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

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

Your first name and middle initial	Last name	Your social security number
Johnny C	Bianco	
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number
Denise J	Bianco	

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

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

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

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

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

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

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

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

Dependents (see instructions): If more than four dependents, see instructions and check here ☐

(1) First name Last name	(2) Social security number	(3) Relationship to you	(4) Child tax credit	(4) Credit for other dependents
			☐	☐
			☐	☐
			☐	☐
			☐	☐

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a Form W-2, see instructions.

1a	Total amount from Form(s) W-2, box 1 (see instructions)	1a	538,088.
b	Household employee wages not reported on Form(s) W-2	1b	
c	Tip income not reported on line 1a (see instructions)	1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d	
e	Taxable dependent care benefits from Form 2441, line 26	1e	
f	Employer-provided adoption benefits from Form 8839, line 29	1f	
g	Wages from Form 8919, line 6	1g	
h	Other earned income (see instructions)	1h	0.
i	Nontaxable combat pay election (see instructions) 1i		
z	Add lines 1a through 1h	1z	538,088.
2a	Tax-exempt interest 2a; b Taxable interest	2b	62.
3a	Qualified dividends 3a; b Ordinary dividends	3b	
4a	IRA distributions 4a; b Taxable amount	4b	
5a	Pensions and annuities 5a; b Taxable amount	5b	180,321.
6a	Social security benefits 6a; b Taxable amount	6b	
c	If you elect to use the lump-sum election method, check here (see instructions) ☐		
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐	7	
8	Additional income from Schedule 1, line 10	8	
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income**	9	718,471.
10	Adjustments to income from Schedule 1, line 26	10	
11	Subtract line 10 from line 9. This is your **adjusted gross income**	11	718,471.
12	**Standard deduction or itemized deductions** (from Schedule A)	12	126,067.
13	Qualified business income deduction from Form 8995 or Form 8995-A	13	
14	Add lines 12 and 13	14	126,067.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your **taxable income**	15	592,404.

Attach Sch. B if required.

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

Tax and Credits

16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐			16	151,130.
17	Amount from Schedule 2, line 3			17	
18	Add lines 16 and 17			18	151,130.
19	Child tax credit or credit for other dependents from Schedule 8812			19	
20	Amount from Schedule 3, line 8			20	977.
21	Add lines 19 and 20			21	977.
22	Subtract line 21 from line 18. If zero or less, enter -0-			22	150,153.
23	Other taxes, including self-employment tax, from Schedule 2, line 21			23	2,608.
24	Add lines 22 and 23. This is your **total tax**			24	152,761.

Payments

25	Federal income tax withheld from:				
a	Form(s) W-2	25a	123,017.		
b	Form(s) 1099	25b	28,054.		
c	Other forms (see instructions)	25c	2,989.		
d	Add lines 25a through 25c			25d	154,060.
26	2023 estimated tax payments and amount applied from 2022 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	154,060.

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	1,299.
35a	Amount of line 34 you want **refunded to you**. If Form 8888 is attached, check here ☐			35a	1,299.
b	Routing number	c Type: ☒ Checking ☐ Savings			
d	Account number				
36	Amount of line 34 you want **applied to your 2024 estimated tax**	36			

Direct deposit? See instructions.

Amount You Owe

37	Subtract line 33 from line 24. This is the **amount you owe**. For details on how to pay, go to *www.irs.gov/Payments* or see instructions			37	
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		

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

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ 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

2023

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 ☐			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	2,606.
12	Net investment income tax. Attach Form 8960			12	2.
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	2,608.

SCHEDULE 3 (Form 1040)

Department of the Treasury Internal Revenue Service

Additional Credits and Payments

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

OMB No. 1545-0074

2023

Attachment Sequence No. **03**

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

Your social security number

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	
2	Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441	2	
3	Education credits from Form 8863, line 19	3	
4	Retirement savings contributions credit. Attach Form 8880	4	
5a	Residential clean energy credit from Form 5695, line 15	5a	
b	Energy efficient home improvement credit from Form 5695, line 32	5b	977.
6	Other nonrefundable credits:		
a	General business credit. Attach Form 3800	6a	
b	Credit for prior year minimum tax. Attach Form 8801	6b	
c	Adoption credit. Attach Form 8839	6c	
d	Credit for the elderly or disabled. Attach Schedule R	6d	
e	Reserved for future use	6e	
f	Clean vehicle credit. Attach Form 8936	6f	
g	Mortgage interest credit. Attach Form 8396	6g	
h	District of Columbia first-time homebuyer credit. Attach Form 8859	6h	
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	
l	Amount on Form 8978, line 14. See instructions	6l	
m	Credit for previously owned clean vehicles. Attach Form 8936	6m	
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 4, 5a, 5b, and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20	8	977.

(continued on page 2)

Part 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	
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:				
a	Form 2439	13a			
b	Credit for repayment of amounts included in income from earlier years	13b			
c	Elective payment election amount from Form 3800, Part III, line 6, column (i)	13c			
d	Deferred amount of net 965 tax liability (see instructions)	13d			
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 1040-NR, line 31			15	

SCHEDULE A (Form 1040)

Department of the Treasury Internal Revenue Service

Itemized Deductions

Attach to Form 1040 or 1040-SR.

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

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

OMB No. 1545-0074

2023

Attachment Sequence No. 07

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

Your social security number:

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] 718,471.				
	3	Multiply line 2 by 7.5% (0.075)	3	53,885.		
	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 ☐	5a	49,542.		
	b	State and local real estate taxes (see instructions)	5b	3,357.		
	c	State and local personal property taxes	5c	1,550.		
	d	Add lines 5a through 5c	5d	54,449.		
	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 ☐				
	a	Home mortgage interest and points reported to you on Form 1098. See instructions if limited	8a	21,567.		
	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	21,567.		
	9	Investment interest. Attach Form 4952 if required. See instructions	9			
	10	Add lines 8e and 9			10	21,567.
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	85,200.		
	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	9,300.		
	13	Carryover from prior year	13			
	14	Add lines 11 through 13			14	94,500.
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	126,067.
	18	If you elect to itemize deductions even though they are less than your standard deduction, check this box ☐				

Form **8959**

Department of the Treasury
Internal Revenue Service

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, or 1040-SS.
Go to *www.irs.gov/Form8959* for instructions and the latest information.

OMB No. 1545-0074
2023
Attachment Sequence No. **71**

Name(s) shown on return: Johnny C & Denise J Bianco

Your social security number

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	539,515.		
2	Unreported tips from Form 4137, line 6	2			
3	Wages from Form 8919, line 6	3			
4	Add lines 1 through 3	4	539,515.		
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	289,515.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II			7	2,606.

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-	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-SS filers, see instructions), and go to Part V	18	2,606.

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	10,812.		
20	Enter the amount from line 1	20	539,515.		
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	7,823.		
22	Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages			22	2,989.
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-SS filers, see instructions)			24	2,989.

Form **8960**

Department of the Treasury
Internal Revenue Service

Net Investment Income Tax— Individuals, Estates, and Trusts

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

OMB No. 1545-2227

2023

Attachment Sequence No. 72

Name(s) shown on your tax return: 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	62.
2	Ordinary dividends (see instructions)			2	
3	Annuities (see instructions)			3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a			
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			4c	
5a	Net gain or loss from disposition of property (see instructions)	5a			
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b			
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c			
d	Combine lines 5a through 5c			5d	
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)			6	
7	Other modifications to investment income (see instructions)			7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			8	62.

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	5.		
c	Miscellaneous investment expenses (see instructions)	9c			
d	Add lines 9a, 9b, and 9c			9d	5.
10	Additional modifications (see instructions)			10	
11	Total deductions and modifications. Add lines 9d and 10			11	5.

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	57.
	Individuals:				
13	Modified adjusted gross income (see instructions)	13	718,471.		
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	468,471.		
16	Enter the smaller of line 12 or line 15			16	57.
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	2.
	Estates and Trusts:				
18a	Net investment income (line 12 above)	18a			
b	Deductions for distributions of net investment income and charitable deductions (see instructions)	18b			
c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c			
19a	Adjusted gross income (see instructions)	19a			
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b			
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c			
20	Enter the smaller of line 18c or line 19c			20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). **Enter here and include on your tax return** (see instructions)			21	

Form **5695**

Department of the Treasury
Internal Revenue Service

Residential Energy Credits

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

Go to *www.irs.gov/Form5695* for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment Sequence No. **75**

Name(s) shown on return: Johnny C & Denise J Bianco

Your social security number:

Part I **Residential Clean Energy Credit** (See instructions before completing this part.)

Note: Skip lines 1 through 11 if you only have a **credit carryforward from 2022.**

Enter the complete address of the home where you installed the property and/or technology associated with lines 1 through 4 and 5b. For more than one home, see instructions.

Number and street	Unit no.	City or town	State	ZIP code

1	Qualified solar electric property costs	1	
2	Qualified solar water heating property costs	2	
3	Qualified small wind energy property costs	3	
4	Qualified geothermal heat pump property costs	4	
5a	Qualified battery storage technology. Does the qualified battery storage technology have a capacity of at least 3 kilowatt hours? (See instructions.) If you checked the "No" box, you cannot claim a credit for qualified battery storage technology	5a	☐ Yes ☐ No
b	If you checked the "Yes" box, enter the qualified battery technology costs	5b	
6a	Add lines 1 through 5b	6a	
b	Multiply line 6a by 30% (0.30)	6b	
7a	Qualified fuel cell property. Was qualified fuel cell property installed on, or in connection with, your **main home** located in the United States? (See instructions.)	7a	☐ Yes ☐ No

If you checked the "No" box, you cannot claim a credit for qualified fuel cell property. Skip lines 7b through 11.

b Enter the complete address of the main home where you installed the fuel cell property.

Number and street	Unit no.	City or town	State	ZIP code

8	Qualified fuel cell property costs	8	
9	Multiply line 8 by 30% (0.30)	9	
10	Kilowatt capacity of property on line 8 above ________ x $1,000	10	
11	Enter the smaller of line 9 or line 10	11	
12	Credit carryforward from 2022. Enter the amount, if any, from your 2022 Form 5695, line 16	12	
13	Add lines 6b, 11, and 12	13	
14	Limitation based on tax liability. Enter the amount from the Residential Clean Energy Credit Limit Worksheet. (See instructions.)	14	
15	**Residential clean energy credit.** Enter the smaller of line 13 or line 14. Also include this amount on Schedule 3 (Form 1040), line 5a	15	
16	Credit carryforward to 2024. If line 15 is less than line 13, subtract line 15 from line 13	16	

Part II **Energy Efficient Home Improvement Credit**

Section A—Qualified Energy Efficiency Improvements

17a Are the qualified energy efficiency improvements installed in or on your main home located in the United States? (See instructions.) . . . **17a** ☐ Yes ☒ No

b Are you the original user of the qualified energy efficiency improvements? . . . **17b** ☐ Yes ☒ No

c Are the components reasonably expected to remain in use for at least 5 years? . . . **17c** ☐ Yes ☒ No

If you checked the "No" box for line 17a, 17b, or 17c, you cannot claim the energy efficient home improvement credit. Do not complete Part II, Section A.

d Enter the complete address of the main home where you made the qualifying improvements.
Caution: You can only have one main home at a time. (See instructions.)

Number and street	Unit no.	City or town	State	ZIP code

e Were any of these improvements related to the construction of this main home? . . . **17e** ☐ Yes ☒ No

If you checked the "Yes" box, you can only claim the energy efficient home improvement credit for qualifying improvements that were not related to the construction of the home. Do not include expenses related to the construction of your main home, even if the improvements were made after you moved into the home.

18	Insulation or air sealing material or system.				
a	Enter the cost of insulation material or system (include air sealing material or system) specifically and primarily designed to reduce heat loss or gain of your home that meets the criteria established by the IECC. (See instructions.) . . .	**18a**			
b	Multiply line 18a by 30% (0.30). Enter the results. Do **not** enter more than $1,200 . . .			**18b**	
19	Exterior doors that meet the applicable Energy Star requirements.				
a	Enter the cost of the most expensive door you bought . . .	**19a**			
b	Multiply line 19a by 30% (0.30). Do **not** enter more than $250 . . .	**19b**			
c	Enter the cost of all other qualifying exterior doors . . .	**19c**			
d	Multiply line 19c by 30% (0.30) . . .	**19d**			
e	Add lines 19b and 19d. Do **not** enter more than $500 . . .			**19e**	
20	Windows and skylights that meet the Energy Star certification requirements.				
a	Enter the cost of exterior windows and skylights that meet the Energy Star certification requirements. (See instructions.) . . .	**20a**			
b	Multiply line 20a by 30% (0.30). Enter the results. Do **not** enter more than $600 . . .			**20b**	

Section B—Residential Energy Property Expenditures

21a Did you incur costs for qualified energy property installed on or in connection with a home located in the United States? . . . **21a** ☒ Yes ☐ No

b Was the qualified energy property originally placed into service by you? . . . **21b** ☒ Yes ☐ No

If you checked the "No" box for line 21a or 21b, you cannot claim the credit for your residential energy property costs. Skip lines 22 through 25 and line 29. Go to line 26.

c Enter the complete address of each home where you installed qualified energy property.

Number and street	Unit no.	City or town	State	ZIP code
-				-
-				-

22	Residential energy property costs (include labor costs for onsite preparation, assembly, and original installation). (See instructions.)				
a	Enter the cost of central air conditioners . . .	**22a**			
b	Multiply line 22a by 30% (0.30). Enter the results. Do **not** enter more than $600 . . .			**22b**	
23a	Enter the cost of natural gas, propane, or oil water heaters . . .	**23a**	1,255.		
b	Multiply line 23a by 30% (0.30). Enter the results. Do **not** enter more than $600 . . .			**23b**	377.
24a	Enter the cost of natural gas, propane, or oil furnace or hot water boilers . .	**24a**	5,870.		
b	Multiply line 24a by 30% (0.30). Enter the results. Do **not** enter more than $600 . . .			**24b**	600.

Section B—Residential Energy Property Expenditures *(continued)*

25a	Enter the cost of improvements or replacement of panelboards, subpanelboards, branch circuits, or feeders	25a			
b	Multiply line 25a by 30% (0.30). Enter the results. Do **not** enter more than $600			25b	
26	Home energy audits.				
a	Did you incur costs for a home energy audit that included an inspection of your main home located in the United States and a written report prepared by a certified home energy auditor? (See instructions.)			26a	☐ Yes ☒ No
	If you checked the "No" box, you cannot claim the home energy audit credit. Stop. Go to line 27.				
b	Enter the cost of the home energy audits	26b			
c	Multiply line 26b by 30% (0.30). Enter the results. Do **not** enter more than $150			26c	
27	Add lines 18b, 19e, 20b, 22b, 23b, 24b, 25b, and 26c	27	977.		
28	Enter the smaller of line 27 or $1,200			28	977.
29	Heat pumps and heat pump water heaters; biomass stoves and biomass boilers.				
a	Enter the cost of electric or natural gas heat pumps	29a			
b	Enter the cost of electric or natural gas heat pump water heaters	29b			
c	Enter the cost of biomass stoves and biomass boilers	29c			
d	Add lines 29a, 29b, and 29c	29d			
e	Multiply line 29d by 30% (0.30). Enter the results. Do **not** enter more than $2,000			29e	
30	Add lines 28 and 29e			30	977.
31	Limitation based on tax liability. Enter the amount from the Energy Efficient Home Improvement Credit Limit Worksheet. (See instructions.)			31	151,130.
32	**Energy efficient home improvement credit.** Enter the smaller of line 30 or line 31. Also include this amount on Schedule 3 (Form 1040), line 5b			32	977.

Form **8283**
(Rev. December 2023)
Department of the Treasury
Internal Revenue Service

Noncash Charitable Contributions

Attach one or more Forms 8283 to your tax return if you claimed a total deduction of over $500 for all contributed property.

Go to *www.irs.gov/Form8283* for instructions and the latest information.

OMB No. 1545-0074
Attachment Sequence No. **155**

Name(s) shown on your income tax return: Johnny C & Denise J Bianco

Identifying number

Enter the entity name and identifying number from the tax return where the noncash charitable contribution was originally reported, if different from above.

Name: ______ Identifying number: ______

Check this box if a family pass-through entity made the noncash charitable contribution. See instructions . . . . ☐

Note: Figure the amount of your contribution deduction before completing this form. See your tax return instructions.

Section A. Donated Property of $5,000 or Less and Publicly Traded Securities—List in this section **only** an item (or a group of similar items) for which you claimed a deduction of $5,000 or less. Also list publicly traded securities and certain other property even if the deduction is more than $5,000. If you need more space, attach a statement. See instructions.

1	(a) Name and address of the donee organization	(b) If donated property is a vehicle (see instructions), check the box. Also enter the vehicle identification number (unless Form 1098-C is attached).	(c) Description and condition of donated property (For a vehicle, enter the year, make, model, and mileage. For securities and other property, see instructions.)
A	Salvation Army 24201 Orange Street Perris CA 92570	☐	furniture
B	Salvation Army 24201 Orange Street Perris CA 92570	☐	Clothing
C		☐	
D		☐	

Note: If the amount you claimed as a deduction for an item is $500 or less, you do not have to complete columns (e), (f), and (g).

	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)	(f) How acquired by donor	(g) Donor's cost or adjusted basis	(h) Fair market value (see instructions)	(i) Method used to determine the fair market value
A	01/10/2023	10/2019	Purchase	8,200.	4,800.	Comparative sales
B	04/11/2023	various	Purchase	11,500.	4,500.	Consignment shop
C						
D						

Section B. Donated Property Over $5,000 (Except Publicly Traded Securities, Vehicles, Intellectual Property or Inventory Reportable in Section A)—Complete this section for one item (or a group of similar items) for which you claimed a deduction of more than $5,000 per item or group (except contributions reportable in Section A). Provide a separate form for each item donated unless it is part of a group of similar items. A qualified appraisal is required for items reportable in Section B and in certain cases must be attached. See instructions.

Part I Information on Donated Property

2 Check the box that describes the type of property donated. See instructions for definitions.

- a ☐ Art (contribution of $20,000 or more)
- b ☐ Qualified conservation contribution
- b(1) ☐ Certified historic structure NPS # ______
- c ☐ Art (contribution of less than $20,000)
- d ☐ Other real estate
- e ☐ Equipment
- f ☐ Securities
- g ☐ Collectibles
- h ☐ Intellectual property
- i ☐ Vehicles
- j ☐ Clothing and household items
- k ☐ Digital assets
- l ☐ Other

3	(a) Description of donated property (if you need more space, attach a separate statement)	(b) If any tangible personal property or real property was donated, give a brief summary of the overall physical condition of the property at the time of the gift.	(c) Appraised fair market value
A			
B			
C			

	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) For bargain sales, enter amount received	(h) Qualified conservation contribution relevant basis (see instructions)	(i) Amount claimed as a deduction (see instructions)
A						
B						
C						

Name(s) shown on your income tax return: Johnny C & Denise J Bianco

Identifying number

Part II **Partial Interests and Restricted Use Property (Other Than Qualified Conservation Contributions)—** Complete lines 4a through 4e if you gave less than an entire interest in a property listed in Section B, Part I. Complete lines 5a through 5c if conditions were placed on a contribution listed in Section B, Part I; also attach the required statement. See instructions.

4a Enter the letter from Section B, Part I that identifies the property for which you gave less than an entire interest ______
If Section B, Part II applies to more than one property, attach a separate statement.

b Total amount claimed as a deduction for the property listed in Section B, Part I: **(1)** For this tax year . . ______
(2) For any prior tax years ______

c Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization in Section B, Part V, below):
Name of charitable organization (donee)

Address (number, street, and room or suite no.) | City or town, state, and ZIP code

d For tangible property, enter the place where the property is located or kept ______

e Name of any person, other than the donee organization, having actual possession of the property ______

		Yes	No
5a	Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property?		
b	Did you give to anyone (other than the donee organization or another organization participating with the donee organization in cooperative fundraising) the right to the income from the donated property or to the possession of the property, including the right to vote donated securities, to acquire the property by purchase or otherwise, or to designate the person having such income, possession, or right to acquire?		
c	Is there a restriction limiting the donated property for a particular use?		

Part III **Taxpayer (Donor) Statement—** List each item included in Section B, Part I above that the appraisal identifies as having a value of $500 or less. See instructions.

I declare that the following item(s) included in Section B, Part I above has to the best of my knowledge and belief an appraised value of not more than $500 (per item). Enter identifying letter from Section B, Part I and describe the specific item. See instructions.

Signature of taxpayer (donor) | Date

Part IV **Declaration of Appraiser—** See instructions.

I declare that I am not the donor, the donee, a party to the transaction in which the donor acquired the property, employed by, or related to any of the foregoing persons, or married to any person who is related to any of the foregoing persons. And, if regularly used by the donor, donee, or party to the transaction, I performed the majority of my appraisals during my tax year for other persons.

Also, I declare that I perform appraisals on a regular basis; and that because of my qualifications as described in the appraisal, I am qualified to make appraisals of the type of property being valued. I certify that the appraisal fees were not based on a percentage of the appraised property value. Furthermore, I understand that a false or fraudulent overstatement of the property value as described in the qualified appraisal or this Form 8283 may subject me to the penalty under section 6701(a) (aiding and abetting the understatement of tax liability). I understand that my appraisal will be used in connection with a return or claim for refund. I also understand that, if there is a substantial or gross valuation misstatement of the value of the property claimed on the return or claim for refund that is based on my appraisal, I may be subject to a penalty under section 6695A of the Internal Revenue Code, as well as other applicable penalties. I affirm that I have not been at any time in the three-year period ending on the date of the appraisal barred from presenting evidence or testimony before the Department of the Treasury or the Internal Revenue Service pursuant to 31 U.S.C. 330(c).

Sign Here
Appraiser signature | Date
Appraiser name | Title

Business address (including room or suite no.) | **Identifying number**

City or town, state, and ZIP code

Part V **Donee Acknowledgment—** See instructions.

This charitable organization acknowledges that it is a qualified organization under section 170(c) and that it received the donated property as described in Section B, Part I, above on the following date ______
Furthermore, this organization affirms that in the event it sells, exchanges, or otherwise disposes of the property described in Section B, Part I (or any portion thereof) within 3 years after the date of receipt, it will file **Form 8282**, Donee Information Return, with the IRS and give the donor a copy of that form. This acknowledgment does not represent agreement with the claimed fair market value.

Does the organization intend to use the property for an unrelated use? . . . . ☐ Yes ☐ No

Name of charitable organization (donee)	**Employer identification number**
Address (number, street, and room or suite no.)	City or town, state, and ZIP code

Authorized signature	Title	Date

Form 8960
Lines 4b, 5b, 7, 9, 10

Form 8960 Worksheet

2023

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

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 2022 for net investment tax purposes	

Enter additional adjustments not included above and check the box if a capital gain or loss:

	☐	
	☐	
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	49,542.
2	Investment income	2	62.
3	Total adjusted gross income	3	718,471.
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	5.
6	State and local taxes (Schedule A, line 5e)	6	10,000.
7	Lesser of line 5 or line 6	7	5.
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	5.

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	5.
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	5.
5	Enter the amount of total itemized deductions allowed after the section 68 limitation. Form 1040, line 12	5	126,067.
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	126,067.
8	Enter the lesser of line 7 or line 4	8	5.

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	5.	x 1.000000	=	5.
	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 12/31/2022	(c) Suspended 12/31/2023	(d) Used against activity	(e) Used against other passive

2) Former Passive Activity Suspended Losses - Schedule D

(a) Activity name	(b) Suspended 12/31/2022	(c) Suspended 12/31/2023	(d) Used against activity	(e) Used against other passive

3) Former Passive Activity Suspended Losses - Form 4797

(a) Activity name	(b) Suspended 12/31/2022	(c) Suspended 12/31/2023	(d) Used against activity	(e) Used against other passive

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

►Attach to your income tax return

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

Tax Year: 2023

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: 12/31/2023

5 Year Property
7 Year Property

Tax Payments Worksheet 2023

► Keep for your records

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

Estimated Tax Payments for 2023 (If more than 4 payments for any state or locality, see Tax Help)

	Federal		State			Local		
	Date	Amount	Date	Amount	ID	Date	Amount	ID
1	04/18/23		04/18/23			04/18/23		
2	06/15/23		06/15/23			06/15/23		
3	09/15/23		09/15/23			09/15/23		
4	01/16/24		01/16/24			01/16/24		
5								
Tot Estimated Payments . . .								

Tax Payments Other Than Withholding (If multiple states, see Tax Help)	Federal	State	ID	Local	ID
6 Overpayments applied to 2023					
7 Credited by estates and trusts					
8 **Totals** Lines 1 through 7					
9 2023 extensions					

Taxes Withheld From:	Federal	State	Local
10 Forms W-2	123,017.	38,083.	
11 Forms W-2G			
12 Forms 1099-R	28,054.	11,393.	
13 Forms 1099-MISC, 1099-NEC, 1099-K, 1099-G .			
14 Schedules K-1			
15 Forms 1099-INT, DIV and OID			
16 Social Security and Railroad Benefits			
17 Form 1099-B . . . . St Loc			
18 a Other withholding . . . . St Loc			
b Other withholding . . . . St Loc			
c Other withholding . . . . St Loc			
d Positive Adjustment . . . St Loc			
e Negative Adjustment . . St Loc			
f Additional Medicare Tax	2,989.		
19 **Total Withholding** Lines 10 through 18f	154,060.	49,476.	
20 **Total Tax Payments for 2023**	154,060.	49,476.	

Prior Year Taxes Paid In 2023 (If multiple states or localities, see Tax Help)	State	ID	Local	ID
21 Tax paid with 2022 extensions				
22 2022 estimated tax paid after 12/31/2022				
23 Balance due paid with 2022 return				
24 Other (amended returns, installment payments, etc) . .				

Schedule A Line 5

State and Local Tax Deduction Worksheet

2023

► Keep for your records

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

State and Local Income Taxes

	State income taxes:		
1	State income tax withheld	1	49,476.
2	2023 state estimated taxes paid in 2023	2	
3	2022 state estimated taxes paid in 2023	3	
4	Amount paid with 2022 state application for extension	4	
5	Amount paid with 2022 state income tax return	5	
6	Overpayment on 2022 state income tax return applied to 2023 tax	6	
7	Other amounts paid in 2023 (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	2023 local estimated taxes paid in 2023	10	
11	2022 local estimated taxes paid in 2023	11	
12	Amount paid with 2022 local application for extension	12	
13	Amount paid with 2022 local income tax return	13	
14	Overpayment on 2022 local income tax return applied to 2023 tax	14	
15	Other amounts paid in 2023 (amended returns, installment payments, etc.)	15	
16	Local estimated tax from Schedule(s) K-1 (Form 1041)	16	
	Other:		
17	State mandatory taxes	17	66.
18	**Total** Add lines 1 through 17	18	49,542.
19	State and local refund allocated to 2023	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	49,542.

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

2023

► Keep for your records

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

mber

Part I Cash Contributions Summary

Name of Charitable Organization	(a) Total	(b) 60% Limit	(c) 30% Limit	(d) 100% Limit
Sandals Church	14,200.	14,200.		
Harvest Church	23,000.	23,000.		
Olive Crest	10,000.	10,000.		
Wounded Warrior Foundation	10,000.	10,000.		
National Breast Cancer Coalition F	5,000.	5,000.		
Ronald McDonald House Charities	3,000.	3,000.		
Cops for Kids	10,000.	10,000.		
Tunnels to Towers Foundation	10,000.	10,000.		
Totals:	85,200.	85,200.		

Part II Non-Cash Contributions Summary

	Total	Other Property		Capital Gain Property	
Name of Charitable Organization	(a) Total	(b) 50% Limit	(c) 30% Limit	(d) 30% Limit	(e) 20% Limit
Salvation Army	4,800.	4,800.			
Salvation Army	4,500.	4,500.			
Totals:	9,300.	9,300.			

Part III Contribution Carryovers to 2024

	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 2023 contributions	94,500.	85,200.	9,300.			
2 2023 contributions allowed	94,500.	85,200.	9,300.			
3 Carryovers from:						
a 2022 tax year						
b 2021 tax year						
c 2020 tax year						
d 2019 tax year						
e 2018 tax year						
4 Carryovers allowed in 2023						
5 Carryovers disallowed in 2023						
6 Carryovers to 2024:						
a From 2023	0.	0.	0.			
b From 2022						
c From 2021						
d From 2020						
e From 2019						
f From 2018						

Part IV Special Situations in Your Return for Current Year Donations

1	Was the **entire interest** given for all property donated to all charities?	[X] Yes	[ ] No
2	Were **restrictions** attached to any charities's right to use or dispose of any property donated to any charity? ►	[ ] Yes	[X] 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	[X] No
4	Was any charity other than a 60%/50% charity?	[ ] Yes	[X] No

Federal Carryover Worksheet

2023

► Keep for your records

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

2022 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
Totals . .						

2022 State Extension Information

(a) State	(b) Paid With Extension

2022 Locality Extension Information

(a) Locality	(b) Paid With Extension

2022 State Estimates Information

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

2022 Locality Estimates Information

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

2022 State Taxes Due Information

(a) State	(e) Paid With Return

2022 Locality Taxes Due Information

(a) Locality	(e) Paid With Return

2022 State Refund Applied Information

(a) State	(g) Applied Amount

2022 Locality Refund Applied Information

(a) Locality	(g) Applied Amount

2022 State Tax Refund Information

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

2022 Locality Tax Refund Information

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

Johnny C & Denise J Bianco

Other Tax and Income Information		2022	2023
1 Filing status	1	2 MFJ	2 MFJ
2 Number of exemptions for blind or over 65 (0 - 4)	2		
3 Itemized deductions	3		126,067.
4 Check box if required to itemize deductions	4	☐	☐
5 Adjusted gross income	5	492,656.	718,471.
6 Tax liability for Form 2210 or Form 2210-F	6		152,761.
7 Alternative minimum tax	7		
8 Federal overpayment applied to next year estimated tax	8		

QuickZoom to the IRA Information Worksheet for IRA information ►

Excess Contributions		2022	2023
9 a Taxpayer's excess Archer MSA contributions as of 12/31	9 a		
b Spouse's excess Archer MSA contributions as of 12/31	b		
10 a Taxpayer's excess Coverdell ESA contributions as of 12/31	10 a		
b Spouse's excess Coverdell ESA contributions as of 12/31	b		
11 a Taxpayer's excess HSA contributions as of 12/31	11 a		
b Spouse's excess HSA contributions as of 12/31	b		

Loss and Expense Carryovers Note: Enter all entries as a positive amount		2022	2023
12 a Short-term capital loss	12 a		
b AMT Short-term capital loss	b		
13 a Long-term capital loss	13 a		
b AMT Long-term capital loss	b		
14 a Net operating loss available to carry forward	14 a		
b AMT Net operating loss available to carry forward	b		
15 a Investment interest expense disallowed	15 a		
b AMT Investment interest expense disallowed	b		
16 Nonrecaptured net Section 1231 losses from: a 2023	16 a		
b 2022	b		
c 2021	c		
d 2020	d		
e 2019	e		
f 2018	f		
17 AMT Nonrecap'd net Sec 1231 losses from: a 2023	17 a		
b 2022	b		
c 2021	c		
d 2020	d		
e 2019	e		
f 2018	f		

Credit Carryovers		2022	2023
18 General business credit	18		
19 Adoption credit from: a 2023	19a		
b 2022	b		
c 2021	c		
d 2020	d		
e 2019	e		
f 2018	f		
20 Mortgage interest credit from: a 2023	20 a		
b 2022	b		
c 2021	c		
d 2020	d		
21 Credit for prior year minimum tax	21		
22 District of Columbia first-time homebuyer credit	22		
23 Residential Clean Energy Credit (Previously the Residential energy efficient property credit	23		

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Other Carryovers		2022	2023
24 Section 179 expense deduction disallowed	24		0.
25 Excess foreign housing deduction: a Taxpayer (Form 2555, line 46)	25 a		
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 **2022** Carryover of charitable contributions from:	Other Property		Capital Gain		Cash
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%	**(e)** 60%
a 2022					
b 2021					
c 2020					
d 2019					
e 2018					

27 **2023** Carryover of charitable contributions from:	Other Property		Capital Gain		Cash
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%	**(e)** 60%
a 2023					0.
b 2022					
c 2021					
d 2020					
e 2019					

28 Amount overpaid less earned income credit

Qualified Business Income Deduction (Section 199A) carryovers		2022	2023
29 Qualified business loss carryforward	29		
30 Qualified PTP loss carryforward	30		
31 Applicable percentage 2018	31 a		
2019	b		
2020	c		
2021	d		
2022	e		

2022 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