STAHELI & JACOBSEN CPA'S PO BOX 911030 SAINT GEORGE, UT 84791 (435) 656-8138

Please find enclosed copies of your tax return(s) for the tax year ended December 31, 2021. Instructions for filing your return(s) are attached for your convenience. Retain the copies for your records.

The federal income tax return will be electronically filed, do not mail the enclosed copy, but retain it for your records.

Form 1040 Federal Individual Income Tax Return

The Utah income tax return will be electronically filed, do not mail the enclosed copy, but retain it for your records.

Form TC-40 Utah Individual Income Tax

We prepared your returns based on the information you provided us. Please review the returns carefully to ensure that there are no omissions or misstatements of material facts.

If you have any questions about your tax returns, please contact us. We appreciate this opportunity to serve you.

Sincerely,

STAHELL & JACOBSEN CPA'S

Tax Summary and Instructions for Filing 2021 Federal Individual Income Tax Return

Summary of Federal Information:

Federal adjusted gross income	\$ 6,275,703.00
Federal taxable income	\$ 6,255,971.00
Federal refund	\$ 23,112.00

Your return will be electronically filed.

Your federal refund of \$23,112.00 will be directly deposited in your bank account.

Tax Summary and Instructions for Filing 2021 Utah Individual Income Tax Return

Summary of Form TC-40 Information:

State taxable income	\$ 6,275,703.00
State refund	\$ 1,633.00

Your Utah return will be electronically filed.

Your Utah refund of \$1,633.00 will be directly deposited in your bank account.

2021 Individual Income Tax Return prepared for:

DANIEL L. JOHNSON 134 SOUTH 1160 WEST CIRCLE SAINT GEORGE, UT 84770

STAHELI & JACOBSEN CPA'S
PO BOX 911030
SAINT GEORGE, UT 84791

E 1040 Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return

IRS Use Only—Do not write or staple in this space.

Filing Status		0	_	ed filing separately (M	,			` ,	_	, ,	` , ` ,
Check only one box.	•	u checked the MFS box, enter the noon is a child but not your dependen		your spouse. If you cl	hecke	ed the HOH o	r QW	box, enter th	e child's	name if t	ne qualifying
Your first name	and mi	ddle initial	Last na	me					Your so	cial securi	ity number
DANIEL 1	L		JOHN	ISON					529-	95-049	1
If joint return, s	pouse's	first name and middle initial	Last na	me					Spouse'	s social se	curity number
Home address	(numbe	er and street). If you have a P.O. box, see	instructi	ons.				Apt. no.			ion Campaign
134 SOU'	ГН 1:	160 WEST CIRCLE					\perp			nere if you	, or your ntly, want \$3
City, town, or p	ost offi	ce. If you have a foreign address, also co	mplete s	paces below.	State		ZIP c				Checking a
SAINT G		E			UT			770		ow will not	•
Foreign country	y name			Foreign province/state/c	county		Forei	gn postal code	your tax	or refund	. Spouse
At any time du	ring 20	021, did you receive, sell, exchange,	or othe	rwise dispose of any	finan	ıcial interest i	n any	virtual curre	ncy?	Yes	⊠ No
Standard	Som	eone can claim:	penden	t Your spouse	e as a	dependent					
Deduction		Spouse itemizes on a separate retur	n or you	ı were a dual-status a	alien						
Age/Blindness	You:	Were born before January 2, 1	957	Are blind Spo	use:	☐ Was bor	rn bef	ore January 2	2, 1957	☐ Is b	lind
Dependents	s (see	instructions):		(2) Social security		(3) Relationsh	nip	(4) 🗸 if qu	ualifies fo	r (see instru	uctions):
If more	(1) F	irst name Last name			Child tax cr	redit	Credit for of	ther dependents			
than four		YR L JOHNSON		647-21-1693	3 1	Daughter					
dependents, see instruction	QUI	NN D JOHNSON		868-70-5632	868-70-5632 Daughter		· X				
and check											
here ►											
	1	Wages, salaries, tips, etc. Attach I	orm(s)	W-2					. 1		46,007.
Attach Sch. B if	2a	Tax-exempt interest	2a		b Ta	xable interest	t.		. 2b		3,967.
required.	3a	Qualified dividends	3a	10,528.	b Or	dinary divider	nds .		. 3b		51,555.
	4a	IRA distributions	4a		b Ta	xable amoun	t		. 4b		
	5a	Pensions and annuities	5a		b Ta	xable amoun	t		. 5b		
Standard	6a	Social security benefits	6a		b Ta	xable amoun	t		. 6b		
Deduction for—	7	Capital gain or (loss). Attach Sche	dule D i	f required. If not requ	ired,	check here		▶ [7	6,2	06,181.
Single or Married filing	8	Other income from Schedule 1, lin	e 10						. 8	_	24,807.
separately, \$12,550	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8. T	his is your total inco	ome			1	▶ 9	6,2	82,903.
Married filing	10	Adjustments to income from Sche	dule 1, l	line 26					. 10		7,200.
jointly or Qualifying	11_	Subtract line 10 from line 9. This is	your a	djusted gross incom	ne		· .		▶ 11	6,2	75,703.
widow(er), \$25,100	12a	Standard deduction or itemized	deduct	ions (from Schedule	A)	12a	а	19,47	1.		
Head of	b	Charitable contributions if you take	the star	ndard deduction (see i	instru	ctions) 12	b				
household, \$18,800	С	Add lines 12a and 12b							. 120		19,471.
If you checked	13	Qualified business income deduct	ion from	Form 8995 or Form	8995	-A			. 13		261.
any box under Standard	14	Add lines 12c and 13							. 14		19,732.
Deduction, see instructions.	15	Taxable income. Subtract line 14	from lin	e 11. If zero or less,	enter	-0			. 15	6,2	55,971.

Form 1040 (2021)										Page 2
	16	Tax (see instructions). Check	if any from Form	(s): 1 881	4 2 🗌 4972	3 🗌			16	1,224,	,433.
	17	Amount from Schedule 2, lin	e3						17	7,	,819.
	18	Add lines 16 and 17							18	1,232,	,252.
	19	Nonrefundable child tax cred	dit or credit for o	ther depender	nts from Schedule	e 8812			19		
	20	Amount from Schedule 3, lin	e8						20		840.
	21	Add lines 19 and 20							21		840.
	22	Subtract line 21 from line 18	. If zero or less,	enter -0					22	1,231,	,412.
	23	Other taxes, including self-e	mployment tax,	from Schedule	e 2, line 21 .				23	232,	<u>,877.</u>
	24	Add lines 22 and 23. This is	your total tax					. ▶	24	1,464,	,289.
	25	Federal income tax withheld	from:								
	а	Form(s) W-2				25a	5,	004.			
	b	Form(s) 1099				25b					
	С	Other forms (see instructions	s)			25c					
	d	Add lines 25a through 25c							25d		,004.
If you have a	26	2021 estimated tax payment							26	33,	,000.
qualifying child, attach Sch. EIC. [27a	Earned income credit (EIC)				27a					
attach Sch. Elc.		Check here if you were b									
		January 2, 2004, and you taxpayers who are at least a									
	b	Nontaxable combat pay elec	,	1 1							
	С	Prior year (2019) earned inco									
	28	Refundable child tax credit or			Schedule 8812	28					
	29	American opportunity credit				29					
	30	Recovery rebate credit. See				30					
	31	Amount from Schedule 3, lin				31	1,450,	000.			
	32	Add lines 27a and 28 throug			*	d refund			32	1,450,	,000.
	33	Add lines 25d, 26, and 32. T	hese are your to	tal payments				. ▶	33	1,488,	
Refund	34	If line 33 is more than line 24							34	23,	,715.
neiuliu	35a	Amount of line 34 you want	refunded to you	ا. If Form 8888	is attached, che	ck here		▶ □	35a	23,	,112.
Direct deposit?	▶b	Routing number 3 2 4	3 7 7 5	1 6	▶ c Type: 🔀	Check	ing S	avings			
See instructions.	►d	Account number 7 4 6	0 0 8 0	0 9 5	7 3						
	36	Amount of line 34 you want a	applied to your	2022 estimate	ed tax ►	36					
Amount	37	Amount you owe. Subtract	line 33 from line	24. For details	s on how to pay,	see inst	ructions	. ▶	37		
You Owe	38	Estimated tax penalty (see in	nstructions) .		🕨	38		603.			
Third Party Designee		you want to allow another tructions			m with the IRS?		X Yes. Cor	nplete b	elow.	□No	
		signee's me ► NATE STAHELI		Phone no. ▶	(435)656-8	3138	Persor	ıal identifi ır (PINI) ▶	cation	1 1 1	1111
Cian		der penalties of perjury, I declare t	hat I have examine				nd statement	s and to	the hes	t of my know	ledge and
Sign		ief, they are true, correct, and com									
Here	You	ur signature		Date	Your occupation			If the	IRS ser	nt you an Ider	ntity
	k									N, enter it he	re
Joint return? See instructions.				5.	SALES			<u> </u>	nst.) ►	<u>. </u>	
Keep a copy for your records.	Spe	ouse's signature. If a joint return, k	ootn must sign.	Date Spouse's occupation			Identi		nt your spous ection PIN, er		
	Pho	one no.		Email address							
Doid	Pre	eparer's name	Preparer's signat	ure		Date		PTIN		Check if:	
Paid	NA	TE STAHELI					l I	00296	497	Self-em	nployed
Preparer	Firr	m's name ► STAHELI &	JACOBSEN	CPA'S				Phon	e no. (435)656	-8138
Use Only								s EIN 🕨	27-03	72684	
Go to www.irs.go	ov/Forn	11040 for instructions and the late	st information.		BAA	REV 09	/09/22 PRO			Form 10	040 (2021)

SCHEDULE 1 (Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2021

Attachment
Sequence No. 01

Department of the Treasury Internal Revenue Service

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

529-95-0491

Par	Additional income					
1	Taxable refunds, credits, or offsets of state and local income taxes	3			1	
2 a	Alimony received				2a	
b	Date of original divorce or separation agreement (see instructions)					
3	Business income or (loss). Attach Schedule C				3	
4	Other gains or (losses). Attach Form 4797				4	
5	Rental real estate, royalties, partnerships, S corporations, tru Schedule E				5	-24,807.
6	Farm income or (loss). Attach Schedule F				6	
7	Unemployment compensation				7	
8	Other income:					
а	Net operating loss	8a	()		
b	Gambling income	8b				
С	Cancellation of debt	8c				
d	Foreign earned income exclusion from Form 2555	8d	()		
е	Taxable Health Savings Account distribution	8e				
f	Alaska Permanent Fund dividends	8f				
g	Jury duty pay	8g				
h	Prizes and awards	8h				
i	Activity not engaged in for profit income	8i				
j	Stock options	8j				
k	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8k				
I	Olympic and Paralympic medals and USOC prize money (see instructions)	81				
m	Section 951(a) inclusion (see instructions)	8m				
n	Section 951A(a) inclusion (see instructions)	8n				
0	Section 461(I) excess business loss adjustment	80				
р	Taxable distributions from an ABLE account (see instructions) .	8р				
Z	Other income. List type and amount ▶	8z				
9	Total other income. Add lines 8a through 8z				9	
10	Combine lines 1 through 7 and 9. Enter here and on Form 10 1040-NR, line 8				10	-24,807.

Schedule 1 (Form 1040) 2021 Page **2**

Par	t II Adjustments to Income			
11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-bofficials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	7,200.
14	Moving expenses for members of the Armed Forces. Attach Form 3	3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN	>		
С	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:			
а	Jury duty pay (see instructions)	24a		
b	Deductible expenses related to income reported on line 8k from the rental of personal property engaged in for profit	24b		
С	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 81	24c		
d	Reforestation amortization and expenses	24d		
е	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 2	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	2 4j		
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 here and on Form 1040 or 1040-SR, line 10, or Form 1040-NR, line		26	7,200.

SCHEDULE 2 (Form 1040)

12

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Department of the Treasury Internal Revenue Service

Additional Taxes

OMB No. 1545-0074

2021

Attachment
Sequence No. 02

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040, 1040-SR, or 1040-NR Your social security number 529-95-0491 DANIEL L JOHNSON Part I Tax 1 Alternative minimum tax. Attach Form 6251 1 7,819. 2 2 Excess advance premium tax credit repayment, Attach Form 8962 3 Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17. 3 7,819. Part II **Other Taxes** 4 Self-employment tax. Attach Schedule SE 5 Social security and Medicare tax on unreported tip income. Attach Form 4137 5 Uncollected social security and Medicare tax on wages. Attach 6 6 7 Total additional social security and Medicare tax, Add lines 5 and 6 7 8 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required 8 9 9 10 Repayment of first-time homebuyer credit. Attach Form 5405 if required 10 11 11

Uncollected social security and Medicare or RRTA tax on tips or group-term life

Interest on tax due on installment income from the sale of certain residential lots

Interest on the deferred tax on gain from certain installment sales with a sales price

Recapture of low-income housing credit. Attach Form 8611

(continued on page 2)

12

13

14

15

16

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

Net investment income tax. Attach Form 8960 .

and timeshares

insurance from Form W-2, box 12

Schedule 2 (Form 1040) 2021

230,877.

Schedule 2 (Form 1040) 2021 Page **2**

Part II Other Taxes (continued)

a Recapture of other credits. List type, form number, and amount ▶ b Recapture of federal mortgage subsidy. If you sold your home in 2021, see instructions	
2021, see instructions	
d Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	
individual. Attach Form 8889	
f Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	
Form 8853	
fractional interest in tangible personal property	
plan that fails to meet the requirements of section 409A i Compensation you received from a nonqualified deferred compensation plan described in section 457A	
compensation plan described in section 457A	
k Golden parachute payments	
I Tax on accumulation distribution of trusts	
m Excise tax on insider stock compensation from an expatriated corporation	
n Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	
o Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	
 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	
z Any other taxes. List type and amount ▶	
18 Total additional taxes. Add lines 17a through 17z	
19 Additional tax from Schedule 8812	000.
20 Section 965 net tax liability installment from Form 965-A 20	
21 Add lines 4, 7 through 16, 18, and 19. These are your total other taxes. Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b	877.

SCHEDULE 3 (Form 1040)

Additional Credits and Payments

OMB No. 1545-0074

2021

Attachment Sequence No. 03

Department of the Treasury Internal Revenue Service

DANIEL L JOHNSON

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

► Attach to Form 1040, 1040-SR, or 1040-NR.
 Go to www.irs.gov/Form1040 for instructions and the latest information.

Your social security number 529-95-0491

Pai	Nonrefundable Credits			
1	Foreign tax credit. Attach Form 1116 if required		1	840.
2	Credit for child and dependent care expenses from Form 2441, I Form 2441	ne 11. Attach	2	
3	Education credits from Form 8863, line 19		3	
4	Retirement savings contributions credit. Attach Form 8880		4	
5	Residential energy credits. Attach Form 5695	,	5	
6	Other nonrefundable credits:			
а	General business credit. Attach Form 3800 6a	1		
b	Credit for prior year minimum tax. Attach Form 8801 6b)		
С	Adoption credit. Attach Form 8839 66	;		
d	Credit for the elderly or disabled. Attach Schedule R 6c	1		
е	Alternative motor vehicle credit. Attach Form 8910 66			
f	Qualified plug-in motor vehicle credit. Attach Form 8936 61			
g	Mortgage interest credit. Attach Form 8396	ı		
h	District of Columbia first-time homebuyer credit. Attach Form 8859 6h	1		
i	Qualified electric vehicle credit. Attach Form 8834 6i			
j	Alternative fuel vehicle refueling property credit. Attach Form 8911 6j			
k	Credit to holders of tax credit bonds. Attach Form 8912 6k			
-1	Amount on Form 8978, line 14. See instructions 6			
Z	Other nonrefundable credits. List type and amount ▶6z			
7	Total other nonrefundable credits. Add lines 6a through 6z		7	
8	Add lines 1 through 5 and 7. Enter here and on Form 1040, 1040-SF line 20		8	840.

Schedule 3 (Form 1040) 2021

Schedule 3 (Form 1040) 2021 Page **2**

Par	t II Other Payments and Refundable Credits			
9	Net premium tax credit. Attach Form 8962		9	
10	Amount paid with request for extension to file (see instructions)		10	1,450,000.
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136	[12	
13	Other payments or refundable credits:			
а	Form 2439			
b	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken before April 1, 2021			
С	Health coverage tax credit from Form 8885			
d	Credit for repayment of amounts included in income from earlier years			
е	Reserved for future use			
f	Deferred amount of net 965 tax liability (see instructions) 13f			
g	Credit for child and dependent care expenses from Form 2441, line 10. Attach Form 2441			
h	Qualified sick and family leave credits from Schedule(s) H and Form(s) 7202 for leave taken after March 31, 2021			
Z	Other payments or refundable credits. List type and amount 13z			
14	Total other payments or refundable credits. Add lines 13a through 13z .		14	
15	Add lines 9 through 12 and 14. Enter here and on Form 1040, 1040-SR, or line 31		15	1,450,000.

BAA

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SCHEDULE A (Form 1040)

Itemized Deductions

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

Attachment Sequence No. **07**

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Name(s) shown on	Form	1040 or 1040-SR			You	ır so	cial security number
DANIEL L	JOH				52	9-9	95-0491
Medical and Dental		Caution: Do not include expenses reimbursed or paid by others. Medical and dental expenses (see instructions) Enter amount from Form 1040 or 1040-SR, line 11 2	1				
Expenses	3	Multiply line 2 by 7.5% (0.075)	3		_		
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0				4	
Taxes You Paid	k	State and local taxes. State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box	5a 5b	2,28 2,79			
		State and local personal property taxes	5c				I
		Add lines 5a through 5c	5d	5,07	7.		
		separately)	5e	5,07	7.		
	7		6		_	7	F 077
luda usad						_	5,077.
Interest You Paid Caution: Your mortgage interest deduction may be limited (see		Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box	8a	14,23	4.		
instructions).		Definition of the person from the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	8b				
		rules	8c				
	c	Mortgage insurance premiums (see instructions)	8d		0.		
	e	Add lines 8a through 8d	8e	14,23	4.		
	9	Investment interest. Attach Form 4952 if required. See instructions.	9				
	10	Add lines 8e and 9				10	14,234.
Gifts to Charity		Gifts by cash or check. If you made any gift of \$250 or more, see instructions	11	16	0.		
Caution: If you made a gift and got a benefit for it,		Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	12				
see instructions.		Carryover from prior year	13				
		Add lines 11 through 13			-	14	160.
Casualty and Theft Losses	15	Casualty and theft loss(es) from a federally declared disaster (other disaster losses). Attach Form 4684 and enter the amount from line 1 instructions	8 of	that form. Se	е	15	
Other Itemized Deductions	16	Other—from list in instructions. List type and amount ▶				16	
Total Itemized	17	Add the amounts in the far right column for lines 4 through 16. Also, e Form 1040 or 1040-SR, line 12a			on	17	19,471.
Deductions	18	If you elect to itemize deductions even though they are less than your check this box	stan	dard deductio	n,	.,	17,111.

SCHEDULE B (Form 1040)

Interest and Ordinary Dividends

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

► Attach to Form 1040 or 1040-SR.

OMB No. 1545-0074

2021

Attachment

Sequence No. 08

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

Your social security number DANIEL L JOHNSON 529-95-0491 Amount Part I 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 interest first. Also, show that buyer's social security number and address 43. GOLDMAN SACHS (See instructions 907. CNL STRATEGIC CAPITAL LLC and the Instructions for 200. BRIDGE OPPORTUNITY ZONE FUND IV LP Form 1040, line CYNOSURE PARTNERS 2020 PV LP 2,374. 2b.) GRIFFIN CAPITAL QUALIFIED OPPORTUNITY 4. Note: If you 1 439. TORKABC, LLC received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the paver and enter the total interest shown on that form. 2 3,967. 2 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. 3 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, 3,967. 4 Note: If line 4 is over \$1,500, you must complete Part III. Amount Part II 34,337. List name of payer ► FIDELITY 16,880. FIDELITY **Ordinary** CNL STRATEGIC CAPITAL LLC 316. **Dividends** 22. GRIFFIN CAPITAL QUALIFIED OPPORTUNITY (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 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, on that form. 51,555. Note: If line 6 is over \$1,500, you must complete Part III. Part III You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a Yes No foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust. **Foreign** At any time during 2021, did you have a financial interest in or signature authority over a financial **Accounts** account (such as a bank account, securities account, or brokerage account) located in a foreign and Trusts × If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Caution: If Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 required, failure and its instructions for filing requirements and exceptions to those requirements to file FinCEN Form 114 may b If you are required to file FinCEN Form 114, enter the name of the foreign country where the result in financial account is located ▶ substantial penalties. See During 2021, did you receive a distribution from, or were you the grantor of, or transferor to, a instructions. foreign trust? If "Yes," you may have to file Form 3520. See instructions . X

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

Attachment Sequence No. 12

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040, 1040-SR, or 1040-NR.

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

Name(s) shown on return Your social security number 529-95-0491 DANIEL L JOHNSON

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) Part I See instructions for how to figure the amounts to enter on the (h) Gain or (loss) (g) Adjustments Subtract column (e) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) Form(s) 8949, Part I, combine the result (or other basis) whole dollars. with column (g) line 2. column (a) 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 . 194,547. 426. 194,121. **1b** Totals for all transactions reported on Form(s) 8949 with Box A checked 92,399. 91,529. 233. 1,103. 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 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 5 3,593. Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any longterm capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 5,122. 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 (h) Gain or (loss) (g) Adjustments Subtract column (e) (d) (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to Form(s) 8949, Part II, (sales price) (or other basis) combine the result whole dollars. line 2. column (a) with column (a) 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 Totals for all transactions reported on Form(s) 8949 with **Box E** checked 7,125,000. 7,125,000. 0. 10 Totals for all transactions reported on Form(s) 8949 with -1,000,000. -1,000,000. 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) 11 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13 76,059. 14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

6,201,059.

15

Schedule D (Form 1040) 2021 Page **2**

Paru	Summary		
16	Combine lines 7 and 15 and enter the result	16	6,206,181.
	• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below.		
	• If line 16 is a loss , skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22.		
	• If line 16 is zero , skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.		
17	Are lines 15 and 16 both gains? ▼ Yes. Go to line 18.		
	No. Skip lines 18 through 21, and go to line 22.		
18	If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18	
	amount, if any, from line 7 of that worksheet	10	
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 Forms 1040 and 1040-SR, 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 Forms 1040 and 1040-SR, line 16.		
	■ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

Attachment

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Sequence No. 12A

Name(s) shown on return DANIEL L JOHNSON Social security number or taxpayer identification number 529-95-0491

Before you check Box A, B, or C 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.

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-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 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-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 (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions			_	sis wasn't report	ed to the IF	RS			
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	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.		(e) If you enter an all enter a cool enter basis. See the separation of the separati		(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)		
FIDELITY	08/11/21	12/31/21	92,399.	91,529.	W	233.	1,103.		
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked) or line 3 (if Box A)	al here and inc is checked), lir	lude on your ne 2 (if Box B	92 399	91 529		222	1 103		

Note: If you checked Box A 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.

REV 09/09/22 PRO

Form 8949 (2021) Attachment Sequence No. **12A** Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side DANIEL L JOHNSON

Social security number or taxpayer identification number 529-95-0491

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.

	(D)	Long-term transactions reported on Form(s)	1099-B showing basis was reported to the IRS (see Note above)
X	(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

(i) Long to in transactions i	iot roportoa	to you on i	71111 1000 B						
(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column</i> (e)	See the separate instructions.		If you enter an amount in column (g), enter a code in column (f). See the separate instructions. Sign (e)		(h) Gain or (loss). Subtract column (e) from column (d) and
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)		
ZONOS	Various	07/31/21	7,125,000.	0.			7,125,000.		
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	l here and incl is checked), lir	lude on your ne 9 (if Box E	7.125.000.	0.			7.125.000.		

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.

Form 8949 (2021) Attachment Sequence No. **12A** Page **2**

Social security number or taxpayer identification number 529-95-0491

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.

		(D)	Long-term transacti	ons reported on Ec	orm(s) 1099-B s	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

X (F) Long-term transactions not reported to you on Form 1099-B

_ (,		. ,					
(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 <i>Column</i> (e) in the separate instructions	cost or other basis. ee the Note below and see <i>Column</i> (e) in the separate (f) (g)		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
					motractions	aujustinent	
83-3873722	12/10/21				Z	-350,000.	-350,000.
85-4323971	12/31/21				Z	-300,000.	-300,000.
85-3274399	12/31/21				Z	-350,000.	-350,000.
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and incl is checked), lir	lude on your ne 9 (if Box E				-1,000,000.	-1,000,000.

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.

chedule E (I	Form 1040)	0) 2021 Attachment Sequence I	Vo.	13	Page	2
JIICGGIC L (I	1 01111 10 1 0)	Attachment Sequence i	NO.	10	raue	_

Name(s) shown on return. Do not enter name and social security number if shown on other side. Your social security number 529-95-0491 DANIEL L JOHNSON Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1. Income or Loss From Partnerships and S Corporations - Note: If you report a loss, receive a distribution, dispose of Part II 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 . (b) Enter P for (f) Check if (c) Check if foreign (d) Employer (e) Check if 28 any amount is partnership: S basis computation is required identification for S corporation partnership number Α CNL STRATEGIC CAPITAL LLC 32-0503849 P Ρ BRIDGE OPPORTUNITY ZONE FUND IV LP 85-4323971 C CYNOSURE PARTNERS 2020 PV LP Р 85-4331489 See line 28 information **Passive Income and Loss** Nonpassive Income and Loss (g) Passive loss allowed (h) Passive income (i) Nonpassive loss allowed (j) Section 179 expense (k) Nonpassive income (attach Form 8582 if required) from Schedule K-1 (see Schedule K-1) deduction from Form 4562 from Schedule K-1 Α 0. В 185. C 191 D 24,807. 6. 29a Totals 191. 0. 191. Totals b 24,807 30 Add columns (h) and (k) of line 29a. 30 191. 31 Add columns (g), (i), and (j) of line 29b. 31 24,998. 32 Total partnership and S corporation income or (loss). Combine lines 30 and 31 32 -24,807 Part III **Income or Loss From Estates and Trusts** (b) Employer 33 (a) Name identification number Α В Passive Income and Loss Nonpassive Income and Loss (e) Deduction or loss (c) Passive deduction or loss allowed (d) Passive income (f) Other income from (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 Schedule K-1 Α В 34a Totals Totals Add columns (d) and (f) of line 34a 35 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 Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder Part IV (c) Excess inclusion from (b) Employer identification (d) Taxable income (net loss) (e) Income from 38 (a) Name Schedules Q, line 2c from Schedules Q, line 1b (see instructions) 39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below 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 -24,807. 42 Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AD; and Schedule K-1 (Form 1041), box 14, code F. See instructions. 42 43 Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040. Form 1040-SR, or Form 1040-NR from all rental real estate activities in which

43

you materially participated under the passive activity loss rules

Foreign Tax Credit

(Individual, Estate, or Trust)
► Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T. COPY 1 ▶ Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0121 Attachment Sequence No. 19

Department of the Treasury Internal Revenue Service (99)

Identifying number as shown on page 1 of your tax return

DAI	NIEL L JOHNSON	Ī					529-	95-0491			
Use a 1116	a separate Form 1116 f . Report all amounts in	for each cate U.S. dollars	egory of income except where	e listed bel specified i	ow. See <i>Cate</i> n Part II belov	gories of Inco v.	ome in the ins	tructions. C	heck onl	y one	box on each Form
a ☐ Section 951A category income c ☐ Passive category income e ☐ Section 901(j) income b ☐ Foreign branch category income d ☐ General category income f ☐ Certain income re-sourced by treaty						_	Lum	p-sum distributions			
	esident of (name of c										
Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you part than one foreign country or U.S. possession, use a separate column and line for each country or possession.											
Pa	rt I Taxable Inco	ome or Lo	ss From S	ources (checke	d abo	ove)
					Fo	reign Count	ry or U.S. Po				Total
i	Enter the name of possession		ign country		A Various		В	С		(Add	cols. A, B, and C.)
1a	Gross income from above and of the instructions):	he type c					4				
					6,2	200.				1a	6,200.
t	Check if line 1a is services as ar compensation fror more, and you u determine its source	n employe n all source sed an alte	ee, your t es is \$250,00 ernative basis	total 0 or s to							
Dedu	ections and losses (Ca	aution: See i	nstructions.):	ļ							
2	Expenses definite 1a (attach stateme	-									
3	Pro rata share of related:	other dedu		efinitely STMT							
а	Certain itemized de (see instructions) .				5,0	77.					
b	Other deductions (attach state	ement)			200.					
c	Add lines 3a and 3	Bb			12,2	.77.					
c	I Gross foreign sour	ce income (see instructio	ns) .	6,2	200.					
e	Gross income from	n all sources	s (see instruct	ions) .	7,307,9	01.					
f	Divide line 3d by line	ne 3e (see ii	nstructions) .		0.0	8000					
ç	Multiply line 3c by	line 3f .				10.					
4	Pro rata share of in	terest exper	nse (see instru	ctions):							
а	Home mortgage in Home Mortgage In					11.					
b	Other interest expe	ense		[
5	Losses from foreig	n sources		[
6	Add lines 2, 3g, 4a	i, 4b, and 5				21.				6	21.
7	Subtract line 6 fror					age 2			. ▶	7	6,179.
Pai	t II Foreign Tax	<u>es Paid o</u>	r Accrued	(see inst	ructions)						
	Credit is claimed for taxes				Fo	reign taxes pa	id or accrued				
2	(you must check one)										
ınt	(j) X Paid	_	In foreign			_		In U.S. d			
Country	(k) Accrued (l) Date paid or accrued	Taxes withheld at source on: (m) Dividends (n) Rents (o) Interes		ce on:	(p) Other foreign taxes paid or		(r) Rents and royalties	(s) Interest	(t) Ot foreign paid	taxes or	(u) Total foreign taxes paid or accrued (add cols.
_			and royalties		accrued	2.15			accru	ued	(q) through (t))
_	12/31/2021					840.					840.
В											
С	A 1 1 11										0.40
8	Add lines A through	an C. Colur	nn (III) Enter	tne total k	nere and on	IINE 9 nage	7			8	840.

Page 2

Part	III Figuring the Credit				
9	Enter the amount from line 8. These are your total foreign taxes paid		0.40		
	or accrued for the category of income checked above Part I	9	840.	-	
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year	10			
	(If your income was section 951A category income (box a above Part I), leave line 10 blank.)				
11	Add lines 9 and 10	11	840.		
12	Reduction in foreign taxes (see instructions)	12	()		
13	Taxes reclassified under high tax kickout (see instructions)	13			
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes	avail	able for credit	14	840.
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions	15	6,179.		
16	Adjustments to line 15 (see instructions)	16			
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	6,179.		
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption	18	6,255,971.		
	Caution: If you figured your tax using the lower rates on qualified of	divide	nds or capital gains, see		
40	instructions.			40	0.0010
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	7		19	0.0010
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, li 1040), line 2. Estates and trusts: Enter the amount from Form 104 total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and t from Form 1040-NR, line 16	1, Sc	hedule G, line 1a; or the	20	1,224,433.
	Caution: If you are completing line 20 for separate category g (lump-s Form 8978, Partner's Additional Reporting Year Tax, see instructions.	sum di	stributions), or, if you file		
21	Multiply line 20 by line 19 (maximum amount of credit)			21	1,224.
22	Increase in limitation (section 960(c))			22	
23	Add lines 21 and 22			23	1,224.
24	Enter the smaller of line 14 or line 23. If this is the only Form 111				
	through 32 and enter this amount on line 33. Otherwise, complete the			24	840.
Part	instructions	uctio	ns)	24	040.
25	Credit for taxes on section 951A category income	25			
26	Credit for taxes on foreign branch category income	26			
27	Credit for taxes on passive category income	27			
28	Credit for taxes on general category income	28			
29	Credit for taxes on section 901(j) income	29			
30	Credit for taxes on certain income re-sourced by treaty	30			
		31			
31	Credit for taxes on lump-sum distributions			20	
32	Add lines 25 through 31			32	0.40
33	Enter the smaller of line 20 or line 32			33	840.
34	Reduction of credit for international boycott operations. See instructio			34	
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter 1040), line 1: Form 1041, Schedule G, line 2a; or Form 990-T, Part III, I			35	840.

Foreign Tax Credit

(Individual, Estate, or Trust)
► Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T. COPY 1

OMB No. 1545-0121 Attachment 10

Department of the Treasury

nterna	al Revenue Service (99)	G	o to www.irs.	gov/Form i	116 for instr	uctioi	is and t	ne iatest ini	ormation.			Sequence No. 19
Name	9							Identify	ing number a	s shown	on pag	e 1 of your tax return
DA	NIEL L JOHNSON							529-	95-0491			
	a separate Form 1116 f c. Report all amounts in						of Incor	ne in the ins	tructions. Cl	neck only	y one	box on each Form
. \Box	Section 951A category	, incomo	c X Passiv	o catagory	incomo	• 🗆	Soction	901(j) incom	2	a	Lum	p-sum distributions
	Foreign branch category		d ☐ Genera					ncome re-so		•	Luiii	p-sum distributions
ı R	esident of (name of c	ountry)	TICN									
	e: If you paid taxes to			rv or U.S.	nossession	. use	column	A in Part I	and line A	in Part	II. If ν	ou paid taxes to
	e than one foreign c	•	•	•		-					_	oa paia taxoo to
	rt I Taxable Inco	_	-									ove)
								or U.S. Po				Total
	Enter the name	of the force	ian sountmi	or 11 6	Α			В	С		(Add	I cols. A, B, and C.)
	Enter the name of possession				Various							
4.	•				Various							
16	 Gross income from above and of the 											
	instructions):	ie type ci	om 1099s	/6 (366								
					6 2	00.					1a	6,200.
	Check if line 1a is	componed	tion for pore	onal	0,2	.00.					Ia	0,200.
	services as ar					Á						
	compensation from	n all source	es is \$250,000	0 or								
	more, and you us	sed an alte	ernative basis	s to								
	determine its source											
	uctions and losses (Ca		•									
2	Expenses definite 1a (attach stateme	-	o the income									
3	Pro rata share of related:	other dedu		efinitely STMT								
á	Gertain itemized do (see instructions) .		r standard de	duction								
	Other deductions (7 2	00.						
	Add lines 3a and 3			_		00.						
					_	00.						
	Gross foreign sourGross income from				7,307,9							
1				. –	_	008						
	•	•	,		0.0	6.						
4	Multiply line 3c by Pro rata share of inf					0.						
		'	`	′ –								
ć	Home mortgage in	,										
	Home Mortgage In											
	 Other interest expenses Losses from foreig 			_								
5 6	Add lines 2, 3g, 4a			_		6.					6	6.
7	Subtract line 6 from				n lino 15, no						6 7	6,194.
	rt II Foreign Tax					age Z	• •			. •	1	0,194.
. a	Credit is claimed		Accided	(300 111311	uction 13)							
ح	for taxes (you must check one)				For	reign t	axes paid	l or accrued				
ountry	(j) X Paid		In foreign					(AT-1-)				
ಶ	(k) Accrued	Taxes	withheld at sour	ce on:	(p) Other foreign taxes		raxes w	ιτηηειd at soui	ce on:	(t) Ot foreign		(u) Total foreign taxes paid or
۱	(I) Date paid	(m) Dividends	(n) Rents	(o) Interest	paid or	(q) D	vidends	(r) Rents	(s) Interest	paid	or	accrued (add cols.
_	or accrued		and royalties	-	accrued		and royalties (3) interest		accru	ied	(q) through (t))	
-	12/31/2021						840.					840.
В												
C		1	1			1		1		1		[

8

840.

Add lines A through C, column (u). Enter the total here and on line 9, page 2 .

	<u> </u>		
Part	III Figuring the Credit		
9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I 9 840.		
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year		
	(If your income was section 951A category income (box a above Part I), leave line 10 blank.)		
11	Add lines 9 and 10	-	
12	Reduction in foreign taxes (see instructions))	
13	Taxes reclassified under high tax kickout (see instructions) 13	-	
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	840.
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions		
16	Adjustments to line 15 (see instructions)	_	
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)		
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption		
	Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.		
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19	0.0010
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, Part II, lines 2, 3, 4, and 6. Foreign estates and trusts should enter the amount from Form 1040-NR, line 16	20	1,232,252.
	Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions.		
21	Multiply line 20 by line 19 (maximum amount of credit)	21	1,232.
22	Increase in limitation (section 960(c))	22	
23	Add lines 21 and 22	23	1,232.
24	Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV. See		
	instructions	24	840.
	Summary of Credits From Separate Parts III (see instructions)		
25	Credit for taxes on section 951A category income		
26	Credit for taxes on foreign branch category income		
27	Credit for taxes on passive category income		
28	Credit for taxes on general category income		
29	Credit for taxes on section 901(j) income		
30	Credit for taxes on certain income re-sourced by treaty		
31	Credit for taxes on lump-sum distributions		
32	Add lines 25 through 31	32	
33	Enter the smaller of line 20 or line 32	33	840.
34	Reduction of credit for international boycott operations. See instructions for line 12	34	
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a	35	840.

6251

Alternative Minimum Tax—Individuals

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service (99)

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

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

Attachment Sequence No. **32** Your social security number

				ırity number
_		529-9	5-04	191
Part	Alternative Minimum Taxable Income (See instructions for how to complete each	ı line.)		
1	Enter the amount from Form 1040 or 1040-SR, line 15, if more than zero. If Form 1040 or 1040-SR, lir is zero, subtract line 14 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the here. (If less than zero, enter as a negative amount.)	result	1	6,255,971.
2a	If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount Form 1040 or 1040-SR, line 12a	from	2a	5,077.
b	Tax refund from Schedule 1 (Form 1040), line 1 or line 8z	T T	2b	()
C	Investment interest expense (difference between regular tax and AMT)	1	2c	7
d	Depletion (difference between regular tax and AMT)		2d	
e	Net operating loss deduction from Schedule 1 (Form 1040), line 8a. Enter as a positive amount		2e	
f	Alternative tax net operating loss deduction		2f	()
g	Interest from specified private activity bonds exempt from the regular tax		2g	7
h	Qualified small business stock, see instructions	T T	2h	0.
i	Exercise of incentive stock options (excess of AMT income over regular tax income)	1	2i	
j	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)		2j	
k	Disposition of property (difference between AMT and regular tax gain or loss)	[2k	0.
I	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	[21	
m	Passive activities (difference between AMT and regular tax income or loss)		2m	0.
n	Loss limitations (difference between AMT and regular tax income or loss)		2n	
0	Circulation costs (difference between regular tax and AMT)	T T	20	
р	Long-term contracts (difference between AMT and regular tax income)		2p	
q	Mining costs (difference between regular tax and AMT)	T T	2q	
r	Research and experimental costs (difference between regular tax and AMT)		2r	<u> </u>
S	Income from certain installment sales before January 1, 1987		2s	()
t	Intangible drilling costs preference	T T	2t	
3	Other adjustments, including income-based related adjustments		3	
4	Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line more than \$752,800, see instructions.)		4	6,261,048.
Part				
5	Exemption.			
	IF your filing status is AND line 4 is not over THEN enter on line 5			
	Single or head of household \$ 523,600 \$ 73,600			
	Married filing jointly or qualifying widow(er) 1,047,200	Į.	_	0
	Married filing separately		5	0.
6	Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9	, and		
_	11, and go to line 10		6	6,261,048.
7	If you are filing Form 2555, see instructions for the amount to enter.			
	• If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported			
	qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the	1	7	1,232,252.
	back and enter the amount from line 40 here.			
	• All others: If line 6 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result.			
8	Alternative minimum tax foreign tax credit (see instructions)	[8	840.
9	Tentative minimum tax. Subtract line 8 from line 7	[9	1,231,412.
10	Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 1 and any negative amount reported on Form line 14 (treated as a positive number). If zero or less, enter -0 If you used Schedule J to figure your to Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line instructions	8978, ax on	10	1,223,593.
11	AMT. Subtract line 10 from line 9. If zero or less, enter -0 Enter here and on Schedule 2 (Form 1040),	line 1	11	7,819.
	as a second and the s			,

Form 6251 (2021) Page **2**

Part III Tax Computation Using Maximum Capital Gains Rates

Complete Part III only if you are required to do so by line 7 or by the Foreign Earned Income Tax Worksheet in the instructions. 12 Enter the amount from Form 6251, line 6. If you are filing Form 2555, enter the amount from line 3 of the 6,261,048. 12 13 Enter the amount from line 4 of the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040 or the amount from line 13 of the Schedule D Tax Worksheet in the Instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary). See instructions. If you are filing 13 6,211,587. 14 Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary). See 14 15 If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see 6,211,587. 15 6,211,587. 16 16 49,461. 17 17 If line 17 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result ▶ 12,860. 18 19 • \$80,800 if married filing jointly or qualifying widow(er), 54,100. • \$40,400 if single or married filing separately, or 19 • \$54.100 if head of household. 20 Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 14 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero 20 or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter 44,384. 21 21 9,716. 22 Enter the **smaller** of line 12 or line 13 22 6,211,587. 23 Enter the **smaller** of line 21 or line 22. This amount is taxed at 0% 23 9,716. Subtract line 23 from line 22 24 24 6,201,871. 25 • \$445,850 if single, • \$250,800 if married filing separately, 25 473,750. • \$501,600 if married filing jointly or qualifying widow(er), or • \$473,750 if head of household. 26 Enter the amount from line 21 . . . 26 9,716. Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from 27 line 21 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter 27 44,384. 54,100. 28 28 29 Subtract line 28 from line 25. If zero or less, enter -0-29 419,650. 30 30 419,650. 31 31 62,948. 429,366. 32 32 If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33. 33 33 5,782,221. 1,156,444. 34 34 If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35. 35 35 36 Subtract line 35 from line 12 36 37 37 1,232,252. 38 38 39 If line 12 is \$199,900 or less (\$99,950 or less if married filing separately), multiply line 12 by 26% (0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$3,998 (\$1,999 if married filing separately) from the result 39 1,749,095. Enter the smaller of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this 40 amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7 40 1,232,252.

SCHEDULE 8812 (Form 1040)

Credits for Qualifying Children and Other Dependents

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

1040-SR 1040-NR 8812 ▶ Go to www.irs.gov/Schedule8812 for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. **47**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Your social security number 529-95-0491 DANIEL L JOHNSON

Part	I-A Child Tax Credit and Credit for Other Dependents		
1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	1	6,275,703.
2a	Enter income from Puerto Rico that you excluded		
b	Enter the amounts from lines 45 and 50 of your Form 2555		
c	Enter the amount from line 15 of your Form 4563		
d	Add lines 2a through 2c	2d	0.
3	Add lines 1 and 2d	3	6,275,703.
4a	Number of qualifying children under age 18 with the required social security number 2.		
b	Number of children included on line 4a who were under age 6 at the end of 2021 4b 0.		
c	Subtract line 4b from line 4a		
5	If line 4a is more than zero, enter the amount from the Line 5 Worksheet ; otherwise, enter -0	5	4,000.
6	Number of other dependents, including any qualifying children who are not under age		
	18 or who do not have the required social security number		
	Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident		
	alien. Also, do not include anyone you included on line 4a.		
7	Multiply line 6 by \$500	7	
8	Add lines 5 and 7	8	4,000.
9	Enter the amount shown below for your filing status.		
	• Married filing jointly—\$400,000		
	• All other filing statuses—\$200,000 \int	9	200,000.
10	Subtract line 9 from line 3.		
	• If zero or less, enter -0		
	• If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For		
	example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.	10	6,076,000.
11	Multiply line 10 by 5% (0.05)	11	303,800.
12	Subtract line 11 from line 8. If zero or less, enter -0-	12	0.
13	Check all the boxes that apply to you (or your spouse if married filing jointly).		
	A Check here if you (or your spouse if married filing jointly) had a principal place of abode in the United States		
	for more than half of 2021		
D	B Check here if you (or your spouse if married filing jointly) were a bona fide resident of Puerto Rico for 2021		
Part			
	en: If you did not check a box on line 13, do not complete Part I-B; instead, skip to Part I-C. Enter the smaller of line 7 or line 12	140	
14a	Subtract line 14a from line 12	14a 14b	0.
b	If line 14a is zero, enter -0-; otherwise, enter the amount from the Credit Limit Worksheet A	140 14c	0.
c d	Enter the smaller of line 14a or line 14c	14c	0.
u	Add lines 14b and 14d	14a 14e	
e		146	0.
f	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the		
	instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments		
	for 2021, enter -0	14f	2,000.
	Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if		
	filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.		
g	Subtract line 14f from line 14e. If zero or less, enter -0- on lines 14g through 14i and go to Part III	14g	0.
h	Enter the smaller of line 14d or line 14g. This is your credit for other dependents. Enter this amount on line		
	19 of your Form 1040, 1040-SR, or 1040-NR	14h	0.
i	Subtract line 14h from line 14g. This is your refundable child tax credit. Enter this amount on line 28 of		
	your Form 1040, 1040-SR, or 1040-NR	14i	0.

Schedule 8812 (Form 1040) 2021 Page **2**

Part	I-C Filers Who Do Not Check a Box on Line 13	
Cautio	on: If you checked a box on line 13, do not complete Part I-C.	
15a	Enter the amount from the Credit Limit Worksheet A	15a
b	Enter the smaller of line 12 or line 15a	15b
	Additional child tax credit. Complete Parts II-A through II-C if you meet each of the following items.	
	1. You are not filing Form 2555.	
	2. Line 4a is more than zero.	
	3. Line 12 is more than line 15a.	
c	If you completed Parts II-A through II-C, enter the amount from line 27; otherwise, enter -0	15c
d	Add lines 15b and 15c	15d
e	Enter the aggregate amount of advance child tax credit payments you (and your spouse if filing jointly) received for 2021. See your Letter(s) 6419 for the amounts to include on this line. If you are missing Letter 6419, see the instructions before entering an amount on this line. If you didn't receive any advance child tax credit payments for 2021, enter -0-	15e
	Caution: If the amount on this line doesn't match the aggregate amounts reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.	
f	Subtract line 15e from line 15d. If zero or less, enter -0- on lines 15f through 15h and go to Part III	15f
g	Enter the smaller of line 15b or line 15f. This is your nonrefundable child tax credit and credit for other dependents. Enter this amount on line 19 of your Form 1040, 1040-SR, or 1040-NR.	15g
h	Subtract line 15g from line 15f. This is your additional child tax credit. Enter this amount on line 28 of your	108
11	Form 1040, 1040-SR, or 1040-NR	15h
Part		1011
	on: If you file Form 2555, do not complete Parts II-A through II-C; you cannot claim the additional child tax credit.	
	on: If you checked a box on line 13, do not complete Parts II-A through II-C; you cannot claim the additional child ta	x credit.
	Subtract line 15b from line 12. If zero, skip Parts II-A and II-B and enter -0- on line 27	16a
b	Number of qualifying children under 18 with the required social security number: x \$1,400.	
	Enter the result. If zero, skip Parts II-A and II-B and enter -0- on line 27	16b
	TIP: The number of children you use for this line is the same as the number of children you used for line 4a.	
17	Enter the smaller of line 16a or line 16b	17
18a	Earned income (see instructions)	
b	Nontaxable combat pay (see instructions)	
19	Is the amount on line 18a more than \$2,500?	
	No. Leave line 19 blank and enter -0- on line 20.	
	Yes. Subtract \$2,500 from the amount on line 18a. Enter the result 19	
20	Multiply the amount on line 19 by 15% (0.15) and enter the result	20
	Next. On line 16b, is the amount \$4,200 or more?	
	No. If line 20 is zero, enter -0- on line 15c. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27.	
	Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27.	
	Otherwise, go to line 21.	
Part		
21	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see	
22	Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form	
23	1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13 . Add lines 21 and 22	
24	1040 and	
	1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27a, and Schedule 3 (Form 1040), line 11.	
	1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.	
25	Subtract line 24 from line 23. If zero or less, enter -0	25
26	Enter the larger of line 20 or line 25	26
	Next, enter the smaller of line 17 or line 26 on line 27.	
Part		
27	Enter this amount on line 15c	27

Schedule 8812 (Form 1040) 2021

Par	Part III Additional Tax (use only if line 14g or line 15f, whichever applies, is zero)						
28a	Enter the amount from line 14f or line 15e, whichever applies	28a	2,000.				
b	Enter the amount from line 14e or line 15d, whichever applies	28b	0.				
29	Excess advance child tax credit payments. Subtract line 28b from line 28a. If zero, stop; you do not owe the						
	additional tax	29	2,000.				
30	Enter the number of qualifying children taken into account in determining the annual advance amount you received for 2021. See your Letter 6419 for this number. If you are missing your Letter 6419, you are filing a joint						
	return, or you received more than one Letter 6419, see the instructions before entering a number on this line	30	4.				
	Caution: If the amount on this line doesn't match the number of qualifying children reported to you (and your spouse if filing jointly) on your Letter(s) 6419, the processing of your return will be delayed.						
31	Enter the smaller of line 4a or line 30	31	2.				
32	Subtract line 31 from line 30. If zero, skip to line 40 and enter the amount from line 29; otherwise, continue to						
	line 33	32	2.				
33	Enter the amount shown below for your filing status.						
	• Married filing jointly or Qualifying widow(er)—\$60,000						
	• Head of household—\$50,000						
	• All other filing statuses—\$40,000	33	50,000.				
34	Subtract line 33 from line 3. If zero or less, enter -0	34	6,225,703.				
35	Enter the amount from line 33	35	50,000.				
36	Divide line 34 by line 35. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or						
	more, enter 1.000	36	1.				
37	Multiply line 32 by \$2,000	37	4,000.				
38	Multiply line 37 by line 36	38	4,000.				
39	Subtract line 38 from line 37	39	0.				
40	Subtract line 39 from line 29. If zero or less, enter -0 This is your additional tax. If more than zero, enter						
	this amount on Schedule 2 (Form 1040), line 19	40	2,000.				

Department of the Treasury

Internal Revenue Service

Health Savings Accounts (HSAs)

► Attach to Form 1040, 1040-SR, or 1040-NR. ▶ Go to www.irs.gov/Form8889 for instructions and the latest information. OMB No. 1545-0074 Attachment Sequence No. 52

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

DANIEL L JOHNSON

Social security number of HSA beneficiary. If both spouses have HSAs, see instructions ▶ 529-95-0491

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required. HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse. Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2021. X Family 2 HSA contributions you made for 2021 (or those made on your behalf), including those made from January 1, 2022, through April 15, 2022, that were for 2021. Do not include employer contributions, 2 7,200. If you were under age 55 at the end of 2021 and, on the first day of every month during 2021, you were, or were considered, an eligible individual with the same coverage, enter \$3,600 (\$7,200 for 3 7,200. Enter the amount you and your employer contributed to your Archer MSAs for 2021 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2021, also 4 Ο. 5 5 7,200. 6 Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2021, see the instructions for the amount to enter . . . 6 7,200. 7 If you were age 55 or older at the end of 2021, married, and you or your spouse had family coverage under an HDHP at any time during 2021, enter your additional contribution amount. See instructions 0. 7 8 8 7,200. 9 Employer contributions made to your HSAs for 2021 10 Qualified HSA funding distributions Add lines 9 and 10 11 11 Subtract line 11 from line 8. If zero or less, enter -0- 7,200. 12 12 HSA deduction. Enter the smaller of line 2 or line 12 here and on Schedule 1 (Form 1040), Part II, line 13 7,200. 13 13 Caution: If line 2 is more than line 13, you may have to pay an additional tax. See instructions. Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse. 5,546. Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were 14b 14c 5,546. Qualified medical expenses paid using HSA distributions (see instructions) 15 15 5,546. Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this 16 16 0. 17a If any of the distributions included on line 16 meet any of the Exceptions to the Additional b Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c Part III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse. 18 18 19 19 Total income, Add lines 18 and 19, Include this amount on Schedule 1 (Form 1040), Part I, line 8z, 20 20 Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 21 21

Form **8995-A**

Qualified Business Income Deduction

► Attach to your tax return.

▶ Go to www.irs.gov/Form8995A for instructions and the latest information.

OMB No. 1545-2294

2021

Attachment
Sequence No. 55A

Department of the Treasury Internal Revenue Service Name(s) shown on return

DANIEL L JOHNSON

Your taxpayer identification number 529-95-0491

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

Use this form if your taxable income, before your qualified business income deduction, is above \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

Part	Trade, Business, or Aggregation Information									
Complete Schedules A, B, and/or C (Form 8995-A), as applicable, before starting Part I. Attach additional worksheets when needed.										
See instructions.										
1	(a) Trade, business, or aggregation name	(b) Check if specified service (c) Check if aggregation		(d) Taxpayer identification number	(e) Check if patron					
Α										
В										
С										
Part	Determine Your Adjusted Qualified Business I	ncome								
			A	В	С					
2	Qualified business income from the trade, business, or aggrees instructions									
3	Multiply line 2 by 20% (0.20). If your taxable income is \$1 or less (\$164,925 if married filing separately; \$329,800 if n filing jointly), skip lines 4 through 12 and enter the amount line 3 on line 13	narried nt from								
4	Allocable share of W-2 wages from the trade, busine aggregation									
5	Multiply line 4 by 50% (0.50)									
6	Multiply line 4 by 25% (0.25)	6								
7	Allocable share of the unadjusted basis immediately acquisition (UBIA) of all qualified property									
8	Multiply line 7 by 2.5% (0.025)									
9	Add lines 6 and 8									
10	Enter the greater of line 5 or line 9	10								
11	W-2 wage and UBIA of qualified property limitation. Ent									
	smaller of line 3 or line 10	11								
12	Phased-in reduction. Enter the amount from line 26, if any $% \left(1\right) =\left(1\right) \left(1\right) $	12								
13	Qualified business income deduction before patron red Enter the greater of line 11 or line 12									
14	Patron reduction. Enter the amount from Schedule D (Form 89 line 6, if any. See instructions									
15	Qualified business income component. Subtract line 14 from									
16	Total qualified business income component. Add all an									
	reported on line 15									

Page 2 Form 8995-A (2021)

Part III **Phased-in Reduction**

Complete Part III only if your taxable income is more than \$164,900 but not \$214,900 (\$164,925 and \$214,925 if married filing separately; \$329,800 and \$429,800 if married filing jointly) and line 10 is less than line 3. Otherwise, skip Part III.

						Α		В			С
17	Enter the amounts from line 3			17							
18	Enter the amounts from line 10			18							
19	Subtract line 18 from line 17			19							
20	Taxable income before qualified business income deduction	20									
21	Threshold. Enter \$164,900 (\$164,925 if married filing separately; \$329,800 if married filing jointly)	21									
22	Subtract line 21 from line 20	22									
23	Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	23									
24	Phase-in percentage. Divide line 22 by line 23	24	%								
25	Total phase-in reduction. Multiply line 19 by	line 24	4	25							
26	Qualified business income after phase-in re	ductio	on. Subtract line								
	25 from line 17. Enter this amount here ar										
	corresponding trade or business			26							
Part	IV Determine Your Qualified Busines	ss Inc	come Deduction	n							
27	Total qualified business income compo										
	businesses, or aggregations. Enter the amou					27					
28	Qualified REIT dividends and publicly trace (loss). See instructions					28	1	.,305.			
29	Qualified REIT dividends and PTP (loss) carry					29 (,)			
30	Total qualified REIT dividends and PTP inc										
	less than zero, enter -0			a i i a		30	1	,305.			
31	REIT and PTP component. Multiply line 30 b	y 20%	6 (0.20)			31		261.			
32	Qualified business income deduction before					and 31		. ▶	32		261.
33	Taxable income before qualified business income	come	deduction			33		,232.			
34	Net capital gain. See instructions					34	6,211				
35	Subtract line 34 from line 33. If zero or less,								35		44,645.
36	Income limitation. Multiply line 35 by 20% (0	.20) .							36		8,929.
37	Qualified business income deduction before under section 199A(g). Enter the smaller of li								37		261.
38	DPAD under section 199A(g) allocated from	n an a	agricultural or hor	ticultu	ural cod	perati	ve. Don'	t enter			
	more than line 33 minus line 37								38		
39	Total qualified business income deduction. A	Add lin	es 37 and 38					. 🕨	39		261.
40	Total qualified REIT dividends and PTP (lo	,	•								
	greater, enter -0								40	(0.)
										Form 8	995-A (2021)

Form **8960**

Department of the Treasury

Net Investment Income Tax— Individuals, Estates, and Trusts

► Attach to your tax return.

OMB No. 1545-2227

2021

Attachment Sequence No. 72

 Internal Revenue Service (99)
 ► Go to www.irs.gov/Form8960 for instructions and the latest information.
 Attachment Sequence No. 72

 Name(s) shown on your tax return
 Your social security number or EIN

 DANIEL L JOHNSON
 529-95-0491

יאבעע	LED I COINSON		347 73	しュンエ
Part	Investment Income ☐ Section 6013(g) election (see instructions)	·		
	Section 6013(h) election (see instructions)			
	Regulations section 1.1411-10(g) election (see in	structions)		
1	Taxable interest (see instructions)		. 1	3,967.
2	Ordinary dividends (see instructions)		. 2	51,555.
3	Annuities (see instructions)		. 3	31,333.
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see			
та	instructions)	4a -24,8	07.	
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b 24,8	07.	
С	Combine lines 4a and 4b		. 4c	0.
5a	Net gain or loss from disposition of property (see instructions)	5a 6,206,1	81.	
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b		
С	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c		
d	Combine lines 5a through 5c		. 5d	6,206,181.
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	6,261,703.
Part				
9a	Investment interest expenses (see instructions)	9a		
b	State, local, and foreign income tax (see instructions)		75.	
C	Miscellaneous investment expenses (see instructions)	9c	751	
d	Add lines 9a, 9b, and 9c		. 9d	2,275.
10	Additional modifications (see instructions)			2,213.
11	Total deductions and modifications. Add lines 9d and 10			2,275.
Part		<u> </u>	. !!	2,2/3.
			47	
12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, of the state and trusts, complete lines 18s. 21 If Fore or less enter 0.			6 250 420
	Estates and trusts, complete lines 18a–21. If zero or less, enter -0 Individuals:		. 12	6,259,428.
40		40 6 000 0		
13	Modified adjusted gross income (see instructions)	13 6,275,7		
14	Threshold based on filing status (see instructions)	14 200,0		
15	Subtract line 14 from line 13. If zero or less, enter -0	15 6,075,7		
16	Enter the smaller of line 12 or line 15		. 16	6,075,703.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). En		I	
	on your tax return (see instructions)		. 17	230,877.
	Estates and Trusts:			
18a	Net investment income (line 12 above)	18a		
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b		
С	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	
	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.1)			
21	include on your tax return (see instructions)			

BAA

Form **4562**

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2021

Attachment
Sequence No. 179

Name(s) shown on return Business or activity to which this form relates Identifying number DANIEL L JOHNSON Section 179 Summary 529-95-0491 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 1,050,000. 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . 2,620,000. 4 0. Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 1,050,000. 6 (a) Description of property (b) Cost (business use only) (c) Elected cost from Schedule K-1 1. 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 **9** Tentative deduction. Enter the **smaller** of line 5 or line 8 9 1. 10 Carryover of disallowed deduction from line 13 of your 2020 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 21,200. 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 1. 13 Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12 0. Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 Property subject to section 168(f)(1) election 15 **16** Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2021 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2021 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use only—see instructions) (e) Convention (f) Method (g) Depreciation deduction placed in period service 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property 27.5 yrs. MM S/L h Residential rental 27.5 yrs. MM S/L property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L **b** 12-year 12 yrs. **c** 30-year ММ SIL 30 yrs. d 40-vear 40 yrs. MM S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . 23

Passive Activity Loss Limitations

► See separate instructions.

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

▶ Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008 Attachment Sequence No. **858**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Identifying number

DANI	IEL L JOHNSON				529	-95-	-0491
Par	t I 2021 Passive Activity Loss	5					
	Caution: Complete Parts IV ar	nd V before comple	eting Part I.				
	ll Real Estate Activities With Active Pa ance for Rental Real Estate Activities			ive participation, s	ee Special		
1a b c d	Activities with net income (enter the a Activities with net loss (enter the amore Prior years' unallowed losses (enter the Combine lines 1a, 1b, and 1c)	1d				
All Ot	her Passive Activities						
	Activities with net income (enter the a Activities with net loss (enter the amor Prior years' unallowed losses (enter the Combine lines 2a, 2b, and 2c	unt from Part V, co ne amount from Pa	olumn (b)) art V, column (c))	2b (2c (191. -5,105.))	2d	-4,914.
3	Combine lines 1d and 2d. If this line i all losses are allowed, including any plosses on the forms and schedules no	s zero or more, sto prior year unallowe	op here and inclu	de this form with y on line 1c or 2c.	our return;	3	-4,914.
01		oss (and line 1d is		ip Part II and go to			d
	on: If your filing status is married filing . Instead, go to line 10.	separately and yo	bu lived with your	spouse at any tim	e during the	year,	do not complete
Par		ntal Real Estate	Activities With	Active Participa	ation		
	Note: Enter all numbers in Par			-			
4	Enter the smaller of the loss on line 1		$\overline{}$			4	
5	Enter \$150,000. If married filing separ	ately, see instructi	ons	5	İ		
6	Enter modified adjusted gross income	e, but not less than	zero. See instruc	tions 6			
_	Note: If line 6 is greater than or equal on line 9. Otherwise, go to line 7.		s 7 and 8 and ent				
7	Subtract line 6 from line 5 Multiply line 7 by 50% (0.50). Do not el	otor more than \$25		7	notructions	0	
8 9					1	9	0.
Pari						3	0.
10	Add the income, if any, on lines 1a an	d 2a and enter the	total			10	191.
11	Total losses allowed from all passiv out how to report the losses on your to	e activities for 20 ax return	21. Add lines 9 ar	nd 10. See instructi	+	11	191.
Part	IV Complete This Part Before	e Part I, Lines 1	a, 1b, and 1c. S	ee instructions.			
	Name of activity	Over	rall ga	in or loss			
		(d) Gain	1	(e) Loss			

BAA

Total. Enter on Part I, lines 1a, 1b, and 1c ▶

Form 8582 (2021) Page **2**

Part V Complete This Part Before	e Paı	rt I, Lines 2	a, 2b, an	d 2c. S	ee instruc	tions.				
	Current year Prior years Overall gain							ain or loss		
Name of activity	(a) Net income (line 2a)		(b) Net loss (line 2b)		(c) Unallowed loss (line 2c)		(d) Gain		(e) Loss	
BRIDGE OPPORTUNITY ZONE FUND IV LP		0.	4,948.		,				4,948.	
CYNOSURE PARTNERS 2020 PV LP		191.		0.			193	1.		
GRIFFIN CAPITAL QUALIFIED OPPORTUNITY		0.	157.						157.	
Total. Enter on Part I, lines 2a, 2b, and 2c ▶		191.		105.						
Part VI Use This Part if an Amoun	nt Is S	Shown on F	art II, Li	n e 9. S	ee instruc	tions.				
Name of activity	and to be	or schedule line number reported on instructions)	(a) Lo)SS	(b) Ra	tio	(c) Special allowance		(d) Subtract column (c) from column (a).	
					4					
Total		▶			1.00)				
Part VII Allocation of Unallowed L	.osse	s. See instri	uctions.							
Name of activity		Form or sche and line nun to be reporte (see instructi	nber d on	(a) l	_oss	(b) Ratio	(c)) Unallowed loss	
BRIDGE OPPORTUNITY ZONE FUND IV	LP	E Ln 28	В		4,948.	0.9	6924584		4,763.	
GRIFFIN CAPITAL QUALIFIED OPPORTUNI	_	E Ln 28			157.		3075416		151.	
		E III 20D								
Total			•		5,105.		1.00		4,914.	
Part VIII Allowed Losses. See instru	uction	ns.								
Name of activity		Form or sche and line nun to be reporte (see instructi	nber ed on	(a) l	_oss	(b) Ur	nallowed loss	(c) Allowed loss	
BRIDGE OPPORTUNITY ZONE FUND IV	LP	E Ln 28	В		4,948.		4,763.		185.	
GRIFFIN CAPITAL QUALIFIED OPPORTUNITY		E Ln 28	D		157.		151.		6.	
Total	•		•		5.105.		4.914.		191.	

Initial and Annual Statement of Qualified Opportunity Fund (QOF) Investments ► Go to www.irs.gov/Form8997 for the latest information.

Department of the Treasury Internal Revenue Service

► Attach to your tax return.

OMB No. 1545-0123 Attachment Sequence No. 997

Name

Tax identification number (see instructions)

DANIEL L	JOHNSON			529-95-0491	
		estment Holdings Due to Deferrals Prior to Begin n last year's ending QOF investment holdings, attach			
			T .		n held in QOF
(a) Qualified	(b) Date QOF	(c) Description of QOF investment	(d) Special		
Opportunity	investment	(for example, 100 shares or 25% interest)	gain	(e) Amount of short-term	(f) Amount of long-term
Fund (QOF)	acquired	(io. oxampio, roo onaroo or 2070 into oot)	code	deferred gain	deferred gain
EÌN	(MM/DD/YYYY)			remaining in QOF	remaining in QOF
1 Enter th	ne totals, if any	y, from continuation sheet	. •		
2 Enter th	ne totals from	columns (e) and (f)			
Part II C	urrent lax Y	ear Capital Gains Deferred by Investing in QOF			
(a)	(b)	(c)	(d)		nvested in QOF
Qualified Opportunity	Date QOF investment	Description of interest acquired (for example, 100 shares or 25% interest)	Special gain	(e)	(f) Amount of long-term
Fund (QOF)	acquired	(for example, 100 shares of 25% interest)	code	Amount of short-term deferred gain	deferred gain
EIN	(MM/DD/YYYY)		0000	remaining in QOF	remaining in QOF
	,				
02 2072722	12/10/2021	CTIC OUNTIETED ODDODUMITES FUND			350 000
83-38/3/22	12/10/2021	GTIS QUALIFIED OPPORTUNITY FUND			350,000.
85-4323971	12/31/2021	BRIDGE CAPITAL OPPORTUNITY ZONE			300,000.
85-3274399	12/31/2021	GRIFFIN CAPITAL QUALIFIED OPPORTUNITY			350,000.
1 Enter the	ne totals, if any	, from continuation sheet	. ▶		
2 Enter th	ne totals from o	columns (e) and (f). See instructions for reporting on Form 8	949 ▶		1,000,000.
Applicability	of Special F	Rules Regarding the Waiver of Certain Treaty Bend	efits		
Are you a for	reign eligible ta	axpayer whose tax year began after March 13, 2020? See in	nstructio	ons for more informa	ation.
-		t to defer tax on an eligible gain by investing in a QOF unless			
	•	estion and go to Part III.			
		<u> </u>	rad ta at	ttach a writtan atata	ment for the portion
		taxpayer, see the instructions to determine if you are requi			
	ax year ending	g after December 21, 2017, and all tax years that began after	er Decer	mber 21, 2017, and	on or before March
13, 2020.					
	-	s on Future Inclusions by a Foreign Eligible Taxpa	yer (to	r Tax Years Begi	nning After
March 13, 20					
		waive any benefits available under an applicable U.S. incom			
		vesting in a QOF from being subject to federal income tax	at the tii	me of inclusion? See	e instructions for
more informa	ation.				
Yes. Re	eport the defer	ral of the eligible gain in Part II and on Form 8949.			
	•	et to defer tax on an eligible gain by investing in a QOF. Do	not rep	ort the deferral of	anv otherwise

eligible gain in Part II or on Form 8949.

1011110997 (2021)					rage Z		
Part III In	clusion Eve	nts and Certain Other Transfers During the Currer	t Tax \	/ ear			
(a)	(b)	(c)	(d)	Deferred gain included due to disposition of QOF interest			
Qualified Opportunity Fund (QOF) EIN	Date of event (MM/DD/YYYY)	Description of event (for example, sale of 100 shares, gift of 25% interest, or distribution of \$1,000, etc.)	Special gain code	(e) Amount of previously deferred short-term gain now included in taxable income	(f) Amount of previously deferred long-term gain now included in taxable income		
1 Enter th	ne totals, if any	r, from continuation sheet	. ▶				
2 Enter th	ne totals from o	columns (e) and (f). See instructions for reporting on Form 8	949 ▶				
		sposed of any investment(s) and didn't receive a Form 109 Instructions for Form 8949 for reporting requirements of a			on from the QOF or		
Part IV To	otal QOF Inv	estments Due to Deferrals at Year End (see instruc	tions)				
(a)	(b)	(c)	(d)	Deferred gain invested in QOF investment			
Qualified Opportunity Fund (QOF) EIN	Date QOF investment acquired (MM/DD/YYYY)	Description of interest acquired (for example, 100 shares or 25% interest)	Special gain code	(e) Amount of short-term deferred gain invested in QOF	(f) Amount of long-term deferred gain invested in QOF		
83-3873722	12/10/2021	GTIS QUALIFIED OPPORTUNITY FUND			350,000.		
85-4323971	12/31/2021	BRIDGE CAPITAL OPPORTUNITY ZONE			300,000.		
85-3274399	12/31/2021	GRIFFIN CAPITAL QUALIFIED OPPORTUNITY			350,000.		
1 Enter th	ne totals, if any	, from continuation sheet	. ▶				
2 Enter th	ne totals from (columns (e) and (f)	. ▶		1,000,000.		

REV 09/09/22 PRO

Department of the Treasury Internal Revenue Service (99)

Application for Automatic Extension of Time To File U.S. Individual Income Tax Return

► Go to www.irs.gov/Form4868 for the latest information.

OMB No. 1545-0074

2021

There are three ways to request an automatic extension of time to file a U.S. individual income tax return.

- 1. You can pay all or part of your estimated income tax due and indicate that the payment is for an extension using Direct Pay, the Electronic Federal Tax Payment System, or using a credit or debit card. See How To Make a Payment, later.
- 2. You can file Form 4868 electronically by accessing IRS e-file using your tax software or by using a tax professional who uses e-file.
- 3. You can file a paper Form 4868 and enclose payment of your estimate of tax due (optional).



It's Convenient, Safe, and Secure

IRS e-file is the IRS's electronic filing program. You can get an automatic extension of time to file your tax return by filing Form 4868 electronically. You'll receive an electronic acknowledgment once you complete the transaction. Keep it with your records. Don't mail in Form 4868 if you file electronically, unless you're making a payment with a check or money order. See Pay by Check or Money

Complete Form 4868 to use as a worksheet. If you think you may owe tax when you file your return, you'll need to estimate your total tax liability and subtract how much you've already paid (lines 4, 5, and 6 below).

Several companies offer free e-filing of Form 4868 through the Free File program. For more details, go to www.irs.gov/FreeFile.



Pay Electronically

You don't need to file Form 4868 if you make a payment using our electronic payment options. The IRS will automatically process an extension of time to file when you pay part or all of your estimated income tax electronically. You can pay online or by phone. See Making Payments Electronically, later.



E-file Using Your Tax Software or Through a Tax Professional

Refer to your tax software package or tax preparer for ways to file electronically. Be sure to have a copy of your 2020 tax returnyou'll be asked to provide information from the return for taxpaver verification. If you wish to make a payment, you can pay by electronic funds withdrawal or send your check or money order to the address shown in the middle column under Where To File a Paper Form 4868, later.



File a Paper Form 4868

If you wish to file on paper instead of electronically, fill in the Form 4868 below and mail it to the address shown under Where To File a Paper Form 4868, later.

For information on using a private delivery service, see Private Delivery Services, later.

Note: If you're a fiscal year taxpayer, you must file a paper

General Instructions

Purpose of Form

Use Form 4868 to apply for 6 more months (4 if "out of the country" (defined later under Taxpayers who are out of the country) and a U.S. citizen or resident) to file Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.

Gift and generation-skipping transfer (GST) tax return (Form 709). An extension of time to file your 2021 calendar year income tax return also extends the time to file Form 709 for 2021. However, it doesn't extend the time to pay any gift and GST tax you may owe for 2021. To make a payment of gift and GST tax, see Form 8892. If you don't pay the amount due by the regular due date for Form 709, you'll owe interest and may also be charged penalties. If the donor died during 2021, see the instructions for Forms 709 and 8892.

3

Qualifying for the Extension

To get the extra time, you must:

- 1. Properly estimate your 2021 tax liability using the information available to you,
- 2. Enter your total tax liability on line 4 of Form 4868, and
- 3. File Form 4868 by the regular due date of your return.



Although you aren't required to make a payment of the tax you estimate as due, Form 4868 doesn't extend the time to pay taxes. If you don't pay the amount due by the regular

due date, you'll owe interest. You may also be charged penalties. For more details, see Interest and Late Payment Penalty, later. Any remittance you make with your application for extension will be treated as a payment of tax.

You don't have to explain why you're asking for the extension. We'll contact you only if your request is denied.

Don't file Form 4868 if you want the IRS to figure your tax or you're under a court order to file your return by the regular due date.

▼ DETACH HERE ▼

Form **4868**

Department of the Treasury

Application for Automatic Extension of Time To File U.S. Individual Income Tax Return

Internal Revenue Service (99) For calendar year 2021, or other tax year beginning

2021, and ending

REV 09/09/22 PRO 1555

Part I Identification Part II Individual Income Tax \$ 1,482,721. 4 Estimate of total tax liability for 2021. . 38,004. DANIEL L JOHNSON **5** Total 2021 payments 6 Balance due. Subtract line 5 from line 4. 1,444,717. 134 SOUTH 1160 WEST CIRCLE See instructions 1,450,000. SAINT GEORGE, UT 84770 7 Amount you're paying (see instructions) . >

Check here if you're "out of the country" and a U.S. citizen or resident. See instructions

Check here if you file Form 1040-NR and didn't receive wages as an employee subject to U.S. income tax

529-95-0491

529950491 @@ JOHN 30 0 202112 670

Forms W-2 & W-2G Summary • Keep for your records

Name(s) Shown on Return DANIEL L JOHNSON

Social Security Number 529-95-0491

Form W-2 Employer	SP	Wages	Federal Tax	State Wages	State Tax	
TORKABC LLC		46,007.	5,004.	46,007.	2,280.	
	.				-	_
	·					—
Totals		46,007.	5,004.	46,007.	2,280.	

Form W-2 Summary

Box N	o. Description	Taxpayer	Spouse	Total
1 Tot	al wages, tips and compensation:			
	on-statutory & statutory wages not on Sch C	46,007.		46,007.
	tatutory wages reported on Schedule C		-	
	oreign wages included in total wages		-	
	nreported tips	0.		0.
2	Total federal tax withheld	5,004.		5,004.
	Total social security wages/tips	52,364.		52,364.
4	Total social security tax withheld	3,247.		3,247.
5	Total Medicare wages and tips	52,364.		52,364.
6	Total Medicare tax withheld	759.		759.
8	Total allocated tips			
9	Not used			
10 a	Total dependent care benefits			
b	Offsite dependent care benefits			
C	Onsite dependent care benefits			
11	Total distributions from nonqualified plans			
12 a	Total from Box 12			
b	Elective deferrals to qualified plans			
C	Roth contrib. to 401(k), 403(b), 457(b) plans.			
d	Deferrals to government 457 plans			
e	Deferrals to non-government 457 plans			
f	Deferrals 409A nonqual deferred comp plan Income 409A nonqual deferred comp plan	·		
g	Uncollected Medicare tax			
h i	Uncollected social security and RRTA tier 1			
	Uncollected RRTA tier 2			
, k	Income from nonstatutory stock options	·		
Ì	Non-taxable combat pay			
m	QSEHRA benefits	·		
n	Total other items from box 12			
14 a	Total deductible mandatory state tax			
b	Total deductible charitable contributions	-		
С	Total state deductible employee expenses			
d	Total RR Compensation			
е	Total RR Tier 1 tax			
f	Total RR Tier 2 tax			
g	Total RR Medicare tax			
ĥ	Total RR Additional Medicare tax			
i	Total RRTA tips			
j	Total other items from box 14			
k	Total sick leave subject to \$511 limit			
I	Total sick leave subject to \$200 limit			
m	Total emergency family leave wages			
16	Total state wages and tips	46,007.		46,007.
17	Total state tax withheld	2,280.		2,280.
19	Total local tax withheld			
				<u> </u>

Form 1099-B Worksheet

► Keep for your records

				1		
Name(s) Shown on DANIEL L JOH			Social Security No. 529-95-0491			
Acct Number Owner of accour	ng financial institution ► ZONOS ► Re nt ► Re re not reported to IRS . ►	eporter's Tax ID .			-	
	Form 8949 Reporting Exception Any transactions that are eligible to be reported.	ed directly on Sche	dule D,			
	bypassing Form 8949, may be sui	Proceeds	C	ost Basis	1	
Box D transac	tions to report directly on Sch D, Line 1a (sho tions to report directly on Sch D, Line 8a (long te any transactions summarized above when ma	g term)	able below	.)		
	Quick Entry Table additional sale info to enter for a sale, double-click aciated Capital Gain (Loss) Adjustments Works	k on any field in th				

Sale#		Property D	escripti	on					
8949 Box	Date Sold Date Acquired		Acquired	Sales Price (Proceeds)		Cost or Other Basis		Disallowed Wash Sale	
Adjustment Amount*		Adjust Code	ment (s)*	Holdir Perio		Basis I to	Reported IRS?		Reported on Form 1099B?
1	ZONOS								
E	07	7/31/21		Various	7,125	5,000.00		0.00	
				L		Yes	X No	Yes	X No
		•		•					
						Yes	No	Yes	No No
						Yes	No	Yes	No
					`	Yes	No	Yes	No

	Sale Results for Form 8949										
#	# 8949 Description Sale		Cost	Adj.	Adjustment	Gain or	S/				
	Box		Proceeds	Basis	Code(s)	Amount	(Loss)	L			
1	E	ZONOS	7,125,000.00	0.00			7,125,000.00	L			
						_					

Brokerage Statement (Form 1099-B or substitute) Summary Table

This table shows gains and losses by "8949 Box" (i.e. the Box to be checked on Form 8949) to assist in reconciling the transactions in the Quick Entry Table with the brokerage statement they may have been reported on. Note that individual sales are rounded off to the nearest dollar. As result, the various summarized values below may differ slightly from statement totals.

Sale Type	Proceeds	Cost Basis	Gain/(Loss)	Adjustment Amt	Adj Gain/(Loss)	Code(s)
Box A						
Box B						
Box C						
Box D						
Box E	7,125,000.00	0.00	7,125,000.00		7,125,000.00	
Box F						
Totals	7,125,000.00	0.00	7,125,000.00		7,125,000.00	

Ρ	ag	е	2

					Page
	Form 8949	and Schedule D	Totals		
Totals (gains/losses as they	will appear on For	m 8949 and Sched	lule D.	
Note that these totals ma	ay differ from your sta	tement to comply	with IRS rounding	instructio	ons. (See help)
Location on tax return	Proceeds	Cost Basis	Adjustment Amt		
Sch D, Line la					
Form 8949, Box A					
Form 8949, Box B					
Form 8949, Box C					
Sch D, Line 8a					
Form 8949, Box D					
Form 8949, Box E	7,125,000.00	0.00			7,125,000.00
Form 8949, Box F					
Includes summary Total Federal Backup Withh	of withholding found o	•	Gain (Loss) Adjusi		orksheets.
State Backup Witholding				State ID	
Total State Backup Withhold					
Total Collectible Gain/(Loss)					

Maximum 60% exclusion gain	
Maximum 100% exclusion gain	
PDF Attachment Does a statement need to be attached to this return?	Yes X No

Total Gain

Excluded Gain

Net Gain

Qualified Small Business (QSB) gain (Sec 1202)

Form 1099-B Worksheet Keep for your records

Name(s	s) Sho	own on	Return							Social S	Security No.	
		JOH:									5-0 4 91	
Nam	e of	report	ng financial	institutio	on ► FIDE	LITY						
Acct	Name of reporting financial institution ► FIDELITY Acct Number											
	Owner of account											
Trans	sactio	ons we	re not reporte	d to IRS	. ▶							
	000			u 10 10								
	Form 8949 Reporting Exception Transactions											
	Any transactions that are eligible to be reported directly on Schedule D,											
	bypassing Form 8949, may be summarized here.											
Po	Box A transactions to report directly on Sch D, Line 1a (short term) 194,547.32 194,121.44											
Box	x A u	alisac	tions to repo	nt direct	ly on Sch	D, Line	na (Siloit	tem		7.34	194,1	21.44
										امط ملط		
(D0	not	aupiica	ite any transa	ictions su	ımmarızed	above w	nen maki	ng e	ntries in the ta	ible bei	ow.)	
					<u> </u>	als Enti	n, Tabla					
		,			Qui	ICK EIIU	ry Table				0 : 17	
IT									ny field in the			
	tr	ie asso	ciated Capita	ıı Gain (I	_oss) Adji	istments	s worksh	eet.	(See field help	o tor m	ore aetails.,)
C-	I_#		Dramant. 1)	lan .							
Sal			Property I	escripti	on		1 5 '		•		D: "	
89		D	ate Sold	Date	Acquired		les Price		Cost or		Disallov	
1 1 -	ΟX						roceeds		Other Bas		Wash S	
		tment	Adjus	tment		ding	Bas		eported		Reported o	
	Amo	ount*	Cod	e(s)*	Per	iod		to I	RS?	F	orm 1099E	3?
										_		
							4					
							Yes		No	Yes		lo
							Yes		No	Yes	N	lo
							Yes		No	Yes	\	lo
							Yes		No	Yes	N	lo
L.	1				Sale Re							
#	894		escription	Sa		Cost		dj.	Adjustmen	it	Gain or	S/
	Bo	X		Proce	eeds	Basis	Coc	le(s)	Amount		(Loss)	L
											<u> </u>	
												_
			Brokera	ge State	ment (Forr	n 1099-l	3 or subs	titut	e) Summary	Table		_
	This i	table s	hows gains ai	nd losses	bv "8949 l	Box" (i.e.	the Box	to be	checked on I	Form 8	949) to assi	ist in
	recor	nciling	the transactio	ns in the	Quick Enti	ry Table	with the b	roke	rage statemei	nt they	may have b	een
	re	ported	on. Note that	individua	al sales are	rounde	d off to the	e nea	arest dollar. A	s resúlt	, the variou	S
		•							statement to			
Sale	Type	e Pro	oceeds	Cost B		Gain/(L		Adi	ustment Amt	Adi Ga	ain/(Loss)	Code(s)
Box		- 	194,547.3		,121.44		425.88			,	425.88	
Box					· · · · · · · ·							
Box												
Box												
Box												
Box				1				-				
Tota		-	194,547.3	2 194	,121.44		425.88				425.88	
· Jia			-/ - - -	- x/T	,		140.00			l	120.00	

Ρ	ag	е	2

					_ Page
	Form 8949	and Schedule D	Totals		
Totals gai	ins/losses as they t	will appear on Fori	m 8949 and Sched	dule D.	
Note that these totals may	differ from your sta	tement to comply	with IRS rounding	instruction	ns. (See help)
Location on tax return	Proceeds	Cost Basis	Adjustment Amt		
Sch D, Line la	194,547.32	194,121.44			
Form 8949, Box A					
Form 8949, Box B					
Form 8949, Box C					
Sch D, Line 8a					
Form 8949, Box D					
Form 8949, Box E					
Form 8949, Box F					
Includes summary of Total Federal Backup Withhold	withholding found o		Gain (Loss) Adjusi	tment Wor	ksheets.
State Backup Witholding				State ID	
Total State Backup Withholding	g				

Total Collectible Gain/(Loss)						
Qualified Small Business (QSB) gain (Sec 1202)	Total Gain	Excluded Gain	Net Gain			
Maximum 50% exclusion gain						
Maximum 60% exclusion gain						
Maximum 75% exclusion gain						
Maximum 100% exclusion gain						
PDF Attachment Does a statement need to be attached to this return? Yes						

Form 1099-B Worksheet

		Keep	o for your records		
` '	own on Return JOHNSON				ocial Security No. 19-95-0491
Acct Nur Owner of				er's Tax ID	► <u>04-3523567</u>
	Any trans	Form 8949 Reporti actions that are eligible bypassing Form 894	le to be reported dire	ectly on Schedule	e D,
Box D t	ransactions to repo	ort directly on Sch D, ort directly on Sch D octions summarized at	, Line 1a (short teri , Line 8a (long tern	Proceeds n)	Cost Basis e below.)
Quick Entry Table If you have additional sale info to enter for a sale, double-click on any field in the table to QuickZoom to the associated Capital Gain (Loss) Adjustments Worksheet. (See field help for more details.)					
Sale# 8949	Property I Date Sold	Description Date Acquired	Sales Price	Cost or	Disallowed
0343	Date 3010	Date Acquired	Jaies File	_ COST OI	Disallowed

Sale#		Property D								
8949 Box		Sold	Date /	Acquired		es Price oceeds)	Cost or Other Bas		٧	isallowed Vash Sale
Adjus Am	stment ount*	Adjust Code		Holdir Perio		Basis F to	Reported IRS?		Report Form	orted on 1099B?
1	FIDELIT	ΓY								
A	12	2/31/21	(08/11/21	92	2,398.67	91,529	.46		232.62
				S		Yes X	No	Yes	X	No
					_4	Yes	No	Yes		No
						Yes	No	Yes	3	No
						Yes	No	Yes	3	No

	Sale Results for Form 8949							
#	8949	Description	Sale	Cost	Adj.	Adjustment	Gain or	S/
	Box	-	Proceeds	Basis	Code(s)	Amount	(Loss)	L
1	A	FIDELITY	92,398.67	91,529.46	W	232.62	1,101.83	S

Brokerage Statement (Form 1099-B or substitute) Summary Table

This table shows gains and losses by "8949 Box" (i.e. the Box to be checked on Form 8949) to assist in reconciling the transactions in the Quick Entry Table with the brokerage statement they may have been reported on. Note that individual sales are rounded off to the nearest dollar. As result, the various summarized values below may differ slightly from statement totals.

Sale Type	Proceeds			Adjustment Amt	Adj Gain/(Loss)	Code(s)
Box A	92,398.67	91,529.46	869.21	232.62	1,101.83	M
Box B						
Box C						
Box D						
Box E						
Box F						
Totals	92,398.67	91,529.46	869.21	232.62	1,101.83	

Ρ	ag	е	2

Form 8949 and Schedule D Totals Totals gains/losses as they will appear on Form 8949 and Schedule D. Note that these totals may differ from your statement to comply with IRS rounding instructions. (See help) Adjustment Amt Code(s) Adj Gain/(Loss) Location on tax return Proceeds **Cost Basis** Sch D, Line la Form 8949, Box A 92,399.00 91,529.00 233.00W 1,103.00 Form 8949, Box B Form 8949, Box C Sch D, Line 8a Form 8949, Box D Form 8949, Box E

	•			
-	·•			orksneets.
			State ID	
	<u>.</u>			
ain (Sec 1202)	Total Ga	in Exclude	d Gain	Net Gain
ain	>	*		
ain	>			
gain	•			
abad to this return	n?			Ves V No
	aholding found or	hholding found on related Capital (ain (Sec 1202) Total Gain Excluder ain	State ID State ID Ain (Sec 1202) Ain

Maximum 100% exclusion gain	•
PDF Attachment Does a statement need to be attached to this return?	Yes X No

Capital Gain (Loss) Adjustments Worksheet • Keep for your records

. ,	own on Return JOHNSON			Social Security No. 529-95-0491
Part I	Values for Form 8949			
	any field in Part I to QuickZoom to its cor	responding entry or	n the Form 109	9-B Worksheet.
	·	GTIS QUALIFIE		
Sales P Adjustn	old	Date Acquired Cost Basis Adjustment Amou		
corres	ds above, other than Adjustment Code (sponding fields on the Form 1099-B Worksions. (Form help can be accessed by righ	heet. See Part I in	the help for this	
Part II	Manual Adjustments			
Do not of other that		ewhere. Adjustment in Part IV, or in son Adjustment Amour	s requiring entine cases, on the	ries on forms e specific form.
Part III	ne cost basis and proceeds are totals from Specific Adjustments	n multiple sales (co	ode M).	
Fc	orm 1099-B reports an incorrect basis (c Check this box for employee stock sa QuickZoom to Employee Stock Transincome should be reported, or for all In	les requiring adjust saction Workshee centive Stock Option	ments. t if basis is inco on (ISO) sales	orrect, compensation ▶
	Allocated amounts from Employer Stock Transaction Worksheet a Number of shares b Date acquired c Date sold d Sales price e Cost or other basis f Adjustment amount	n a per share basis.	If this is not ar	ponents, any accurate
Tr	nis is a sale of a collectible item (code C)			
	ale includes an accrued market discoun			▶
=	mounts reported on Form 1099-B do not r Amount of sales fees/expenses	eflect sales fees/ex	xpenses that w	vere charged (code E).
Th	e cannot generate a loss for the following his is a vacation home or other personal units is a sale to a related party . his sale is nondeductible for another rea	use property with r		rental activity.
Ar	ny gain/loss from sale should not be included if only part of the gain (loss) is nomined			

Name(s) Shown on Return DANIEL L JOHNSON	Social Security No. 529-95-0491			
Part III Specific Adjustments (cont.)	<u>'</u>			
Other adjustments are required (code O). Amount (positive to increase gain, negative	to reduce)			
Loss from this sale is ordinary loss from a section Ordinary loss amount (leave blank if entire l				
Gain from this Qualified Small Business (QSB This QSB stock is eligible for 50% exclusion This is empowerment zone stock eligible for For 60% exclusion, enter gain as of 12/31/2 This QSB stock is eligible for 75% exclusion This QSB stock is eligible for 100% exclusion Amount of gain eligible for exclusion Amount of gain excluded	1 60% exclusion under section 1202. 1018 ▶ 1 under section 1202. 1 under section 1202. 1 under section 1202.			
All or part of the gain is deferred due to a rollov Qualified Small Business stock and certain stock Amount reinvested in qualified stock (leave Amount of gain deferred	s sold to ESOP plans. blank if sold to ESOP/co-op) ▶			
Loss from this sale is ordinary loss from a section Ordinary loss amount (leave blank if entire l				
Form 1099-B reports an incorrect holding periods	od (code T).			
Sale includes a disallowed wash sale loss (code	w). Amount (leave blank if all) ▶			
Part or all of the gain is from DC Zone/qualified community assets eligible for exclusion (code X). Amount of exclusion (leave blank if entire gain should be excluded)				
Check this box if this worksheet is used to report an election to defer the tax on an eligible gain for an investment in a Qualified Opportunity Fund (QOF) (report the actual sale of the eligible gain property on a Form 1099-B Worksheet, Asset Entry Worksheet, etc.). Complete the fields below. If sold for eligible gain and invested in Qualified Opportunity Fund (QOF): Cost of QOF investment				
Part IV Amounts That Will Be Reported on Fo	rms Other Than Form 8949			
Check if ordinary gain/loss FATCA requirement Federal tax withheld State name State tax withheld State identification number	Collectible gain/loss ▶ Accrued interest to Sch B ▶ Sec. 1242 loss on Form 4797 . ▶ Sec. 1244 loss on Form 4797 . ▶			

Capital Gain (Loss) Adjustments Worksheet • Keep for your records

. ,	own on Return L JOHNSON			Social Security No. 529-95-0491
Part I	Values for Form 8949			
	n any field in Part I to QuickZoom to its cor	responding entry o	the Form 109	9-R Worksheet
	•	BRIDGE CAPITA		
	<u></u>			
Sales P Adjustr	Price/Proceeds Z	Adjustment Amou		300,000.00
corres	elds above, other than Adjustment Code(sponding fields on the Form 1099-B Workstions. (Form help can be accessed by righ	heet. See Part I in	the help for this	
Part II	Manual Adjustments			
Do not other th		ewhere. Adjustment in Part IV, or in som Adjustment Amour	s requiring entine cases, on the	ries on forms e specific form.
T	he cost basis and proceeds are totals from	n multiple sales (co	ode M).	
Part III	Specific Adjustments			
F	orm 1099-B reports an incorrect basis (c Check this box for employee stock sa QuickZoom to Employee Stock Transincome should be reported, or for all In	les requiring adjusti saction Workshee	ments. t if basis is inco	prrect, compensation
	Allocated amounts from Employer Stock Transaction Worksheet a Number of shares b Date acquired c Date sold d Sales price e Cost or other basis f Adjustment amount	Short-Term	Long-Term	Total
	Note: For employee stock sales with be adjustments will be ratably allocated or allocation for this sale, then report the sale.	n a per share basis.	If this is not an	accurate
T	his is a sale of a collectible item (code C)			
s	ale includes an accrued market discoun	t (code D). Amount		
A	mounts reported on Form 1099-B do not r Amount of sales fees/expenses			
TI	le cannot generate a loss for the following his is a vacation home or other personal o his is a sale to a related party . his sale is nondeductible for another rea	use property with r		rental activity.
A	ny gain/loss from sale should not be included if only part of the gain (loss) is nomined			

Name(s) Shown on Return DANIEL L JOHNSON	Social Security No. 529-95-0491
Part III Specific Adjustments (cont.)	<u>'</u>
Other adjustments are required (code O). Amount (positive to increase gain, negative	to reduce)
Loss from this sale is ordinary loss from a section Ordinary loss amount (leave blank if entire l	
Gain from this Qualified Small Business (QSB This QSB stock is eligible for 50% exclusion This is empowerment zone stock eligible for For 60% exclusion, enter gain as of 12/31/2 This QSB stock is eligible for 75% exclusion This QSB stock is eligible for 100% exclusion Amount of gain eligible for exclusion Amount of gain excluded	1 60% exclusion under section 1202. 1018 ▶ 1 under section 1202. 1 under section 1202. 1 under section 1202.
All or part of the gain is deferred due to a rollov Qualified Small Business stock and certain stock Amount reinvested in qualified stock (leave Amount of gain deferred	s sold to ESOP plans. blank if sold to ESOP/co-op) ▶
Loss from this sale is ordinary loss from a section Ordinary loss amount (leave blank if entire l	
Form 1099-B reports an incorrect holding periods	od (code T).
Sale includes a disallowed wash sale loss (code	e W). Amount (leave blank if all) ▶
Part or all of the gain is from DC Zone/qualified Amount of exclusion (leave blank if entire ga	community assets eligible for exclusion (code X). ain should be excluded) ▶
property on a Form 1099-B Worksheet, Asset En If sold for eligible gain and invested in Qualified Cost of QOF investment	Aind (QOF) (report the actual sale of the eligible gain and the composition of the eligible gain and the composition of the eligible gain and the composition of the eligible gain and the el
Part IV Amounts That Will Be Reported on Fo	rms Other Than Form 8949
Check if ordinary gain/loss FATCA requirement Federal tax withheld State name State tax withheld State identification number	Collectible gain/loss ► Accrued interest to Sch B ► Sec. 1242 loss on Form 4797 . ► Sec. 1244 loss on Form 4797 . ►

Capital Gain (Loss) Adjustments Worksheet • Keep for your records

		1	
Name(s) Shown on Return DANIEL L JOHNSON			ocial Security No. 29-95-0491
Part I Values for Form 8949			
Click on any field in Part I to QuickZoom to its	s corresponding entry or	n the Form 1099-E	3 Worksheet.
Form 8949 Box* Description	n . GRIFFIN CAPIT	'AL QUALIFIEI	OPPORTUNITY
Date Sold	Cost Basis Adjustment Amou		
*The fields above, other than Adjustment Co corresponding fields on the Form 1099-B W exceptions. (Form help can be accessed by	orksheet. See Part I in	the help for this fo	
Part II Manual Adjustments		4	
For adjustments not entered in Part III, the ac Do not duplicate code(s) or amounts entered other than Form 8949 will require manual ent	l elsewhere. Adjustment	s requiring entries	on forms
Adjustment Code(s)	Adjustment Amour	ıt	
The cost basis and proceeds are totals	from multiple sales (co	ode M).	
Part III Specific Adjustments			
Form 1099-B reports an incorrect bas Check this box for employee stock QuickZoom to Employee Stock I income should be reported, or for a	k sales requiring adjust Fransaction Workshee	ments. t if basis is incorre	ect, compensation
Allocated amounts from Employer Stock Transaction Worksheet a Number of shares		Long-Term	Total
b Date acquired			
d Sales price			
f Adjustment amount			
Note: For employee stock sales w adjustments will be ratably allocate allocation for this sale, then report	ed on a per share basis.	If this is not an ac	ccurate
This is a sale of a collectible item (cod	de C).		
Sale includes an accrued market disc	count (code D). Amount		
Amounts reported on Form 1099-B do Amount of sales fees/expenses .			
This sale cannot generate a loss for the follow This is a vacation home or other perso This is a sale to a related party. This sale is nondeductible for anothe	onal use property with r		tal activity.
Any gain/loss from sale should not be in			

Name(s) Shown on Return DANIEL L JOHNSON	Social Security No. 529-95-0491
Part III Specific Adjustments (cont.)	,
Other adjustments are required (code O). Amount (positive to increase gain, negative	to reduce)
Loss from this sale is ordinary loss from a section Ordinary loss amount (leave blank if entire l	
Gain from this Qualified Small Business (QSB This QSB stock is eligible for 50% exclusion This is empowerment zone stock eligible for For 60% exclusion, enter gain as of 12/31/2 This QSB stock is eligible for 75% exclusion This QSB stock is eligible for 100% exclusion Amount of gain eligible for exclusion Amount of gain excluded	1 60% exclusion under section 1202. 1018 ▶ 1 under section 1202. 1 under section 1202. 1 under section 1202.
All or part of the gain is deferred due to a rollov Qualified Small Business stock and certain stock Amount reinvested in qualified stock (leave Amount of gain deferred	s sold to ESOP plans. blank if sold to ESOP/co-op) ▶
Loss from this sale is ordinary loss from a section Ordinary loss amount (leave blank if entire l	
Form 1099-B reports an incorrect holding period	od (code T).
Sale includes a disallowed wash sale loss (code	w). Amount (leave blank if all) ▶
Part or all of the gain is from DC Zone/qualified Amount of exclusion (leave blank if entire ga	community assets eligible for exclusion (code X). ain should be excluded) ▶
property on a Form 1099-B Worksheet, Asset En If sold for eligible gain and invested in Qualified Cost of QOF investment	Aind (QOF) (report the actual sale of the eligible gain and try Worksheet, etc.). Complete the fields below. d Opportunity Fund (QOF):
Part IV Amounts That Will Be Reported on Fo	rms Other Than Form 8949
Check if ordinary gain/loss FATCA requirement Federal tax withheld State name State tax withheld State identification number	Collectible gain/loss

DANIEL L JOHNSON 529-95-0491 1

Additional information from your 2021 Federal Tax Return

Schedule E: Supplemental Income and Loss

Line 28: Income or Loss from Partnership and S corporations

Continuation Statement

L 2 7 T	Name	Cod e	For eig n	EIN	Basi s Com p	Not At Ris k	Passive Loss Allowed Amt	Passive Income Amt	Nonpassiv e Loss Amt	Sec 179 Expense Dedn Amt	Nonpassiv e Income Amt
D	GRIFFIN CAPITAL QUALIFIED OPPORTUNITY	P		85-3274399			6.				
- 1	TORKABC, LLC	S		81-1144841					24,807.		
						Γotal	6.		24,807.		

Form 1116: Foreign Tax Credit

Foreign Taxes (A)

Line 3 Explanation Statement

Other Deduction Statement
CLAIMING FOREIGN TAX

Utah State Tax Commission Utah Individual Income Tax Return

All State Income Tax Dollars Fund Education

2021 **TC-40**

INTUIT

Full-yr Resident?

· Amended Return - enter code:

ZIP+4

(see instructions)

Your Social Security No. 529950491 Spouse's Soc. Sec. No.

Your first name DANIEL Spouse's first name

Address

Your last name **JOHNSON** Spouse's last name Y/N Υ

If deceased, complete page 3, Part 1

134 SOUTH 1160 WEST CIRCLE

84770 SAINT GEORGE UT

Telephone number

Foreign country (if not U.S.)

Filing Status - enter code

1 = Single

2 = Married filing jointly

3 = Married filing separately

4 - Hood of household

2 Qua	lifying	Depend	lents
-------	---------	--------	-------

а 2 Dependents age 16 and under b

Other dependents

С 2. Total (add lines a and b)

3 Election Campaign Fund

Does not increase your tax or reduce your refund. Enter the code for the Yourself Spouse

party of your choice.

Coo instructions for

4 = Head of household			See instructions for			
5 = Qualifying widow(er)	5 = Qualifying widow(er) Dependents must be claimed for the child tax				ncometax.utah.gov/elect	
If using code 2 or 3, enter spouse's name and SSN above	using code 2 or 3, enter spouse's name and SSN above credit on your federal return. See instructions.				N.	
4 Federal adjusted gross income from federal	al return			• 4	6275703	
5 Additions to income from TC-40A, Part 1 (a	attach TC-40A, page 1)			• {	5	
6 Total income - add line 4 and line 5				6	6275703	
7 State tax refund included on federal form 1	040, Schedule 1, line 1 (if any)			• 7	7	
8 Subtractions from income from TC-40A, Pa	art 2 (attach TC-40A, page 1)			• 8	3	
9 Utah taxable income (loss) - subtract the	sum of lines 7 and 8 from line 6			• (6275703	
10 Utah tax - multiply line 9 by 4.95% (.0495)	(not less than zero)			• 10	310647	
11 Utah personal exemption (multiply line 2c b	y \$1,750)	• 11	3500	Г		
12 Federal standard or itemized deductions		• 12	19471		Electronic filing is quick, easy and	
13 Add line 11 and line 12		13	22971		free, and will speed up your refund.	
14 State income tax included in federal itemiz	ed deductions	• 14	2280	Ī	To learn more,	
15 Subtract line 14 from line 13		15	20691		tap.utah.gov	
16 Initial credit before phase-out - multiply line	e 15 by 6% (.06)	• 16	1241	_		
17 Enter: \$15,095 (if single or married filing so of household); or \$30,190 (if marrie	• • • • • • • • • • • • • • • • • • • •	• 17	22643			
18 Income subject to phase-out - subtract line		18	6253060			
19 Phase-out amount - multiply line 18 by 1.3	% (.013)	• 19	81290			
20 Taxpayer tax credit - subtract line 19 from	line 16 (not less than zero)			• 20	0	

21 If you are a qualified exempt taxpayer, enter "X" (complete worksheet in instr.) • 21

40102	Utah Individual Income Tax Return (continued) SSN 529950491 Last name JOHNSON	INTUIT	TC-40 2021	Pg. 2
23 Enter	tax from TC-40, page 1, line 22		23	310647
24 Appo	tionable nonrefundable credits from TC-40A, Part 3 (attach TC-40A, page 1)		• 24	
-	ear resident, subtract line 24 from line 23 (not less than zero) r Part-year resident, complete and enter the UTAH TAX from TC-40B, line 41		• 25	310647
26 Nona	portionable nonrefundable credits from TC-40A, Part 4 (attach TC-40A, page 1)		• 26	
27 Subtr	ct line 26 from line 25 (not less than zero)		27	310647
28 Volun	ary contributions from TC-40, page 3, Part 4 (attach TC-40, page 3)		• 28	
29 AME	DED RETURN ONLY - previous refund		• 29	
30 Reca	ture of low-income housing credit		• 30	
31 Utah	ise tax		• 31	
32 Total	tax, use tax and additions to tax (add lines 27 through 31)		32	310647
33 Utah	ncome tax withheld shown on TC-40W, Part 1 (attach TC-40W, page 1)		• 33	2280
34 Credi	for Utah income taxes prepaid from TC-546 and 2020 refund applied to 2021		• 34	310000
35 Pass-	hrough entity withholding tax shown on TC-40W, Part 3 (attach TC-40W, page 2)		• 35	
36 Miner	al production withholding tax shown on TC-40W, Part 2 (attach TC-40W, page 2)		• 36	
37 AME	DED RETURN ONLY - previous payments		• 37	
38 Refur	dable credits from TC-40A, Part 5 (attach TC-40A, page 2)		• 38	
39 Total	vithholding and refundable credits - add lines 33 through 38		39	312280
	UE - subtract line 39 from line 32 (not less than zero)		• 40	
	y and interest (see instructions) L DUE - PAY THIS AMOUNT - add line 40 and line 41		• 42	
43 REFU	ND - subtract line 32 from line 39 (not less than zero)		• 43	1633
	ary subtractions from refund (not greater than line 43)		• 44	
45 DIRE	the total from page 3, Part 5 T DEPOSIT YOUR REMAINING REFUND - provide account information (see instruction ting number 324377516 • Account number 746008009573	· ·	,	necking savings
Under pena SIGN You	ies of perjury, I declare to the best of my knowledge and belief, this return and accompanying schedule signature Date Spouse's signature (if filing the signature)		t and complete.	Date
HERE Third Party	Name of designee (if any) you authorize to discuss this return Designee's te	elephone number	Designee PIN	
Designee		668138 lephone number	• Preparer's PTIN	11111
Paid	43565	668138	· •	P00296497
Preparer's Section	Firm's name STAHELI & JACOBSEN CPA'S and address PO BOX 911030	_	Preparer's EIN •	270372684
Attach TC-40	SAINT GEORGE UT 8479 page 3 if you; are filing for a deceased taxpaver, are filing a fiscal year return, filed IRS form 8886, are		contributions wan	t to deposit into a

Pg. 1

40109 ssn 529-95-0491

Last name JOHNSON

Line Explanations IMPORTANT 1 Employer/payer ID number from W-2 box "b" or 1099 Do not send your W-2s or 1099s with your return. Instead enter Utah withholding ID number from W-2 box "15" or 1099 W-2 or 1099 information below, but only if there is Utah withholding (14 characters, ending in WTH, no hyphens) on the form. Employer/payer name and address from W-2 box "c" or 1099 Enter "X" if reporting Utah withholding from form 1099 Use additional forms TC-40W if you have more than four W-2s and/or 4 5 Employee's Social Security number from W-2 box "a" or 1099 1099s with Utah withholding tax. Utah wages or income from W-2 box "16" or 1099 Utah withholding tax from W-2 box "17" or 1099 Enter mineral production withholding from TC-675R in Part 2 of TC-40W; enter pass-through entity withholding in Part 3 of TC-40W. First W-2 or 1099 Second W-2 or 1099 1 811144841 2 (14 characters, no hyphens) (14 characters, no hyphens) 14111128003WTH 3 TORKABC LLC 134 SOUTH 1160 WEST CIRCLE SAINT GEORGE UT84770 4 529950491 6 46007. 7 7 2280. Third W-2 or 1099 Fourth W-2 or 1099 1 2 (14 characters, no hyphens) 2 (14 characters, no hyphens) 3 3 4 4 5 5 6 6 7 7

Enter total Utah withholding tax from all lines 7 here and on TC-40, page 2, line 33: 2280.

Submit page ONLY if data entered.

Attach completed schedule to your Utah Income Tax Return.

Do not attach W-2s or 1099s to your Utah return.

Individual Income Tax Prepayment Coupon (This is NOT an extension form)

INTUIT Rev. 4/13

Prepayment

Use this form to make individual income tax prepayments toward your tax liability prior to the due date of your return. Prepayments may not be necessary if taxes are withheld (W-2, TC-675R, etc.), the previous year's refund was applied to the current year, or you have credit carryovers. Use the worksheet to see if you must make a payment.

Automatic Extensions

You automatically have a six month extension to file your Utah individual income tax return - **NOT** to pay your taxes. **No extension form is required**. Use this form only to make a prepayment.

Extension Penalty

If you do not make the required tax payments by the original return due date a penalty of 2% of the unpaid tax will be assessed for each month of the extension period. The required payment must equal the lesser of 90% of your current year tax liability or 100% of your previous year tax liability. A late filing penalty will be imposed if the return is filed after the extension due date. Interest will accrue on any tax not paid by the original due date.

Interest

Interest will be assessed from the original due date of the return until the tax is paid in full. See Pub 58, *Utah Interest and Penalties* at **tax.utah.gov/forms** for information on how to calculate the interest.

Where to File

Mail or deliver the coupon below with your payment to:

Income Tax Prepayment Utah State Tax Commission 210 N 1950 W Salt Lake City, UT 84134-0266

For more information

801-297-2200, 1-800-662-4335 (if outside the Salt Lake area), tax.utah.gov.

Electronic Payment

You may pay your tax due online at tap.utah.gov.

Payment Worksheet

Use this worksheet to calculate your minimum required prepayment. Pay the amount on line 9 on or before the return due date.

1.	Tax you expect to owe this year	1_	310647
2.	Minimum payment rate	2	x .90
3.	Multiply line 1 by the rate on line 2	3 _	279582
4.	Utah tax liability for the previous year (as filed, amended or audited)	4 _	0
5.	Minimum tax due by original due date - enter the lesser of line 3 or line 4	5 _	0
6.	Utah income tax withheld from forms W-2, 1099, or TC-675R, etc. for this year	6 _	2280
7.	Previous prepayments made for this year, credit carryovers, and prior year refund applied	7 _	
8.	Total prepayments for this year - (add lines 6 and 7)	8 _	2280
	Minimum payment due - (subtract line 8 from line 5) If less than zero, enter "0". Do not file the coupon if you are not making a prepayment.	9_	0

If greater than zero, enter amount from line 9
 on coupon below and send coupon with payment.
 By remitting the amount on line 9, no extension
 penalty will be assessed. However, other penalties
 may apply. See Pub 58.

Note: Interest will still be assessed on any tax not paid by the original due date.

Do not file this coupon if your tax liability on line 9 is zero or if you are getting a refund.

Individual Income Tax Prepayment Coupon

Tax year ending 2021

USTC Use Only

Mail to: Utah State Tax Commission, 210 N 1950 W, SLC UT 84134-0266

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			Ray	, 1	/13	Ł

Prepayment amount enclosed	\$	310000	00	
SAINT GEORGE	UT	84770		
City	State	ZIP code		'
134 SOUTH 1160 WEST CIRCLE				4
Address				
Secondary taxpayer name	Social Se	ecurity no.		┢
				` <u> -</u>
DANIEL L JOHNSON	52995	0491		٦
Primary taxpayer name	Social Se	ecurity no.		П

Make check or money order payable to the Utah State Tax Commission. Do not send cash. Do not staple check to coupon. Detach check stub.

SEPARATE AND RETURN ONLY THE BOTTOM COUPON WITH PAYMENT. KEEP TOP PORTION FOR YOUR RECORDS

STATE REQUIRED INFORMATION

State Required Information
The Utah State Tax Commission requires the following information be presented
to all taxpayers:
Refund Status: Due to our efforts to protect your identity, please allow 120 days from
the date you filed your return or March 1, whichever is later, to process your
return and refund request. Please remember that the Utah State Tax Commission cannot
issue refunds before March 1st if it cannot verify your W-2s with your employers.
Use the "Where's My Refund?" tool to track the status of your refund.
https://incometax.utah.gov/refunds
Tax Dues Expectations: Taxes are due 04/18/2022. You get an automatic six month
extension to file. If you file during the extension period, you must pay by the due
date. Payments received after the due date are subject to penalty and interest.
Payments can be made online at tap.utah.gov by electronic check (ACH debit) or credit
card (credit card payments are subject to a service fee). You may also mail a check
or money order to payable to the "Utah State Tax Commission" with your return.
Include the Utah form TC-547 payment coupon with your payment.