions with no adjustments, basis reported to IRS	1a	1099-B		
Long-term 1099B transactions with no adjustments, basis reported to IRS	8a	1099-B		
Part II - Capital gain distributions	13	1099-DIV	2a	587
28% Rate Capital Gain Worksheet (Schedule D, line 18)	1, 4	1099-DIV, B	2d, 3	
Unrecaptured Section 1250 Gain Worksheet (Schedule D, line 19)	11	1099-DIV	2b	
Schedule A				
State and local income taxes withheld	5a	1099 ALL	17, 15, 16	
Foreign tax deduction	6	1099-INT, DIV	6, 7	
Form 1040				
Tax-exempt interest	2a	1099-INT	8	
Tax-exempt interest dividends	2a	1099-DIV	11	
Qualified dividends	3a	1099-DIV	1b	137
Penalty on early withdrawal of savings (Schedule 1)	18	1099-INT	2	
Foreign tax credit (Credit claimed without filing Form 1116) (Schedule 3)	1	1099-INT, DIV	6, 7	
Federal income tax withheld	25b	1099 ALL	4	
Section 199A dividends	13	1099-DIV	5	
Form 1116				
Part II Foreign taxes paid or accrued	8	1099-INT, DIV	6, 7	
Form 6251				
Interest from specified private activity bonds exempt from regular tax	2g	1099-INT	9	
Interest dividends from specified private activity bonds exempt from regular tax	2g	1099-DIV	12	
Form 8949				
Basis reported to IRS				
Short-term - 8949 Box A	1	1099-B		
Short-term - 8949 Box A (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box D	1	1099-B		-227
Long-term - 8949 Box D (column g) - Wash sale loss disallowed *	1	1099-B		-1
Basis not reported to IRS				
Short-term - 8949 Box B	1	1099-B		
Short-term - 8949 Box B (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box E	1	1099-B		
Long-term - 8949 Box E (column g) - Wash sale loss disallowed *	1	1099-B		
Not reported on Form 1099-B				
Short-term - 8949 Box C	1	1099-B		
Short-term - 8949 Box C (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box F	1	1099-B		
Long-term - 8949 Box F (column g) - Wash sale loss disallowed *	1	1099-B		
Long-term - 8949 Box F - Section 1202 gain exclusion adjustment	1	1099-DIV	2c	
Form 6781				
Net section 1256 contracts loss election				
Part I - Section 1256 Contracts Marked to Market	1	1099-B	11	
Form 1099-B adjustments	4			
Net section 1256 contracts loss carry back	6			
Form 4952				
Investment interest expenses - margin interest	1			

* Form 8949 column (g), amount of adjustment, is reported as wash sale loss disallowed for any transaction with a "W" in column (f) Code(s) from instructions. Therefore, transactions with multiple codes in column (f), may not reflect the true disallowed wash sale loss.

Form **1040**	**Qualified Dividends and Capital Gain Tax Worksheet**	**2023**

Name: **CHERYL L GRIEB & PATRICIA L DAUGHERTY**

Taxpayer Identification Number: ***-**-[redacted]

1.	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 15. However, if you are filing Form 2555 (relating to foreign earned income), enter the amount from line 3 of the Foreign Earned Income Tax Worksheet	1.	200,548	
2.	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 3a*	2.	6,599	
3.	Are you filing Schedule D?* ☒ **Yes.** Enter the **smaller** of line 15 or 16 of Schedule D. If either line 15 or 16 is a loss, enter -0- ☐ **No.** Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 7	3.	360	
4.	Add lines 2 and 3	4.	6,959	
5.	Subtract line 4 from line 1. If zero or less, enter -0-	5.	193,589	
6.	Enter: $44,625 if single or married filing separately, $89,250 if married filing jointly or qualifying surviving spouse, $59,750 if head of household.	6.	89,250	
7.	Enter the smaller of line 1 or line 6	7.	89,250	
8.	Enter the smaller of line 5 or line 7	8.	89,250	
9.	Subtract line 8 from line 7. This amount is taxed at 0%	9.	0	
10.	Enter the smaller of line 1 or line 4	10.	6,959	
11.	Enter the amount from line 9	11.	0	
12.	Subtract line 11 from line 10	12.	6,959	
13.	Enter: $492,300 if single, $276,900 if married filing separately, $553,850 if married filing jointly or qualifying surviving spouse, $523,050 if head of household.	13.	553,850	
14.	Enter the smaller of line 1 or line 13	14.	200,548	
15.	Add lines 5 and 9	15.	193,589	
16.	Subtract line 15 from line 14. If zero or less, enter -0-	16.	6,959	
17.	Enter the smaller of line 12 or line 16	17.	6,959	
18.	Multiply line 17 by 15% (0.15)			18. 1,044
19.	Add lines 9 and 17	19.	6,959	
20.	Subtract line 19 from line 10	20.	0	
21.	Multiply line 20 by 20% (0.20)			21. 0
22.	Figure the tax on the amount on line 5. If the amount on line 5 is less than $100,000, use the Tax Table to figure the tax. If the amount on line 5 is $100,000 or more, use the Tax Computation Worksheet			22. 33,261
23.	Add lines 18, 21, and 22			23. 34,305
24.	Figure the tax on the amount on line 1. If the amount on line 1 is less than $100,000, use the Tax Table to figure the tax. If the amount on line 1 is $100,000 or more, use the Tax Computation Worksheet			24. 34,932
25.	**Tax on all taxable income.** Enter the **smaller** of line 23 or line 24. Also include this amount on the entry space on Form 1040, 1040-SR, or 1040-NR, line 16. If you are filing Form 2555, do not enter this amount on the entry space on 1040, 1040-SR, or 1040-NR, line 16. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet			25. 34,305

*If you are filing Form 2555, these lines may be reduced (but not below zero) by your capital gain excess. Please refer to Foreign Earned Income Tax Worksheets - Excess Capital Gain for detail if the lines have been reduced.

Form **1040** | **Standard Deduction & Dependent MAGI Worksheets** | **2023**

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**-[redacted]

Standard Deduction Worksheet

1. Enter the amount shown below for your filing status.
   - Single or Married filing separately - $13,850
   - Married filing jointly or qualifying widow(er) - $27,700
   - Head of household - $20,800

   1. 27,700
2. Can you (or your spouse if married, filing jointly) be claimed as a dependent?
   - [X] **No.** Skip line 3; enter the amount from line 1 on line 4.
   - [ ] **Yes.** Go to line 3.
3. Is your **earned income** more than $850?
   - [ ] **Yes.** Add $400 to your earned income. Enter the total.
   - [ ] **No.** Enter $1,250 ..... 3.
4. Enter the **smaller** of line 1 or line 3. If under 65 and not blind, continue to line 6. **Otherwise,** go to line 5. ..... 4. 27,700
5. Check if: [ ] **You** were 65 or older, [ ] Blind; [X] **Spouse** was 65 or older, [ ] Blind. **Total boxes checked** [1]
   If 65 or older or blind, multiply $1,500 ($1,850 if single or head of household) by the number in the box above 5. 1,500
6. Add lines 4 and 5. Enter the total here and on Form 1040 or 1040-SR, line 12 ..... 6. 29,200

Dependent Modified Adjusted Gross Income Worksheet

1. Are you required to file a tax return?
   - [ ] **No.** Do not include Dependent's modified adjusted gross income in Claiming Taxpayer's household income.
   - [ ] **Yes.** Include Modified Adjusted Gross Income in claiming taxpayer's household income.
2. **Adjusted Gross Income.** Enter the amount from Form 1040, Line 11 ..... 2.
3. Enter tax-exempt interest from Form 1040, line 2a ..... 3.
4. Enter any amounts from your Form 2555, lines 45 and 50 ..... 4.
5. **Subtotal.** Combine lines 2 through 4 ..... 5.
6. Enter the total Social Security benefits from Form 1040, line 6a ..... 6.
7. Enter the taxable Social Security benefits from Form 1040, line 6b ..... 7.
8. Nontaxable Social Security benefits. Subtract line 7 from line 6 ..... 8.
9. **Dependent Modified Adjusted Gross Income for Claiming Taxpayer's Form 8962.**
   Add lines 5 and 8 ..... 9.

Form **1040**

Traditional IRA Deduction Worksheet

2023
Pub 590A

Name
CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number
***-**-[redacted]

		Taxpayer IRA	Spouse's IRA
1a.	Were you covered by a retirement plan? **1a.**	☒ Yes ☐ No	
1b.	If married filing jointly, or married filing separately and you lived with your spouse at any time in 2023, was your spouse covered by a retirement plan? **1b.**		☐ Yes ☒ No

Next: If you checked "No" on line 1a, and "No" on line 1b for married filing joint or married filing separate when required, skip lines 2-6, enter $6500 ($7,500 if 50 or older) on line 7a (and 7b if applicable) and go to line 8. Otherwise, go to line 2.

2. Enter the amount shown below for your filing status.

- Single, head of household, or married filing separately and you **lived apart** from your spouse for all of 2023, enter $83,000
- Qualifying surviving spouse, enter $136,000
- Married filing jointly, enter $136,000 in both columns. But if you checked "No" on either line 1a or 1b, enter $228,000 for the person who was not covered by a plan
- Married filing separately and you lived with your spouse at any time in 2023, enter $10,000

2a.		**2b.**	228,000

3. Add the amounts on Form 1040 or 1040-SR lines 1, 2b, 3b, and 4b or the taxable IRA distribution from the IRA with IRA worksheet from Pub.590-B if applicable, or Schedule 1, line 10. Do not include any foreign earned income exclusion, foreign housing exclusion, exclusion of qualified bond interest shown on Form 8815, or exclusion of employer-paid adoption expenses shown on Form 8839 **3.** 265,530

4. Add amounts on Form 1040 or 1040-SR, Schedule 1, lines 11 through 25. **4.** 3,243

5.	Subtract line 4 from line 3. Enter the result in both columns. If this amount is equal to or more than the amount on line 2, none of your IRA contributions are deductible. **5a.**	**5b.**	262,287
6.	Subtract line 5 from line 2 in each column. **If the result is $10,000 or more ($20,000 if MFJ or QSS and covered by employer plan) enter $6,500 ($7,500 if 50 or older) on line 7 and go to line 8 for that column** **6a.**	**6b.**	
7.	Multiply line 6a and 6b by the percentage that applies. If the result is not a multiple of $10, increase it to the next multiple of $10 (for example, round $490.30 to $500). If the result is $200 or more, enter the result. But if it is less than $200, enter $200. ● MFJ or QSS and covered by emp plan, multiply line 6 by .33 (.38 if 50 or older) ● All others, multiply line 6 by .65 (.75 if 50 or older) **7a.**	**7b.**	
8.	Enter your wages, and your spouse's if filing jointly, and other earned income for Form 1040, minus any deductions on Form 1040, Schedule 1, lines 15 and 16. Do not reduce wages by any loss from self-employment. **8a.**	**8b.**	134,698
9.	Enter traditional IRA contributions made, or that will be made by 4/15/24, for 2023 to your IRA on line 9a and to your spouse's IRA on line 9b **9a.**	**9b.**	7,500
10.	On line 10a, enter the **smallest** of line 7a, line 8a, or line 9a. On line 10b, enter the **smallest** of line 7b, line 8b, or line 9b. This is the most you can deduct. Add the amounts on lines 10a and 10b and enter the total on Form 1040, Schedule 1, line 20. If line 9 is more than line 10, go to line 11. **(If you are the higher income spouse, use the portion of line 8 that represents your compensation. If you are the lower income spouse, line 8 is reduced by your spouse's traditional and Roth IRA contributions.)** **10a.**	**10b.**	0

Nondeductible IRA contributions

11.	Subtract line 10 from the **smaller** of line 8 or 9. Enter on line 1 of your Form 8606 the amount from line 11 you choose to make nondeductible **11a.**	**11b.**	

Form **1040**	**Traditional IRA MAGI Worksheet**	**2023** Pub 590A

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**-[redacted]

Total Income with adjustments for calculating MAGI

1.	Wages	1.	92,049
2.	Taxable interest	2.	858
3.	Ordinary dividends	3.	6,824
4.	State and local tax refunds	4.	
5.	Alimony received	5.	
6.	Business income/loss	6.	45,892
7.	Capital gain/loss	7.	360
8.	Other gains/losses	8.	
9.	Taxable IRA distributions	9.	
10.	Taxable IRA distributions calculated using the IRA with IRA worksheet from Pub. 590-B	10.	
11.	Pensions and annuities	11.	
12.	Rental real estate, royalties, partnerships, S corporations, trusts, etc.	12.	119,547
13.	Farm income/loss	13.	
14.	Unemployment compensation	14.	
15.	Taxable social security benefits	15.	
16.	Other income/loss	16.	
17.	Add: Foreign earned income exclusion	17.	
18.	Foreign housing exclusion	18.	
19.	Exclusion of qualified bond interest shown on Form 8815	19.	
20.	Exclusion of employer-paid adoption expenses shown on Form 8839	20.	
21.	Total income for MAGI calculation, combine lines 1 through 20 **(Traditional IRA Deduction Worksheet line 3)**	21.	265,530

Adjustments for calculating MAGI

22.	Educator expenses	22.	
23.	Certain business expenses from Form 2106	23.	
24.	Health savings account deduction	24.	
25.	Moving expenses	25.	
26.	Deductible part of self-employment tax	26.	3,243
27.	Self-employed SEP, SIMPLE, and qualified plans	27.	
28.	Self-employed health insurance deduction	28.	
29.	Penalty on early withdrawal of savings	29.	
30.	Alimony paid	30.	
31.	Other deductions	31.	
32.	Less: Foreign housing deduction	32.	
33.	Total deductions for MAGI calculation, add lines 22 through 31 and subtract line 32 **(Trad IRA Deduction Worksheet line 4)**	33.	3,243
34.	Modified Adjusted Gross Income MAGI, subtract line 33 from line 21	34.	262,287
35.	Adjustment to modified adjusted gross income from Screen IRA	35.	
36.	Modified Adjusted Gross Income MAGI, combine line 34 and 35 **(Traditional IRA Deduction Worksheet line 5)**	36.	262,287

Form **1040** | **Roth IRA Worksheets** | **2023** Pub 590A

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**-[redacted]

		Taxpayer IRA	Spouse IRA
	Modified adjusted gross income for Roth IRA contributions		

Roth IRA Contribution Worksheet

			Taxpayer IRA	Spouse IRA
1.	Enter your taxable compensation	1.		
2.	Enter the smaller of line 1 or $6500 ($ 7500 if 50 or older)	2.		
3.	Enter your total contributions to traditional IRAs for 2023	3.		
4.	Subtract line 3 from line 2	4.		
5.	Enter: $228,000 if married filing jointly or qualifying surviving spouse; $10,000 if married filing separately and you lived with your spouse at any time during the year. All other filers, enter $153,000	5.		
6.	Enter your modified AGI for purposes of Roth IRAs	6.		
7.	Subtract line 6 from line 5. If zero or less, **stop here;** you may not contribute to a Roth IRA for 2023. See **Recharacterizations** on page 3 of Form 8606 instructions if you made Roth IRA contributions for 2023	7.	0	0
8.	If line 5 above is $153,000, enter $15,000; otherwise, enter $10,000. If line 7 is greater than or equal to line 8, skip lines 9 and 10, and enter the amount from line 4 on line 12	8.		
9.	Divide line 7 by line 8 and enter the result as a decimal (rounded to at least 3 places). Do not enter more than "1.000"	9.		
10.	Multiply line 2 by line 9. If the result is not a multiple of $10, round it up to the next multiple of $10 (e.g., round $611.40 to $620)	10.		
11.	Enter the greater of $200 or the amount on line 10	11.		
12.	**Maximum 2023** Roth IRA contribution. Enter the **smaller** of line 4 or line 11. See **Recharacterizations** on page 3 of Form 8606 instructions if you contributed more than this amount to Roth IRAs for 2023	12.		

		Taxpayer IRA	Spouse IRA
	Modified adjusted gross income for Roth IRA conversions (does not include minimum required distributions)		

Worksheet for Determining Roth IRA Basis Amounts

			Taxpayer IRA	Spouse IRA
1.	Basis in your Roth IRA contributions as of December 31,2022.	1.	1,150	1,150
2.	Enter your Roth IRA contributions for 2023, adjusted for any recharacterizations.	2.		
3.	Add lines 1 and 2.	3.	1,150	1,150
4.	Enter the amount, if any, from Form 8606, line 19.	4.		
5.	Contribution basis loss.	5.		
	Basis in your Roth IRA contributions as of December 31, 2023.			
6.	Subtract lines 4 and 5 from line 3. If zero or less, enter -0-.	6.	1,150	1,150
7.	Basis in your Roth IRA conversions as of December 31, 2022.	7.		
8.	Enter the amount(s), if any, from Form 8606 line 16.	8.		
9.	Add lines 7 and 8.	9.		
10.	Enter the amount, if any, from Form 8606, line 23.	10.		
11.	Conversion basis loss.	11.		
	Basis in your Roth IRA conversions as of December 31, 2023.			
12.	Subtract lines 10 and 11 from line 9. If zero or less, enter -0-.	12.	0	0

Form **1040**	**IRA Compensation Worksheet**	**2023** Pub 590A

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**[redacted]

	Taxpayer	Spouse
Wages	92,049	
Scholarship, fellowship payments, and grants		
Difficulty of care payments		
Alimony received		
Combat pay		
Child non-Self-employment income		
Household income		
Foreign employee compensation		
Ordinary incentive stock option		
Excess utility allowance		
Excess rent allowance		
Foreign noncash allowance		
2106 excess reimbursement		
Excess moving reimbursement		
Workfare	( )	( )
Reserved for future use	( )	( )
Allowable foreign exclusion	( )	( )
Self-Employment income		
Farm income		
Schedule F and Farm Partnership income		
Auto expense from farm partnerships	( )	( )
Section 179 from farm partnerships	( )	( )
Depletion from farm partnerships	( )	( )
Other expenses from farm partnerships	( )	( )
Home office expenses from farm partnerships	( )	( )
Unreimbursed partnership expenses from farm partnerships	( )	( )
Farm income	0	0
Nonfarm income		
Schedule C and Nonfarm Partnership income	1,400	44,492
Auto expense from nonfarm partnerships	( )	( )
Section 179 from nonfarm partnerships	( )	( )
Depletion from nonfarm partnerships	( )	( )
Other expenses from nonfarm partnerships	( )	( )
Home office expenses from nonfarm partnerships	( )	( )
Unreimbursed partnership expenses from nonfarm partnerships	( )	( )
Nonfarm income	1,400	44,492
Self-employment tax deduction	(99)	(3,144)
Self-employed SEP, SIMPLE, and qualified plans deduction	( )	( )
Adjustment from screen IRA		
Total compensation	93,350	41,348

Additional Calculation of Compensation for the Lower Compensated Spouse for IRA Purposes

Compensation for lower compensated spouse from above	41,348
Add: Compensation for higher compensated spouse from above	93,350
Less: IRA contribution for higher compensated spouse	( )
Compensation for lower compensated spouse for IRA purposes	134,698

SPOUSE IS THE LOWER COMPENSATED SPOUSE.

Form 1040	Form 8960 - Net Investment Income Worksheet 1	2023

Name

CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number

***-**-[redacted]

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
ATTORNEY	44,492				-44,492
ADVISORY SERVICES	1,400				-1,400
608 JACARANDA LN	-9,908				9,908
OLDE KISSIMMEE INVESTMENTS, INC.			9,127		-9,127
OLDE KISSIMMEE REALTY, INC.			104,767		-104,767
OLDE KISSIMMEE INVESTMENTS, INC.			9,627		-9,627
Totals	35,984		123,521		
Additional adjustment ▶					
Total adjustment. Enter on Form 8960, line 4b ▶					-159,505

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
Totals					
Adjustment for capital loss carryforward from 2022					
Total capital gain/(loss)			Total ordinary gain/(loss)		
Additional adjustment ▶					
Total net gain or loss from disposition of property not subject to net investment income tax ▶					
Adjustment for capital loss carryover to 2024. Lesser of line 3 or 4 from worksheet below, entered as a negative number ▶					0
Total adjustment. Enter on Form 8960, line 5b ▶					

Adjustment for capital loss carryover to 2024

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

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

Schedule **C** | **Qualified Business Income Calculation Worksheet** | **2023**

Name: **CHERYL L GRIEB & PATRICIA L DAUGHERTY**

Taxpayer Identification Number: ***-**-[redacted]

Principle business or profession: **ATTORNEY**

Form/Schedule: **C**

Unit: **1**

1.	Schedule C, Line 31, Net profit or (loss)	1.	44,492
	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.	3,144
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.	3,144
14.	Qualified business income for this activity. Line 1 plus line 6 less line 13.	14.	41,348

	Beginning of Year			End of Year		
Carryovers:	**Pre -2018**	**After 2017**	**Allowed loss**	**Pre -2018**	**After 2017**	**QBI Portion of**
Passive activity:	**(A)**	**(B)**	**(C)**	**(D)**	**(E)**	**Allowed Losses**
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 **C** | **Qualified Business Income Calculation Worksheet** | **2023**

Name
CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number
***-**-[redacted]

Principle business or profession
ADVISORY SERVICES

Form/Schedule
C

Unit
2

1.	Schedule C, Line 31, Net profit or (loss)	1.	1,400
	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.	99
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.	99
14.	Qualified business income for this activity. Line 1 plus line 6 less line 13.	14.	1,301

	Beginning of Year			End of Year		
Carryovers:	**Pre -2018**	**After 2017**	**Allowed loss**	**Pre -2018**	**After 2017**	**QBI Portion of**
Passive activity:	**(A)**	**(B)**	**(C)**	**(D)**	**(E)**	**Allowed Losses**
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**	**Qualified Business Income Calculation Worksheet**	**2023**

Name: **CHERYL L GRIEB & PATRICIA L DAUGHERTY**

Taxpayer Identification Number: ***-**-[redacted]

Property Description	Form/Schedule	Unit
608 JACARANDA LN	E	1

1.	Schedule E, Page 1, Net rental real estate income or (loss)	1.	-9,908
	Additions for qualified business income:		
2.	Form 4797, Ordinary income	2.	
	Prior year suspended losses utilized this year:		
3.	Passive suspended losses	3.	
4.	At-Risk suspended losses	4.	
5.	Section 179 expense	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 1231 loss)	7.	
8.	Reserved	8.	
9.	Reserved	9.	
10.	Total subtraction to net profit or (loss). Add lines 7 through 9.	10.	
11.	Qualified business income for this activity. Line 1 plus line 6 less line 10.	11.	-9,908

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

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

Schedule **E**	**Qualified Business Income Calculation Worksheet**	**2023**

Name: **CHERYL L GRIEB & PATRICIA L DAUGHERTY**

Taxpayer Identification Number: ***-**-[redacted]

Property Description: **815 HASTINGS DR**

Form/Schedule: **E**

Unit: **2**

1.	Schedule E, Page 1, Net rental real estate income or (loss)	**1.**	5,934
	Additions for qualified business income:		
2.	Form 4797, Ordinary income	**2.**	
	Prior year suspended losses utilized this year:		
3.	Passive suspended losses	**3.**	
4.	At-Risk suspended losses	**4.**	
5.	Section 179 expense	**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 1231 loss)	**7.**	
8.	Reserved	**8.**	
9.	Reserved	**9.**	
10.	Total subtraction to net profit or (loss). Add lines 7 through 9.	**10.**	
11.	Qualified business income for this activity. Line 1 plus line 6 less line 10.	**11.**	5,934

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

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

2023

Name CHERYL L GRIEB | Taxpayer Identification Number ***-**-5052

Entity Name OLDE KISSIMMEE INVESTMENTS, INC. **EIN** 59-3687893 **Entity Type** S CORPORATION **Screen** K1 **K1 Unit** 1

Activity **Passive Activity Type** REAL ESTATE PROFESSIONAL **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: Passive / 179	Basis	At-risk
Ordinary business inc/-loss									
Net rental real estate inc/-loss	9,626	9,127				9,626			
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						9,626			

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

2023

Name CHERYL L GRIEB | Taxpayer Identification Number ***-**-[redacted]

Entity Name OLDE KISSIMMEE REALTY, INC. | **EIN** 59-3507844 | **Entity Type** S CORPORATION | **Screen** K1 | **K1 Unit** 2

Activity | **Passive Activity Type** REAL ESTATE PROFESSIONAL | **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: Passive / 179	Basis	At-risk
Ordinary business inc/-loss	104,767	104,767				104,767			
Net rental real estate inc/-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 acquisit									
Deductible part of SE tax									
Self-employed health insurance									
Self-employed qualified plans									
Ordinary gains on distribution									
Total Qualified Business Income						104,767			

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

2023

Name PATRICIA L DAUGHERTY | Taxpayer Identification Number ***-**-[redacted]

Entity Name OLDE KISSIMMEE INVESTMENTS, INC. **EIN** 59-3687893 **Entity Type** S CORPORATION **Screen** K1 **K1 Unit** 3

Activity **Passive Activity Type** REAL ESTATE PROFESSIONAL **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: Passive / 179	Basis	At-risk
Ordinary business inc/-loss									
Net rental real estate inc/-loss	9,628	9,627				9,628			
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						9,628			

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 - Totals** | **2023**

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer identification number: ***-**-[redacted]

Entity Name OLDE KISSIMMEE INVESTMENTS, INC. **EIN** 59-3687893 **Entity Type** S CORPORATION

	Activity Description	PTP	Aggregated	SSTB
Column A	910 MABBETTE	☐	☐	☐
Column B	7 AND 11 N. VERNON	☐	☐	☐
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)					
Net rental real estate income (loss)	4,988	4,638			
Other net rental income (loss)					
Royalty income (loss)					
Other income (loss) to Schedule E					
Other income (loss) to 1040 Statement 1					
Section 179 expense					
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	4,988	4,638			
Passive - post-TCJA carryover allowed					
Basis - post-TCJA carryover allowed					
At-risk - post-TCJA carryover allowed					
W-2 wages					
Qualified property	235,755	172,452			

Other Information:

QBI allocable to cooperative pmts received

W-2 wages allocable to qualified payments

Section 199A(g) deduction

Schedule **E** | **K-1 Reconciliation Worksheet - Qualified Business Income - Totals** | **2023**

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer identification number: ***-**-[redacted]

Entity Name OLDE KISSIMMEE INVESTMENTS, INC. **EIN** 59-3687893 **Entity Type** S CORPORATION

	Activity Description	PTP	Aggregated	SSTB
Column A	910 MABBETTE	☐	☐	☐
Column B	7 AND 11 N. VERNON	☐	☐	☐
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)					
Net rental real estate income (loss)	4,989	4,639			
Other net rental income (loss)					
Royalty income (loss)					
Other income (loss) to Schedule E					
Other income (loss) to 1040 Statement 1					
Section 179 expense					
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	4,989	4,639			
Passive - post-TCJA carryover allowed					
Basis - post-TCJA carryover allowed					
At-risk - post-TCJA carryover allowed					
W-2 wages					
Qualified property	235,756	172,453			

Other Information:

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

Form **1040** | **Rent and Royalty Reconciliation** | **2023**

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer identification number: ***-**-[redacted]

Property description: 608 JACARANDA LN

Passive type: REAL ESTATE PROFESSIONAL

Unit 1 | T, S, J _ | State

Ownership Percentage _____

Business Use Percentage _____

Personal Use Percentage _____

1. Physical address:
   - Street: 608 JACARANDA LN
   - City, state, zip: KISSIMMEE FL 34744
   - Property type: SINGLE FAMILY RESIDENCE

2. Property Use Information:
   - Fair Rental Days: 365
   - Personal Use Days: ____
   - QJV: _

	Column A	Column B	Column C	(Column A - B - C)
Income:	**Total Income/Expense**	**Nonbusiness Expenses**	**Vacation Home / Personal Use Expenses**	**Income / Expenses Reported on Schedule E**
3. Rents received	13,000			13,000
4. Royalties received				
Expenses:				
5. Advertising				
Auto				
Travel				
6. Auto and travel (total)				
7. Cleaning and maintenance	851			851
8. Commissions				
9. Insurance	3,541			3,541
10. Legal and other professional fees				
11. Management fees				
Mortgage interest from 1098				
Refinancing points on 1098				
12. Mortgage interest paid to banks, etc.				
Other mortgage interest				
Other interest				
Refinancing points				
Qualified mortgage insurance				
13. Other interest (total)				
14. Repairs	13,493			13,493
15. Supplies				
Real estate taxes				
All other taxes	2,605			
16. Taxes (total)	2,605			2,605
17. Utilities				
18. Depreciation expense or depletion	2,418			2,418
19. Other (list)				
20. Total expenses. Add lines 5 through 19	22,908			22,908
21. Income or (loss) from rental or royalty properties.				-9,908

Form **1040** | **Rent and Royalty Reconciliation** | **2023**

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer identification number: ***-**-[redacted]

Property description: 815 HASTINGS DR

Passive type: REAL ESTATE PROFESSIONAL

Unit 2 | T, S, J | State

Ownership Percentage | Business Use Percentage | Personal Use Percentage

1. Physical address:
   - Street: 815 HASTINGS DR
   - City, state, zip: KISSIMMEE FL 34744
   - Property type: SINGLE FAMILY RESIDENCE

2. Property Use Information:
   - Fair Rental Days: 365
   - Personal Use Days:
   - QJV:

	Column A	Column B	Column C	(Column A - B - C)
Income:	**Total Income/Expense**	**Nonbusiness Expenses**	**Vacation Home / Personal Use Expenses**	**Income / Expenses Reported on Schedule E**
3. Rents received	18,000			18,000
4. Royalties received				
Expenses:				
5. Advertising				
Auto				
Travel				
6. Auto and travel (total)				
7. Cleaning and maintenance	417			417
8. Commissions				
9. Insurance	3,582			3,582
10. Legal and other professional fees				
11. Management fees				
Mortgage interest from 1098				
Refinancing points on 1098				
12. Mortgage interest paid to banks, etc.				
Other mortgage interest				
Other interest				
Refinancing points				
Qualified mortgage insurance				
13. Other interest (total)				
14. Repairs	1,720			1,720
15. Supplies				
Real estate taxes				
All other taxes	3,082			
16. Taxes (total)	3,082			3,082
17. Utilities				
18. Depreciation expense or depletion	3,265			3,265
19. Other (list)				
20. Total expenses. Add lines 5 through 19	12,066			12,066
21. Income or (loss) from rental or royalty properties.				5,934

Form **1040**	**Net Earnings from Self-Employment Worksheet**	**2023**

Name: **CHERYL L GRIEB & PATRICIA L DAUGHERTY**

Taxpayer Identification Number: ***-**-[redacted]

	Taxpayer	Spouse
Farm profit or (loss)		
Schedule F		
Farm Partnerships - Schedule K-1, box 14, code A		
Auto expense from farm partnerships	( )	( )
Amortization from farm partnerships	( )	( )
Depreciation & Section 179 from farm partnerships	( )	( )
Depletion from farm partnerships	( )	( )
Other expenses from farm partnerships	( )	( )
Home office expenses from farm partnerships	( )	( )
Unreimbursed partnership expenses from farm partnerships	( )	( )
Debt financed acquisition interest from farm partnerships	( )	( )
Farm adjustment to SE Income		
Net farm profit or (loss) - Schedule SE line 1a	0	0
Conservation Reserve Program payments to social security/disability benefit recipients included on Sch F, ln 4b or listed on Sch K-1 (Form 1065), box 20, code AH- Sch SE line 1b	(0)	(0)
Nonfarm profit or (loss)		
Schedule C (excluding minister Schedule C income reported below)	1,400	44,492
Nonfarm partnerships - Schedule K-1, box 14, code A		
Auto expense from nonfarm partnerships	( )	( )
Amortization from nonfarm partnerships	( )	( )
Depreciation & section 179 from nonfarm partnerships	( )	( )
Depletion from nonfarm partnerships	( )	( )
Other expenses from nonfarm partnerships	( )	( )
Home office expenses from nonfarm partnerships	( )	( )
Unreimbursed partnership expenses from nonfarm partnerships	( )	( )
Debt financed acquisition interest from nonfarm partnerships	( )	( )
Nonfarm adjustment to SE income		
Self-employment income reported as other income		
Self-employment income from contracts and straddles		
Minister/clergy self-employment income (from Clergy Worksheet Page 3, line 7)		
Net nonfarm profit or (loss) - Schedule SE line 2	1,400	44,492
Other income items subject to and/or exempt from self-employment tax		
Fees received for services performed as a notary public	( )	( )
Earnings while debtor in a chapter 11 bankruptcy case		
Taxable community property income/-loss		
Exempt community property income/-loss	( )	( )
Net adjustment included on Schedule SE, line 3	0	0
Net profit (loss) from self-employment activities - Schedule SE line 3	1,400	44,492
Church employee income - Schedule SE, Page 1 line 5a		

Federal Statements

Form 1040, Dividend Income

Payer	Ordinary Dividends	Qualified Dividends	Section 199A Dividends
AT&T	$ 411	$ 411	$
PUBLIC SERVICE ENTERPRISE	6,051	6,051	
AMERITAS ADVISORY SERVICES (3573)	362	137	
TOTAL	$ 6,824	$ 6,599	$

Form 1040, Line 7 - Capital Gain Distributions

Payer	Capital Gain Distribution
AMERITAS ADVISORY SERVICES (3573)	$ 587
TOTAL	$ 587

Form 1040, Line 26 - Estimated Tax Payments and Amount Applied From Previous Year

Description	Amount
1ST QUARTER ESTIMATE PAYMENT	$ 5,800
2ND QUARTER ESTIMATE PAYMENT	5,800
3RD QUARTER ESTIMATE PAYMENT	5,800
4TH QUARTER ESTIMATE PAYMENT	5,800
TOTAL	$ 23,200

Federal Statements

608 Jacaranda Ln

Schedule E, Line 9 - Insurance

Description	Gross Amount	Business Use Percentage	Net Amount
INSURANCE (RENT, 1)	$ 3,541		$ 3,541
TOTAL	$ 3,541		$ 3,541

815 Hastings Dr

Schedule E, Line 9 - Insurance

Description	Gross Amount	Business Use Percentage	Net Amount
INSURANCE (RENT, 2)	$ 3,582		$ 3,582
TOTAL	$ 3,582		$ 3,582

Federal Statements

Schedule E, Line 43 - Reconciliation for Real Estate Professionals

Activity Name	Screen	Unit #	Current Year Net Income	Current Year Net Loss	Form Location
608 JACARANDA LN	E	1	$	$ 9,908	SCH E PG 1
815 HASTINGS DR	E	2	5,934		SCH E PG 1
OLDE KISSIMMEE INVESTMENTS, INC.	K-1	1	9,127		SCH E PG 2
OLDE KISSIMMEE REALTY, INC.	K-1	2	104,767		SCH E PG 2
OLDE KISSIMMEE INVESTMENTS, INC.	K-1	3	9,627		SCH E PG 2
TOTAL			$ 129,455	$ 9,908	

Federal Statements

Osceola County Board of County

Form W-2, Box 12

Description	Amount
COST OF EMPLOYER-SPONSORED HEALTH COVERAGE	$ 18,608
COST OF GROUP TERM LIFE INSURANCE COVERAGE OVER 50,000	266
SECTION 457(B) CONTRIBUTIONS	13,000
TOTAL	$ 31,874

Attorney

Office

Description	Amount
POSTAGE DELIVERY	$ 1,154
DUES	947
COMPUTER	3,224
OFFICE EXPENSES	1,581
TOTAL	$ 6,906

***-**-[redacted]

Federal Asset Report

Attorney

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Prior MACRS:												
2	Computer	2/12/14	1,797			X	898	5	HY	200DB	1,797	0
3	Compter Equipment	11/18/19	962			X	0	5	HY	200DB	962	0
			2,759				898				2,759	0
Listed Property:												
1	Vehicle	9/21/15	0	96.44			0	0	HY		0	0
			0				0				0	0
	Grand Totals		2,759				898				2,759	0
	Less: Dispositions and Transfers		0				0				0	0
	Less: Start-up/Org Expense		0				0				0	0
	Net Grand Totals		2,759				898				2,759	0

***-**-[redacted]

Federal Asset Report

608 Jacaranda Ln

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Prior MACRS:											
1	House	6/09/14	54,830			54,830	27	MM	S/L	17,032	1,994
2	AC	6/23/15	3,700			3,700	27	MM	S/L	1,018	134
3	Roof	7/22/19	7,990			7,990	27	MM	S/L	1,006	290
			66,520			66,520				19,056	2,418
	Grand Totals		66,520			66,520				19,056	2,418
	Less: Dispositions and Transfers		0			0				0	0
	Less: Start-up/Org Expense		0			0				0	0
	Net Grand Totals		66,520			66,520				19,056	2,418

***-**-[redacted]

Federal Asset Report

815 Hastings Dr

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Prior MACRS:											
1	Building	3/31/17	89,785			89,785	27	MM	S/L	18,910	3,265
			89,785			89,785				18,910	3,265
	Grand Totals		89,785			89,785				18,910	3,265
	Less: Dispositions and Transfers		0			0				0	0
	Less: Start-up/Org Expense		0			0				0	0
	Net Grand Totals		89,785			89,785				18,910	3,265

Form **1040** | **Salaries & Wages Report** | **2023**

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**-[redacted]

	T/S	Employer	Federal Wages	Federal Withheld	Soc Sec Wages
A	T	OLDE KISSIMMEE REALTY, INC.	10,000	3,000	10,000
B	T	OSCEOLA COUNTY BOARD OF COUNTY	82,049	14,803	98,083
C					
D					
E					
F					
G					
H					
I					
J					
K					
L					
M					
Taxpayer			92,049	17,803	108,083
Spouse					
Totals			92,049	17,803	108,083

	Soc Sec Withheld	Medicare Wages	Medicare Withheld	Soc Sec Tips	Allocated Tips	Dep Care Ben	Other, Box 14
A	620	10,000	145				
B	6,081	98,083	1,422				
C							
D							
E							
F							
G							
H							
I							
J							
K							
L							
M							
Taxpayer	6,701	108,083	1,567				
Spouse							
Totals	6,701	108,083	1,567				

	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** | **Withholding (WH) Summary Report** | **2023**

Name
CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number
***-**-[redacted]

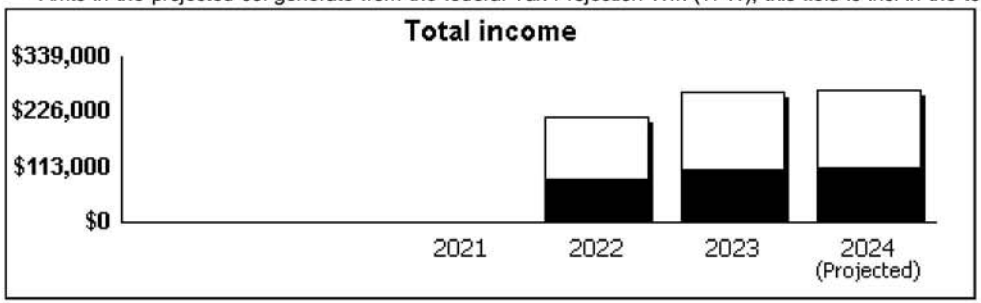
T/S	Description	Form	Federal WH	State WH	Local WH
T	OLDE KISSIMMEE REALTY, INC.	W-2	3,000		
T	OSCEOLA COUNTY BOARD OF COUNTY	W-2	14,803		

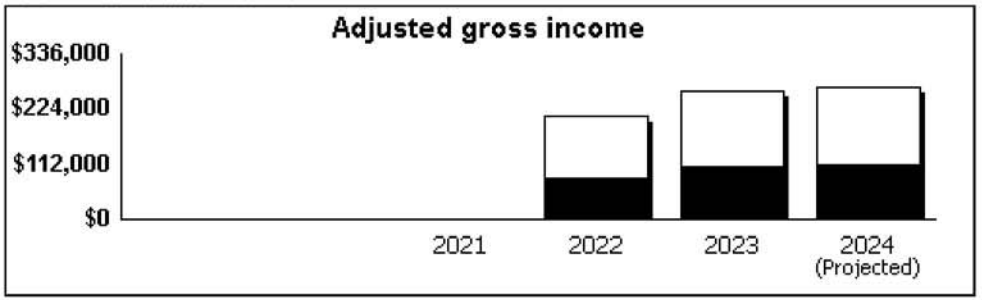
Form **1040** | **Tax Return History Report - Page 1** | **2023**

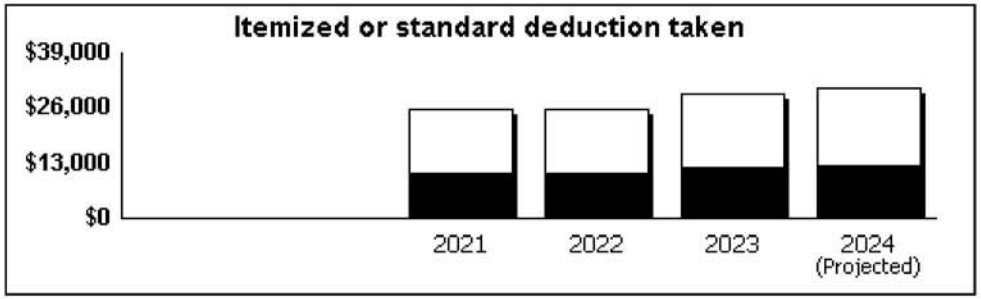
Name **CHERYL L GRIEB & PATRICIA L DAUGHERTY** | Taxpayer Identification Number ***-**-[redacted]

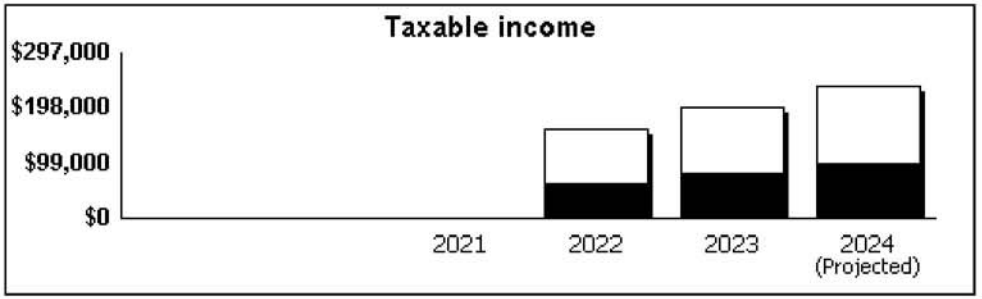
			2021	2022	2023	2024 PROJECTED
Filing Status			MFJ	MFJ	MFJ	MFJ
Salaries and wages				84,233	92,049	92,049
Interest income				1,291	858	858
Dividend income				6,243	6,824	6,824
Business income/loss				67,974	45,892	21,400
Capital gains/losses				722	360	
Other gains/losses						
IRA distributions, pensions, annuities						12,000
Rent, royalty, farm rental income				11,171	-3,974	119,547
Partnership/S corp income				45,537	123,521	*
Estate or trust income						*
Farm income/loss						
Other income/loss						17,000
Total income				217,171	265,530	269,678
Total adjustments				5,952	3,243	1,512
Adjusted gross income				211,219	262,287	268,166
Allowable itemized deductions			265	11,050	8,116	8,116
Standard deduction			12,550	25,900	29,200	30,750
Itemized or standard deduction taken			25,700	25,900	29,200	30,750
Exemptions						
Taxable income before Qual Bus Inc Ded				185,319	233,087	237,416
Qual Bus Inc Ded				23,976	32,539	
Taxable income				161,343	200,548	237,416

* Amts in the projected col generate from the federal Tax Projection Wrk (TPW); this field is incl in the total Sch E income/loss amt on the TPW.





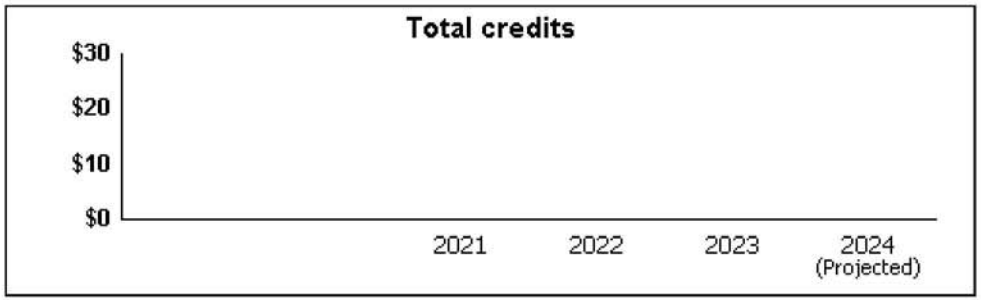


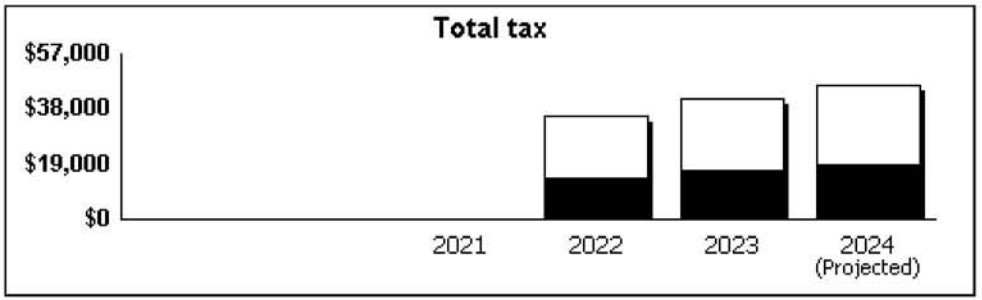


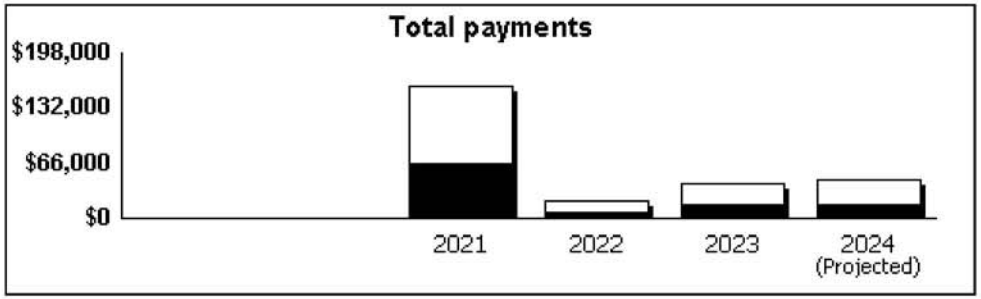
Form **1040** | **Tax Return History Report - Page 2** | **2023**

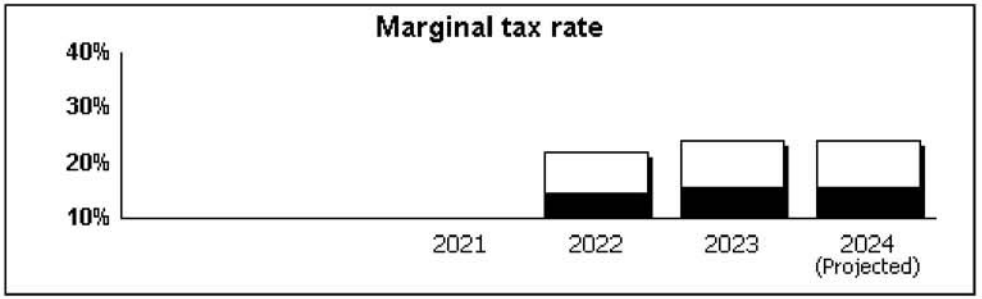
Name **CHERYL L GRIEB & PATRICIA L DAUGHERTY** | Taxpayer Identification Number ***-**-[redacted]

			2021	2022	2023	2024 PROJECTED
Taxable income				161,343	200,548	237,416
Tax on taxable income and Form 8962				26,251	34,305	42,471
Alternative minimum tax						
Total credits						
Net tax liability				26,251	34,305	42,471
Self-employment taxes				9,604	6,484	3,023
Other taxes					467	517
Total tax				35,855	41,256	46,011
Income tax withheld				16,559	17,803	17,803
Estimated tax payments				3,975	23,200	28,400
Other payments			1,400			
Total payments			158,006	20,534	41,003	46,203
Total due/-refund			-158,006	15,321	253	-192
Penalties and interest				219		
Net tax due/-refund			-158,006	15,540	253	-192
Refund applied to estimated tax payments						
Refund received			-158,006			
Marginal tax rate	%	%	%	22.0%	24.0%	24.0%
Effective tax rate	%	%	%	22.0%	21.0%	19.0%









Form **1040** | **Reconciliation Worksheet - Taxable Income & Tax** | **2023**

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**-[redacted]

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 (ln 27) divided Total Taxable Income (ln 19) 17.0 %

Tax Method QUALIFIED DIVIDENDS & CAPITAL GAIN 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	193,589	24.0 %	33,261	$190,750 - $364,200	170,611
Capital Income	6,959	15.0 %	1,044	$89,450 - $693,750	686,791
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: $22,000	1a.	22,000	1b.	2,203
2. 12% rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: $67,450	2a.	67,450	2b.	8,097
3. 22% rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: $101,300	3a.	101,300	3b.	22,280
4. 24% rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: $173,450	4a.	2,839	4b.	681
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.	193,589	8b.	33,261
Income taxed at capital gains rates				
9. 0% capital gains rate	9a.		9b.	
10. 15% capital gains rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: $464,600	10a.	6,959	10b.	1,044
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.	6,959	14b.	1,044

Total taxable income		
15. Total ordinary taxable income. Enter the amount from line 8a.	15.	193,589
16. Total capital gains taxable income. Enter the amount from line 14a.	16.	6,959
17. Add lines 15 and 16.	17.	200,548
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.	200,548
Total tax		
20. Total ordinary tax. Enter the amount from line 8b.	20.	33,261
21. Total capital gains tax. Enter the amount from line 14b.	21.	1,044
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.	34,305
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.	34,305

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

Name: CHERYL L GRIEB & PATRICIA L DAUGHERTY

Taxpayer Identification Number: ***-**-[redacted]

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 projected 2024 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 (ln 24) divided by Total Taxable Income (ln 19) 18.0 %

Tax Method CAPITAL GAINS RATE TAX

___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	Tax Rate Marginal	Tax on Taxable Income	Marginal Tax Rate - Income Range	Amount of Income to Next Tax Bracket
Ordinary Income	230,817	24.0 %	41,481	$201,050 - $383,900	153,083
Capital Income	6,599	15.0 %	990	$94,050 - $583,750	577,151
Capital Income - 1250		%			
Capital Income - 1202		%			

		(a) Taxable Income		(b) Tax
Projected Income taxed at ordinary rates				
1. 10.0% rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: $23,200	1a.	23,200	1b.	2,320
2. 12.0% rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: $71,100	2a.	71,100	2b.	8,532
3. 22.0% rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: $106,750	3a.	106,750	3b.	23,485
4. 24.0% rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: $182,850	4a.	29,767	4b.	7,144
5. 32.0% rate	5a.		5b.	
6. 35.0% rate	6a.		6b.	
7. 37.0% rate	7a.		7b.	
8. **Total projected ordinary taxable income and ordinary tax.** Add lines 1 through 7.	8a.	230,817	8b.	41,481
Projected Income taxed at capital gains rates				
9. 0% capital gains rate	9a.		9b.	
10. 15% capital gains rate MAXIMUM TAXABLE INCOME PER THIS BRACKET: $489,700	10a.	6,599	10b.	990
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 projected taxable capital gains and capital gains tax.** Add lines 9 through 13.	14a.	6,599	14b.	990

Total projected taxable income		
15. Total ordinary taxable income. Enter the amount from line 8a.	15.	230,817
16. Total capital gains taxable income. Enter the amount from line 14a.	16.	6,599
17. Add lines 15 and 16.	17.	237,416
18. Enter the net foreign exclusion amount from the Foreign Earned Income Tax Worksheet, line 2c.	18.	
19. **Projected taxable income** reported on Federal Tax Projection Worksheet. Subtract line 18 from line 17.	19.	237,416
Total projected tax		
20. Total ordinary tax. Enter the amount from line 8b.	20.	41,481
21. Total capital gains tax. Enter the amount from line 14b.	21.	990
22. Add lines 20 and 21.	22.	42,471
23. Enter the tax allocated to the net exclusion amount from the Tax Projection Foreign Earned Earned Income Tax Worksheet, line 5.	23.	
24. **Total projected 2024 tax** reported on Federal Tax Projection Worksheet 2. Subtract line 23 from line 22	24.	42,471

Electronic Filing	Electronic Funds Withdrawal	2023

Name	Taxpayer Identification Number
CHERYL L GRIEB & PATRICIA L DAUGHERTY	***-**-[redacted]

Form Payment Record

This record is included with the IRS electronic file for taxpayers who elect to pay their tax balances by electronic funds withdrawal

Taxpayer SSN	***-**-[redacted]
Spouse SSN	***-**-[redacted]
Taxpayer Daytime Phone Number	407-944-4822
Routing Transit Number	[redacted]
Bank Account Number	*****[redacted]
Type of Account (1 = Checking, 2 = Savings)	1
Amount of Tax Payment	253
Payment Type	1040
Requested Payment Date	04/15/24

DO NOT SUBMIT THIS DOCUMENT TO IRS

Electronic Filing	Electronic Funds Withdrawal	2023

Name	Taxpayer Identification Number
CHERYL L GRIEB & PATRICIA L DAUGHERTY	***-**-[redacted]

Form Payment Record

This record is included with the IRS electronic file for taxpayers who elect to pay their tax balances by electronic funds withdrawal

Taxpayer SSN	***-**-[redacted]
Spouse SSN	***-**-[redacted]
Taxpayer Daytime Phone Number	407-944-4822
Routing Transit Number	[redacted]
Bank Account Number	*****[redacted]
Type of Account (1 = Checking, 2 = Savings)	1
Amount of Tax Payment	7,100
Payment Type	1040-ES
Requested Payment Date	04/15/24

DO NOT SUBMIT THIS DOCUMENT TO IRS

Electronic Filing	Electronic Funds Withdrawal	2023

Name	Taxpayer Identification Number
CHERYL L GRIEB & PATRICIA L DAUGHERTY	***-**-[redacted]

Form Payment Record

This record is included with the IRS electronic file for taxpayers who elect to pay their tax balances by electronic funds withdrawal

Taxpayer SSN	***-**-[redacted]
Spouse SSN	***-**-[redacted]
Taxpayer Daytime Phone Number	407-944-4822
Routing Transit Number	[redacted]
Bank Account Number	*****[redacted]
Type of Account (1 = Checking, 2 = Savings)	1
Amount of Tax Payment	7,100
Payment Type	1040-ES
Requested Payment Date	06/17/24

DO NOT SUBMIT THIS DOCUMENT TO IRS

Electronic Filing	Electronic Funds Withdrawal	2023

Name	Taxpayer Identification Number
CHERYL L GRIEB & PATRICIA L DAUGHERTY	***-**-[redacted]

Form Payment Record

This record is included with the IRS electronic file for taxpayers who elect to pay their tax balances by electronic funds withdrawal

Taxpayer SSN	***-**-[redacted]
Spouse SSN	***-**-[redacted]
Taxpayer Daytime Phone Number	407-944-4822
Routing Transit Number	[redacted]
Bank Account Number	*****[redacted]
Type of Account (1 = Checking, 2 = Savings)	1
Amount of Tax Payment	7,100
Payment Type	1040-ES
Requested Payment Date	09/16/24

DO NOT SUBMIT THIS DOCUMENT TO IRS

Electronic Filing	Electronic Funds Withdrawal	2023

Name	Taxpayer Identification Number
CHERYL L GRIEB & PATRICIA L DAUGHERTY	***-**-[redacted]

Form Payment Record

This record is included with the IRS electronic file for taxpayers who elect to pay their tax balances by electronic funds withdrawal

Taxpayer SSN	***-**-[redacted]
Spouse SSN	***-**-[redacted]
Taxpayer Daytime Phone Number	407-944-4822
Routing Transit Number	[redacted]
Bank Account Number	*****[redacted]
Type of Account (1 = Checking, 2 = Savings)	1
Amount of Tax Payment	7,100
Payment Type	1040-ES
Requested Payment Date	01/15/25

DO NOT SUBMIT THIS DOCUMENT TO IRS

Form 1040	Two Year Comparison Report - Schedule C	2022 & 2023

Name: PATRICIA L DAUGHERTY

Taxpayer identification number: ***-**-[redacted]

Principal business or profession: ATTORNEY

Unit: 1

		2022	2023	Differences
Income				
1. Gross receipts or sales	1.	130,653	107,427	-23,226
2. Returns and allowances	2.			
3. **Cost of goods sold**	3.	10,043	4,875	-5,168
4. **Gross profit**	4.	120,610	102,552	-18,058
5. Other income	5.			
6. **Gross income**	6.	120,610	102,552	-18,058
Expenses				
7. Advertising	7.		200	200
8. Car and truck expenses	8.	6,306	8,531	2,225
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.	5,373	5,949	576
15. Interest - mortgage (paid to banks, etc.)	15.			
16. Interest - other	16.			
17. Legal and professional services	17.	7,623	6,205	-1,418
18. Office expense	18.	4,418	6,906	2,488
19. Pension and profit-sharing plans	19.			
20. Rent or lease - vehicles, machinery, and equipment	20.			
21. Rent or lease - other business property	21.	6,420	6,415	-5
22. Repairs and maintenance	22.	100	200	100
23. Supplies (not included in cost of goods sold)	23.	2,126	1,951	-175
24. Taxes and licenses	24.	756	1,471	715
25. Travel	25.			
26. Total meals and entertainment	26.	1,094	1,377	283
26a. Nondeductible meals and entertainment	26a.		688	688
26b. Deductible meals and entertainment	26b.	1,094	689	-405
27. Utilities	27.	2,766	2,125	-641
28. Wages (less employment credits)	28.	16,704	17,418	714
29. Other expenses	29.			
30. Energy efficient commercial buildings deduction (Form 7205)	30.			
31. **Total expenses**	31.	53,686	58,060	4,374
Profit/ (loss)				
32. Tentative profit (loss)	32.	66,924	44,492	-22,432
33. Expenses for business use of home	33.			
34. **Net profit or (loss)**	34.	66,924	44,492	-22,432
Cost of Goods Sold				
35. Inventory - Beginning of year	35.			
36. Purchases	36.			
37. Labor	37.			
38. Materials	38.			
39. Other costs	39.	10,043	4,875	-5,168
40. **Goods available for sale (sum of lines 34-38)**	40.	10,043	4,875	-5,168
41. Inventory - End of year	41.			

Form 1040	Two Year Comparison Report - Schedule C	2022 & 2023

Name: CHERYL L GRIEB

Taxpayer identification number: ***-**-[redacted]

Principal business or profession: ADVISORY SERVICES

Unit: 2

Income		2022	2023	Differences
1. Gross receipts or sales	1.	1,050	1,400	350
2. Returns and allowances	2.			
3. **Cost of goods sold**	3.			
4. **Gross profit**	4.	1,050	1,400	350
5. Other income	5.			
6. **Gross income**	6.	1,050	1,400	350
Expenses				
7. Advertising	7.			
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.			
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.			
22. Repairs and maintenance	22.			
23. Supplies (not included in cost of goods sold)	23.			
24. Taxes and licenses	24.			
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.			
30. Energy efficient commercial buildings deduction (Form 7205)	30.			
31. **Total expenses**	31.			
Profit/ (loss)				
32. Tentative profit (loss)	32.	1,050	1,400	350
33. Expenses for business use of home	33.			
34. **Net profit or (loss)**	34.	1,050	1,400	350
Cost of Goods Sold				
35. Inventory - Beginning of year	35.			
36. Purchases	36.			
37. Labor	37.			
38. Materials	38.			
39. Other costs	39.			
40. **Goods available for sale (sum of lines 34-38)**	40.			
41. Inventory - End of year	41.			

Form 1040	Two Year Comparison Report - Schedule E Page 1	2022 & 2023

Name
CHERYL L GRIEB

Taxpayer identification number
***-**-[redacted]

Property description
608 JACARANDA LN

Unit
1

		2022	2023	Differences
Income				
1. Total rents and royalties received	1.	12,000	13,000	1,000
Expenses				
2. Advertising	2.			
3. Auto and travel	3.			
4. Cleaning and maintenance	4.		851	851
5. Commissions	5.			
6. Insurance	6.	1,654	3,541	1,887
7. Legal and other professional fees	7.			
8. Management fees	8.			
9. Mortgage interest paid to banks, etc.	9.			
10. Other interest	10.			
11. Repairs	11.		13,493	13,493
12. Supplies	12.			
13. Taxes	13.	2,362	2,605	243
14. Utilities	14.			
15. Depreciation expense or depletion	15.	2,420	2,418	-2
16. Other expenses	16.			
17. Total expenses	17.	6,436	22,908	16,472
Profit/(loss)				
18. Income or (loss) from rental real estate or royalty properties	18.	5,564	-9,908	-15,472
19. Deductible rental real estate loss	19.		-9,908	-9,908
Carryover				
20. Vacation home operating expenses carryover to next year	20.			
21. Vacation home excess casualty & depreciation carryover to next yr	21.			

Form 1040	Two Year Comparison Report - Schedule E Page 1	2022 & 2023

Name
CHERYL L GRIEB

Taxpayer identification number
***-**-[redacted]

Property description
815 HASTINGS DR

Unit
2

		2022	2023	Differences
Income				
1. Total rents and royalties received	1.	15,600	18,000	2,400
Expenses				
2. Advertising	2.			
3. Auto and travel	3.			
4. Cleaning and maintenance	4.		417	417
5. Commissions	5.			
6. Insurance	6.	3,565	3,582	17
7. Legal and other professional fees	7.			
8. Management fees	8.			
9. Mortgage interest paid to banks, etc.	9.			
10. Other interest	10.			
11. Repairs	11.	417	1,720	1,303
12. Supplies	12.			
13. Taxes	13.	2,746	3,082	336
14. Utilities	14.			
15. Depreciation expense or depletion	15.	3,265	3,265	
16. Other expenses	16.			
17. Total expenses	17.	9,993	12,066	2,073
Profit/(loss)				
18. Income or (loss) from rental real estate or royalty properties	18.	5,607	5,934	327
19. Deductible rental real estate loss	19.			
Carryover				
20. Vacation home operating expenses carryover to next year	20.			
21. Vacation home excess casualty & depreciation carryover to next yr	21.			