

Filing Status [] Single [X] Married filing jointly [] Married filing separately (MFS) [] Head of household (HOH) [] Qualifying surviving spouse (QSS)

Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Personal information section including names (Johnny C Bianco, Denise J Bianco), social security numbers, home address, city/town/post office, state, ZIP code, foreign country name, and foreign province/state/county.

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

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

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

Dependents table with columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Check the box if qualifies for (see instructions): Child tax credit, Credit for other dependents.

Income section table with rows 1a through 15. Includes sub-rows for tax-exempt interest, qualified dividends, IRA distributions, pensions and annuities, and social security benefits. Total taxable income is 400,325.

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. Attach Sch. B if required. Standard Deduction for: Single or Married filing separately, \$12,950; Married filing jointly or Qualifying surviving spouse, \$25,900; Head of household, \$19,400.

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/>	16	88,567.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	88,567.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	88,567.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	2,488.
	24	Add lines 22 and 23. This is your total tax	24	91,055.

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	88,078.
	b	Form(s) 1099	25b	
	c	Other forms (see instructions)	25c	1,138.
	d	Add lines 25a through 25c	25d	89,216.
	26	2022 estimated tax payments and amount applied from 2021 return	26	
	27	Earned income credit (EIC) No	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
	31	Amount from Schedule 3, line 15	31	
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	
	33	Add lines 25d, 26, and 32. These are your total payments	33	89,216.

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

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	35a	
Direct deposit? See instructions.	b	Routing number	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	d	Account number		
	36	Amount of line 34 you want applied to your 2023 estimated tax	36	

Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe. For details on how to pay, go to www.irs.gov/Payments or see instructions.	37	1,839.
	38	Estimated tax penalty (see instructions)	38	

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

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

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

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		Sheriff	_____
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
		Marketing Consultant	_____
Phone no.	Email address		

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> Self-employed
Firm's name	Self-Prepared			Phone no.
Firm's address				Firm's EIN

**SCHEDULE 2
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Taxes

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

OMB No. 1545-0074

2022
Attachment
Sequence No. **02**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR
Johnny C & Denise J Bianco

Your social security number

Part I Tax

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

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE	4	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	5	
6	Uncollected social security and Medicare tax on wages. Attach Form 8919	6	
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. If not required, check here <input type="checkbox"/>	8	
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	2,487.
12	Net investment income tax. Attach Form 8960	12	1.
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	

(continued on page 2)

Part II Other Taxes (continued)

17 Other additional taxes:			
a Recapture of other credits. List type, form number, and amount:			
_____	17a		
b Recapture of federal mortgage subsidy, if you sold your home see instructions	17b		
c Additional tax on HSA distributions. Attach Form 8889	17c		
d Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
e Additional tax on Archer MSA distributions. Attach Form 8853	17e		
f Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j Section 72(m)(5) excess benefits tax	17j		
k Golden parachute payments	17k		
l Tax on accumulation distribution of trusts	17l		
m Excise tax on insider stock compensation from an expatriated corporation	17m		
n Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
o Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17o		
p Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q Any interest from Form 8621, line 24	17q		
z Any other taxes. List type and amount: _____			
_____	17z		
18 Total additional taxes. Add lines 17a through 17z			18
19 Reserved for future use			19
20 Section 965 net tax liability installment from Form 965-A	20		
21 Add lines 4, 7 through 16, and 18. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b			21
			2,488.

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Itemized Deductions

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

OMB No. 1545-0074

2022
Attachment
Sequence No. **07**

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

Your social security number

Johnny C & Denise J Bianco

Medical and Dental Expenses	Caution: Do not include expenses reimbursed or paid by others.					
	1 Medical and dental expenses (see instructions)	1				
	2 Enter amount from Form 1040 or 1040-SR, line 11 2 492,656					
	3 Multiply line 2 by 7.5% (0.075)	3	36,949.			
4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-				4		
Taxes You Paid	5 State and local taxes.					
	a 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 <input type="checkbox"/>	5a	34,448.			
	b State and local real estate taxes (see instructions)	5b	10,488.			
	c State and local personal property taxes	5c	485.			
	d Add lines 5a through 5c	5d	45,421.			
	e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)	5e	10,000.			
	6 Other taxes. List type and amount: _____	6				
7 Add lines 5e and 6				7	10,000.	
Interest You Paid	Caution: Your mortgage interest deduction may be limited. See instructions.	8 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 <input type="checkbox"/>				
		a Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a	11,606.		
		b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address	8b			
		c Points not reported to you on Form 1098. See instructions for special rules	8c			
		d Reserved for future use	8d			
		e Add lines 8a through 8c	8e	11,606.		
9 Investment interest. Attach Form 4952 if required. See instructions	9					
10 Add lines 8e and 9				10	11,606.	
Gifts to Charity	Caution: If you made a gift and got a benefit for it, see instructions.	11 Gifts by cash or check. If you made any gift of \$250 or more, see instructions	11	70,725.		
		12 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			
		13 Carryover from prior year	13			
		14 Add lines 11 through 13				14
Casualty and Theft Losses	15 Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions				15	
Other Itemized Deductions	16 Other—from list in instructions. List type and amount: _____				16	
Total Itemized Deductions	17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12				17	92,331.
	18 If you elect to itemize deductions even though they are less than your standard deduction, check this box <input type="checkbox"/>					

Additional Medicare Tax

If any line does not apply to you, leave it blank. See separate instructions.

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

Go to www.irs.gov/Form8959 for instructions and the latest information.

Your social security number

Johnny C & Denise J Bianco

Part I Additional Medicare Tax on Medicare Wages

1	Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5	1	526,378.	
2	Unreported tips from Form 4137, line 6	2		
3	Wages from Form 8919, line 6	3		
4	Add lines 1 through 3	4	526,378.	
5	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	5	250,000.	
6	Subtract line 5 from line 4. If zero or less, enter -0-	6		276,378.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II	7		2,487.

Part II Additional Medicare Tax on Self-Employment Income

8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0- (Form 1040-PR or 1040-SS filers, see instructions.)	8		
9	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	9		
10	Enter the amount from line 4	10		
11	Subtract line 10 from line 9. If zero or less, enter -0-	11		
12	Subtract line 11 from line 8. If zero or less, enter -0-	12		
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III	13		

Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation

14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)	14		
15	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	15		
16	Subtract line 15 from line 14. If zero or less, enter -0-	16		
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV	17		

Part IV Total Additional Medicare Tax

18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-PR or 1040-SS filers, see instructions), and go to Part V	18		2,487.
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Part V Withholding Reconciliation

19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6	19	8,770.	
20	Enter the amount from line 1	20	526,378.	
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	7,632.	
22	Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages	22		1,138.
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions)	23		
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-PR or 1040-SS filers, see instructions)	24		1,138.

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

Attach to your tax return.
 Go to www.irs.gov/Form8960 for instructions and the latest information.

Name(s) shown on your tax return: **Johnny C & Denise J Bianco**
 Your social security number or EIN: _____

Part I Investment Income Section 6013(g) election (see instructions)
 Section 6013(h) election (see instructions)
 Regulations section 1.1411-10(g) election (see instructions)

1	Taxable interest (see instructions)		1	35.
2	Ordinary dividends (see instructions)		2	
3	Annuities (see instructions)		3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, etc. (see instructions)	4a	4c	
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b		
c	Combine lines 4a and 4b			
5a	Net gain or loss from disposition of property (see instructions)	5a	5d	
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b		
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c		
d	Combine lines 5a through 5c			
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	35.

Part II Investment Expenses Allocable to Investment Income and Modifications

9a	Investment interest expenses (see instructions)	9a		
b	State, local, and foreign income tax (see instructions)	9b		3.
c	Miscellaneous investment expenses (see instructions)	9c		
d	Add lines 9a, 9b, and 9c		9d	3.
10	Additional modifications (see instructions)		10	
11	Total deductions and modifications. Add lines 9d and 10		11	3.

Part III Tax Computation

12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13–17. Estates and trusts, complete lines 18a–21. If zero or less, enter -0-		12	32.
Individuals:				
13	Modified adjusted gross income (see instructions)	13	492,656.	
14	Threshold based on filing status (see instructions)	14	250,000.	
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	242,656.	
16	Enter the smaller of line 12 or line 15		16	32.
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include on your tax return (see instructions)		17	1.
Estates and Trusts:				
18a	Net investment income (line 12 above)	18a		
b	Deductions for distributions of net investment income and deductions under section 642(c) (see instructions)	18b		
c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c		
19a	Adjusted gross income (see instructions)	19a		
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b		
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c		
20	Enter the smaller of line 18c or line 19c		20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and include on your tax return (see instructions)		21	

**Special Depreciation Allowance Elections under
IRC Section 168(k)(7)**

▶ Attach to your income tax return

Name(s) Shown on Return Johnny C & Denise J Bianco	Identification Number -
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Tax Year: 2022

Election Out of Qualified Economic Stimulus Property

Attach to your income tax return

Taxpayer hereby elects under IRC Section 168(k)(7) out of having Qualified Economic Stimulus property for the following asset classes placed in service during the tax year ending: 12/31/2022

<u>7 Year Property</u>

Election Out of Qualified Second Generation Biofuel Plant Property

Taxpayer hereby elects under IRC Section 168(l)(3)(D) out of having Qualified Second Generation Biofuel Plant property for the following asset classes placed in service during the tax year ending: _____

Name(s) Shown on Return Johnny C & Denise J Bianco	Social Security Number -
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Part I State and Local Income Tax Refunds from 2021 Tax Returns

1	(a) State or Local Code	(b) Refund Amount	(c) Estimated Tax Paid After 12/31/2021	(d) Extension Payments	(e) Total Payments and Withholding	(f) Refund Allocated to Column (c)	(g) Refund Allocated to Column (d)
	CA	2,962.			35,825.		
	Totals .	2,962.			35,825.		

2	Total state and local refunds. Total line 1 column (b).	2,962.
3	Refund allocated to tax paid after 12/31/2021. Total line 1 columns (f) and (g). (Include net tax paid after 12/31/2021 on Schedule A, line 5a.)	
4	Net refund. Line 2 less line 3.	2,962.

Part II Recovery Amount

The **recovery amount** is the state and local income tax deducted in 2021 refunded in 2022.

5	Total state and local income tax deduction from line 5a of your 2021 Schedule A	35,825.
6	Recovery amount. Lesser of line 4 or line 5.	2,962.

Part III Recovery Exclusion

The **recovery exclusion** is the part of the recovery amount which did **not** reduce tax in 2021.

7	Recovery exclusion from sales tax deduction, SALT limitation and standard deduction:	
a	Allowable itemized deductions, from 2021 Schedule A, line 17	87,150.
b	Allowable itemized deductions, refigured by excluding recovery amount:	
	(1) Refigured state and local tax deduction (Schedule A, line 5a):	
	(a) Refigured state income tax deduction	32,863.
	(b) Sales tax deduction	
	(c) Refigured deduction. Larger of (a) or (b)	32,863.
	(2) Refigured total itemized deductions	87,150.
	(3) Refigured allowable itemized deductions from line 7b(2)	87,150.
c	2021 standard deduction based on 2021 filing status and deductions.	25,100.
d	Larger of lines 7b(3) or 7c.	87,150.
e	Subtract line 7d from line 7a	0.
f	Subtract line 7e from line 6	2,962.
8	Recovery exclusion from negative taxable income. If 2021 taxable income was negative, enter here as a positive number, else enter zero.	0.
9	Recovery exclusion from alternative minimum tax. If no alternative minimum tax (AMT) in 2021 enter zero. If did pay AMT in 2021, enter amt from line 24.	0.
10	Recovery exclusion from unused tax credits. If no unused credits in 2021, enter zero. If there were unused credits in 2021, enter amount from line 35.	0.
11	Total recovery exclusion. Add lines 7f, 8, 9, and 10.	2,962.

Part IV Taxable Refund

The **recovery amount** less the **recovery exclusion** is a **taxable refund**.

12	Taxable refund from 2021. Line 6 less line 11.	0.
13	Total taxable refunds from 2020 or prior tax returns. Total line 36 column (d).	
14	Total taxable refunds. Add lines 12 and 13. Enter here and on Schedule 1, line 1	0.

Tax History Report

▶ Keep for your records

2022

Name(s) Shown on Return
Johnny C & Denise J Bianco

	Five Year Tax History:				
	2018	2019	2020	2021	2022
Filing status					MFJ
Total income					492,656.
Adjustments to income					
Adjusted gross income					492,656.
Tax expense					10,000.
Interest expense . . .					11,606.
Contributions					70,725.
Misc. deductions . . .					
Other itemized ded'ns					
Total itemized/ standard deduction . .					92,331.
Exemption amount . .					0.
QBI deduction					
Taxable income					400,325.
Tax					88,567.
Alternative min tax . .					
Total credits					
Other taxes					2,488.
Payments					89,216.
Form 2210 penalty . .					
Amount owed					1,839.
Applied to next year's estimated tax .					
Refund					
Effective tax rate % . .					17.98
**Tax bracket %					32.0

**Tax bracket % is based on Taxable income.

Name(s) Shown on Return Johnny C & Denise J Bianco	Your SSN _____
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Line 4b - Adjustment for trade or business income or loss

(a) Activity name	(b) Gain or loss
Enter additional adjustments not included above:	
Adjustment for trade or business income not subject to net investment tax	

Line 5b - Adjustment for gain or loss on dispositions

(a) Activity name	(b) Gain or loss
Capital loss carryover adjustment from 2021 for net investment tax purposes	
Enter additional adjustments not included above and check the box if a capital gain or loss:	
	<input type="checkbox"/>
	<input type="checkbox"/>
Net gain or loss from disposition of property not subject to net investment tax	

Capital gain/loss not included in net investment income

(a) Activity name	(b) Capital Gain or Loss
Capital gain or loss from sale of property not subject to net investment income tax	

Calculation of line 5b adjustment due to capital loss carryforward

1 Net capital loss not included in net investment income	1	0.
2 Capital loss carryover to next year	2	
3 Lesser of line 1 or line 2 (Included as an adjustment on line 5b table above)	3	0.

Line 7 - Other modifications to investment income

1 Casualty and theft losses reported on Schedule A, line 15.	1	
2 Amounts reported on Form 8814, line 12	2	
3 Adjustment for distributions from estates and trusts	3	
4 Schedule F income/loss included in net investment income	4	
5 Substitute interest and dividend payments	5	
6 Recovery of a prior year deduction	6	
7	7	
8 Total other modifications to investment income	8	

Line 9b - State, local, and foreign income taxes allocable to net investment income

1	State and local income taxes	1	34,448.
2	Investment income	2	35.
3	Total adjusted gross income	3	492,656.
4	Divide line 2 by line 3. Enter result as a decimal amount	4	0.0001
5	State and local income taxes allocable to investment income	5	3.
6	State and local taxes (Schedule A, line 5e)	6	10,000.
7	Lesser of line 5 or line 6	7	3.
8	Foreign income taxes	8	
9	Foreign income taxes allocable to investment income. Line 8 times line 4.	9	
10	Add lines 7 and 9. State, local and foreign income taxes allocable to investment income	10	3.

Lines 9 and 10 - Application of Itemized Deduction Limitations Worksheet

Part III - Application of Section 68 to Deductions Properly Allocable to Investment Income

1	Reserved	1	
2	Enter the amount of state, local, and foreign income taxes that are properly allocable to investment income	2	3.
3	Enter the amount of other Itemized Deductions subject to the section 68 limitation and properly allocable to investment income before any itemized deduction limitation: _____ _____ _____	3	
4	Enter the total deductions properly allocable to investment income subject to the section 68 limitation. Enter the sum of lines 1 through 3.	4	3.
5	Enter the amount of total itemized deductions allowed after the section 68 limitation. Form 1040, line 12	5	92,331.
6	Enter all other itemized deductions allowed but not subject to the section 68 deduction limitation:	6	0.
7	Subtract line 6 from line 5	7	92,331.
8	Enter the lesser of line 7 or line 4	8	3.

Part IV - Reconciliation of Schedule A Deductions to Form 8960 plus additional expenses, lines 9 and 10

(A)	(B)	(C)
Reenter the amounts and descriptions from Part III, lines 1-3	Fraction (see Help)	Column A times B
Miscellaneous Itemized Deductions properly allocable to Investment Income reportable on Form 8960, line 9c:		
1 Reserved.		
2 State, local, and foreign income taxes.	3. x 1.000000 =	3.
Itemized Deductions Subject to Section 68 reportable on Form 8960, line 10:		
3 _____	x _____ =	_____
_____	x _____ =	_____
_____	x _____ =	_____
_____	x _____ =	_____
Penalty on early withdrawal of savings		
Other modifications:		

Total additional modifications to Form 8960, line 10		

Calculation of Former Passive Activity Suspended Losses Allowed as Deduction Against NII

1) Former Passive Activity Suspended Losses

(a) Activity name	(b) Suspended 12/31/2021	(c) Suspended 12/31/2022	(d) Used against activity	(e) Used against other passive

2) Former Passive Activity Suspended Losses - Schedule D

(a) Activity name	(b) Suspended 12/31/2021	(c) Suspended 12/31/2022	(d) Used against activity	(e) Used against other passive

3) Former Passive Activity Suspended Losses - Form 4797

(a) Activity name	(b) Suspended 12/31/2021	(c) Suspended 12/31/2022	(d) Used against activity	(e) Used against other passive

Name(s) Shown on Return Johnny C & Denise J Bianco	Social Security Number
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State and Local Income Taxes

State income taxes:		
1 State income tax withheld	1	32,846.
2 2022 state estimated taxes paid in 2022	2	
3 2021 state estimated taxes paid in 2022	3	
4 Amount paid with 2021 state application for extension	4	
5 Amount paid with 2021 state income tax return	5	
6 Overpayment on 2021 state income tax return applied to 2022 tax	6	
7 Other amounts paid in 2022 (amended returns, installment payments, etc.)	7	
8 State estimated tax from Schedule(s) K-1 (Form 1041)	8	
Local income taxes:		
9 Local income tax withheld	9	
10 2022 local estimated taxes paid in 2022	10	
11 2021 local estimated taxes paid in 2022	11	
12 Amount paid with 2021 local application for extension	12	
13 Amount paid with 2021 local income tax return	13	
14 Overpayment on 2021 local income tax return applied to 2022 tax	14	
15 Other amounts paid in 2022 (amended returns, installment payments, etc.)	15	
16 Local estimated tax from Schedule(s) K-1 (Form 1041)	16	
Other:		
17 State mandatory taxes	17	1,602.
18 Total Add lines 1 through 17	18	34,448.
19 State and local refund allocated to 2022	19	
20 Nondeductible state income tax from line 28	20	
21 Total reductions Add lines 19 and 20	21	
22 Total state and local income tax deduction Line 18 less line 21	22	34,448.

Nondeductible State Income Tax (Hawaii Only)

23 Nontaxable federal employee cost of living allowance	23	
24 Adjusted gross income	24	
25 Add lines 23 and 24	25	
26 Nondeductible percent. Line 23 divided by line 25	26	%
27 Hawaii state income tax included in line 18	27	
28 Nondeductible Hawaii state income tax. Multiply line 26 by line 27	28	

Charitable Contributions Summary

▶ Keep for your records

2022

Name(s) Shown on Return Johnny C & Denise J Bianco	mber
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Part I Cash Contributions Summary

Name of Charitable Organization	(a) Total	(b) 60% Limit	(c) 30% Limit	(d) 100% Limit
Sandals Church	33,775.	33,775.		
Harvest Christian Fellowship	33,950.	33,950.		
Olive Crest	3,000.	3,000.		
Totals:	70,725.	70,725.		

Part II Non-Cash Contributions Summary

Name of Charitable Organization	Total	Other Property		Capital Gain Property	
	(a) Total	(b) 50% Limit	(c) 30% Limit	(d) 30% Limit	(e) 20% Limit
Totals:					

Part III Contribution Carryovers to 2023

	Total	Cash and Other Non-Capital Gain Property			Capital Gain Property	
	(a) Total	(b) 60% Limit	(c) 50% Limit	(d) 30% Limit	(e) 30% Limit	(f) 20% Limit
1 2022 contributions . . .	70,725.	70,725.				
2 2022 contributions allowed	70,725.	70,725.				
3 Carryovers from:						
a 2021 tax year						
b 2020 tax year						
c 2019 tax year						
d 2018 tax year						
e 2017 tax year						
4 Carryovers allowed in 2022						
5 Carryovers disallowed in 2022						
6 Carryovers to 2023:						
a From 2022	0.	0.				
b From 2021						
c From 2020						
d From 2019						
e From 2018						
f From 2017						

Part IV Special Situations in Your Return for Current Year Donations

- 1 Was the **entire interest** given for all property donated to all charities? Yes No
- 2 Were **restrictions** attached to any charities's right to use or dispose of any property donated to any charity? ▶ Yes No
- 3 Did you give to anyone other than the charity the right to income from any of the donated property or to possession of any of the donated property? ▶ Yes No
- 4 Was any charity other than a 60%/50% charity? Yes No

Federal Carryover Worksheet

2022

▶ Keep for your records

Name(s) Shown on Return Johnny C & Denise J Bianco	Social Security Number _____
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2021 State and Local Income Tax Information

(a) State or Local ID	(b) Paid With Extension	(c) Estimates Pd After 12/31	(d) Total With- held/Pmts	(e) Paid With Return	(f) Total Over- payment	(g) Applied Amount
CA			35,825.		2,962.	
Totals . .			35,825.		2,962.	

2021 State Extension Information

(a) State	(b) Paid With Extension

2021 Locality Extension Information

(a) Locality	(b) Paid With Extension

2021 State Estimates Information

(a) State	(c) Estimates Paid After 12/31

2021 Locality Estimates Information

(a) Locality	(c) Estimates Paid After 12/31

2021 State Taxes Due Information

(a) State	(e) Paid With Return

2021 Locality Taxes Due Information

(a) Locality	(e) Paid With Return

2021 State Refund Applied Information

(a) State	(g) Applied Amount

2021 Locality Refund Applied Information

(a) Locality	(g) Applied Amount

2021 State Tax Refund Information

(a) State	(d) Total Withheld/Pmts	(f) Total Overpayment
CA	35,825.	2,962.

2021 Locality Tax Refund Information

(a) Locality	(d) Total Withheld/Pmts	(f) Total Overpayment

Johnny C & Denise J Bianco

Other Tax and Income Information		2021	2022
1	Filing status	2 MFJ	2 MFJ
2	Number of exemptions for blind or over 65 (0 - 4)	0	
3	Itemized deductions	87,150.	92,331.
4	Check box if required to itemize deductions	<input type="checkbox"/>	<input type="checkbox"/>
5	Adjusted gross income	498,928.	492,656.
6	Tax liability for Form 2210 or Form 2210-F		91,055.
7	Alternative minimum tax		
8	Federal overpayment applied to next year estimated tax		

QuickZoom to the IRA Information Worksheet for IRA information ▶

Excess Contributions		2021	2022
9 a	Taxpayer's excess Archer MSA contributions as of 12/31		
b	Spouse's excess Archer MSA contributions as of 12/31		
10 a	Taxpayer's excess Coverdell ESA contributions as of 12/31		
b	Spouse's excess Coverdell ESA contributions as of 12/31		
11 a	Taxpayer's excess HSA contributions as of 12/31		
b	Spouse's excess HSA contributions as of 12/31		

Loss and Expense Carryovers		2021	2022
Note: Enter all entries as a positive amount			
12 a	Short-term capital loss		
b	AMT Short-term capital loss		
13 a	Long-term capital loss		
b	AMT Long-term capital loss		
14 a	Net operating loss available to carry forward		
b	AMT Net operating loss available to carry forward		
15 a	Investment interest expense disallowed		
b	AMT Investment interest expense disallowed		
16	Nonrecaptured net Section 1231 losses from:		
	a 2022		
	b 2021		
	c 2020		
	d 2019		
	e 2018		
	f 2017		
17	AMT Nonrecap'd net Sec 1231 losses from:		
	a 2022		
	b 2021		
	c 2020		
	d 2019		
	e 2018		
	f 2017		

Credit Carryovers		2021	2022
18	General business credit		
19	Adoption credit from:		
	a 2022		
	b 2021		
	c 2020		
	d 2019		
	e 2018		
	f 2017		
20	Mortgage interest credit from:		
	a 2022		
	b 2021		
	c 2020		
	d 2019		
21	Credit for prior year minimum tax		
22	District of Columbia first-time homebuyer credit		
23	Residential Clean Energy Credit (Previously the Residential energy efficient property credit		

Other Carryovers				2021	2022
24	Section 179 expense deduction disallowed			24	
25	Excess foreign housing deduction:	a	Taxpayer (Form 2555, line 46)	25 a	0.
		b	Taxpayer (Form 2555, line 48)	b	
		c	Spouse (Form 2555, line 46)	c	
		d	Spouse (Form 2555, line 48)	d	

Charitable Contribution Carryovers

26	2021 Carryover of charitable contributions from:	Other Property		Capital Gain		Cash
		(a) 50%	(b) 30%	(c) 30%	(d) 20%	(e) 60%
a	2021					
b	2020					
c	2019					
d	2018					
e	2017					

27	2022 Carryover of charitable contributions from:	Other Property		Capital Gain		Cash
		(a) 50%	(b) 30%	(c) 30%	(d) 20%	(e) 60%
a	2022					0.
b	2021					
c	2020					
d	2019					
e	2018					

28 Amount overpaid less earned income credit

Qualified Business Income Deduction (Section 199A) carryovers				2021	2022
29	Qualified business loss carryforward			29	
30	Qualified PTP loss carryforward			30	
31	Applicable percentage	2018	31 a		
		2019	b		
		2020	c		
		2021	d		

2021 State Capital Loss Carryovers (For users not transferring from the prior year)

State ID	Short-term Capital Loss for State	AMT Short-term Capital Loss for State	Long-term Capital Loss for State	AMT Long-term Capital Loss for State	Capital Loss (combined) for State	AMT Capital Loss (combined) for State

Employee Business Expenses

(for use only by Armed Forces reservists, qualified performing artists, fee-basis state or local government officials, and employees with impairment-related work expenses)

2022

Department of the Treasury
Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form2106 for instructions and the latest information.

Attachment
Sequence No. **129**

Your name
JOHNNY C BIANCO

Occupation in which you incurred expenses
LAW ENFORCEMENT

Social security number

Part I Employee Business Expenses and Reimbursements

Step 1 Enter Your Expenses

		Column A Other Than Meals	Column B Meals
1	Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.)		
2	Parking fees, tolls, and transportation, including trains, buses, etc., that didn't involve overnight travel or commuting to and from work	650	
3	Travel expense while away from home overnight, including lodging, airfare, car rental, etc. Don't include meals		
4	Business expenses not included on lines 1 through 3. Don't include meals	8980	
5	Meals expenses (see instructions)		
6	Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	9630	

Note: If you weren't reimbursed for any expenses in Step 1, skip line 7 and enter the amounts from line 6 on line 8.

Step 2 Enter Reimbursements Received From Your Employer for Expenses Listed in Step 1

7	Enter reimbursements received from your employer that weren't reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 of your Form W-2 (see instructions)		
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Step 3 Figure Expenses To Deduct

8	Subtract line 7 from line 6. If zero or less, enter -0-. However, if line 7 is greater than line 6 in Column A, report the excess as income on Form 1040 or 1040-SR, line 1 (or on Form 1040-NR, line 1a)	9630	
9	In Column A, enter the amount from line 8. In Column B, see the instructions for the amount to enter	9630	
10	Add the amounts on line 9 for both columns and enter the total here. Also, enter the total on Schedule 1 (Form 1040), line 12. Employees with impairment-related work expenses, see the instructions for rules on where to enter the total on your return		9630

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