

Form 1040

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 _____, ending _____ See separate instructions.

Your first name and middle initial: **JOEL E.** Last name: **JACOB** Your social security number: [REDACTED]

If joint return, spouse's first name and middle initial: _____ Last name: _____ Spouse's social security number: _____

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

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

Foreign country name: _____ Foreign province/state/country: _____ Foreign postal code: _____

Filing Status Single Head of household (HOH)

Check only one box. Married filing jointly (even if only one had income) Married filing separately (MFS) Qualifying surviving spouse (QSS)

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

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

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

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

Dependents (see instructions):

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instr.)
			Child tax credit	Credit for other dependents

Income

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

1a	Total amount from Form(s) W-2, box 1 (see instructions)	STMT 1	1a	331,390.
b	Household employee wages not reported on Form(s) W-2		1b	
c	Tip income not reported on line 1a (see instructions)		1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)		1d	
e	Taxable dependent care benefits from Form 2441, line 26		1e	
f	Employer-provided adoption benefits from Form 8839, line 29		1f	
g	Wages from Form 8919, line 6		1g	
h	Other earned income (see instructions)		1h	
i	Nontaxable combat pay election (see instructions)	1i		
z	Add lines 1a through 1h		1z	331,390.
2a	Tax-exempt interest	2a	2b	4,488.
3a	Qualified dividends	3a	3b	4,040.
4a	IRA distributions	4a	4b	
5a	Pensions and annuities	5a	5b	
6a	Social security benefits	6a	6b	
c	If you elect to use the lump-sum election method, check here (see instructions)		7	18,702.
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here		8	6,407,290.
8	Additional income from Schedule 1, line 10		9	6,765,910.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income		10	21,310.
10	Adjustments to income from Schedule 1, line 26		11	6,744,600.
11	Subtract line 10 from line 9. This is your adjusted gross income		12	550,625.
12	Standard deduction or itemized deductions (from Schedule A)		13	1,234,247.
13	Qualified business income deduction from Form 8995 or Form 8995-A		14	1,784,872.
14	Add lines 12 and 13		15	4,959,728.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income			

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

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	1,791,565.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	1,791,565.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	17.
	21	Add lines 19 and 20	21	17.
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	1,791,548.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	17,646.
24	Add lines 22 and 23. This is your total tax	24	1,809,194.	

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2 SEE STATEMENT 4	25a	86,261.
	b	Form(s) 1099	25b	
	c	Other forms (see instructions) SEE STATEMENT 6	25c	1,183.
	d	Add lines 25a through 25c	25d	87,444.
	26	2023 estimated tax payments and amount applied from 2022 return STATEMENT 5	26	1,297,051.
	27	Earned income credit (EIC)	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
31	Amount from Schedule 3, line 15	31	1,600,000.	
32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	1,600,000.	
33	Add lines 25d, 26, and 32. These are your total payments	33	2,984,495.	

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	1,175,301.
	35a	Amount of line 34 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	35a	
	b	Routing number	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	d	Account number		
36	Amount of line 34 you want applied to your 2024 estimated tax	36	1,175,301.	

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: **CAROL S RUBENFAER, CPA** Phone no. [REDACTED] Personal Identification number (PIN) [REDACTED]

Sign Here

Your signature: [REDACTED] Date: [REDACTED] Your occupation: **EXECUTIVE**

Spouse's signature: [REDACTED] Date: [REDACTED] Spouse's occupation: [REDACTED]

Paid Preparer Use Only

Preparer's name: **CAROL S RUBENFAER, CPA** Preparer's signature: [Signature] Date: [REDACTED] PTIN: [REDACTED]

Firm's name: **RUBENFAER & ASSOCIATES PC** Phone no. [REDACTED] Firm's EIN: [REDACTED]

Go to www.irs.gov/Form1040 for instructions and the latest information. Form 1040 (2023)

SCHEDULE 1
(Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2023

Attachment
Sequence No. 01

Department of the Treasury
Internal Revenue Service

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

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

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

JOEL E. JACOB

Your social security number

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	STMT 7	1	0.
2a	Alimony received		2a	
b	Date of original divorce or separation agreement (see instructions)			
3	Business income or (loss). Attach Schedule C		3	
4	Other gains or (losses). Attach Form 4797		4	9,000.
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		5	6,398,290.
6	Farm income or (loss). Attach Schedule F		6	
7	Unemployment compensation		7	
8	Other income:			
a	Net operating loss	8a ()		
b	Gambling	8b		
c	Cancellation of debt	8c		
d	Foreign earned income exclusion from Form 2555	8d ()		
e	Income from Form 8853	8e		
f	Income from Form 8889	8f		
g	Alaska Permanent Fund dividends	8g		
h	Jury duty pay	8h		
i	Prizes and awards	8i		
j	Activity not engaged in for profit income	8j		
k	Stock options	8k		
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l		
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m		
n	Section 951(a) inclusion (see instructions)	8n		
o	Section 951A(a) inclusion (see instructions)	8o		
p	Section 461(l) excess business loss adjustment	8p		
q	Taxable distributions from an ABL account (see instructions)	8q		
r	Scholarship and fellowship grants not reported on Form W-2	8r		
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s ()		
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t		
u	Wages earned while incarcerated	8u		
z	Other income. List type and amount:	8z		
9	Total other income. Add lines 8a through 8z		9	
10	Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8		10	6,407,290.

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

Schedule 1 (Form 1040) 2023

Part II Adjustments to Income

11	Educator expenses		11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106		12	
13	Health savings account deduction. Attach Form 8889		13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	21,310.
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
	b Recipient's SSN			
	c Date of original divorce or separation agreement (see instructions):			
20	IRA deduction		20	
21	Student loan interest deduction		21	
22	Reserved for future use		22	
23	Archer MSA deduction		23	
24	Other adjustments:			
	a Jury duty pay (see instructions)	24a		
	b Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b		
	c Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c		
	d Reforestation amortization and expenses	24d		
	e Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e		
	f Contributions to section 501(c)(18)(D) pension plans	24f		
	g Contributions by certain chaplains to section 403(b) plans	24g		
	h Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h		
	i Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i		
	j Housing deduction from Form 2555	24j		
	k Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k		
	z Other adjustments. List type and amount:	24z		
25	Total other adjustments. Add lines 24a through 24z		25	
26	Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10		26	21,310.

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

JOEL E. JACOB

Your social security number

Part I Tax

1	Alternative minimum tax. Attach Form 6251	1	0.
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	0.

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	1,183.
12	Net investment income tax. Attach Form 8960	12	16,463.
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	

(continued on page 2)

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

Schedule 2 (Form 1040) 2023

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	17,646.

SCHEDULE 3
(Form 1040)

Additional Credits and Payments

OMB No. 1545-0074

2023

Attachment
Sequence No. **03**

Department of the Treasury
Internal Revenue Service

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

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

Your social security number

JOEL E. JACOB

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required		1	17.
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	
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	17.

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

Schedule 3 (Form 1040) 2023

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	1,600,000.
11	Excess social security and tier 1 RRTA tax withheld		11	
12	Credit for federal tax on fuels. Attach Form 4136		12	
13	Other payments or refundable credits:			
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	1,600,000.

Schedule 3 (Form 1040) 2023

SCHEDULE A
(Form 1040)

Itemized Deductions

OMB No. 1545-0074

2023

Attachment
Sequence No. **07**

Department of the Treasury
Internal Revenue Service

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.

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

Your social security number

JOEL E. JACOB

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	
	3	Multiply line 2 by 7.5% (0.075)	3	
	4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4	
Taxes You Paid	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"/> SEE STATEMENT 8		5a	93,359.
	b State and local real estate taxes (see instructions) SEE STATEMENT 11		5b	35,441.
	c State and local personal property taxes		5c	
	d Add lines 5a through 5c		5d	128,800.
	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	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 SEE STATEMENT 10		8a	8,809.
	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	8,809.
	9	Investment interest. Attach Form 4952 if required. See instructions	9	
	10	Add lines 8e and 9	10	8,809.
Gifts to Charity	11 Gifts by cash or check. If you made any gift of \$250 or more, see instructions		11	498,716. STMT 9
	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	33,100.
	13 Carryover from prior year		13	
	14 Add lines 11 through 13		14	531,816.
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	550,625.
	18	If you elect to itemize deductions even though they are less than your standard deduction, check this box <input type="checkbox"/>		

SCHEDULE B
(Form 1040)

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

Interest and Ordinary Dividends

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

OMB No. 1545-0074

2023

Attachment
Sequence No. **08**

Your social security number

JOEL E. JACOB

Part I

Interest

1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address: _____
COMERICA BANK
SCH E ENTITIES - BANK INTEREST
FROM K-1 - M. JACOB & SONS

Amount
84.
2,591.
1,813.

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

2 Add the amounts on line 1 **2** **4,488.**
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815 **3**
4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b **4** **4,488.**

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

Part II

Ordinary Dividends

5 List name of payer: _____
MERRILL LYNCH - [REDACTED]
PERSHING - [REDACTED]

Amount
2,104.
1,936.

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

6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b **6** **4,040.**

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

Part III

Foreign Accounts and Trusts

Caution: If required, failure to file FinCEN Form 114 may result in substantial penalties. Additionally, you may be required to file Form 8938, Statement of Specified Foreign Financial Assets. See Instr. 327501 11-03-23

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.		Yes	No
7a At any time during 2023, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions. If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements			X
b If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the financial account(s) is (are) located			
8 During 2023, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions			X

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

Schedule B (Form 1040) 2023

SCHEDULE D
(Form 1040)

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

Attach to Form 1040, 1040-SR, or 1040-NR.
Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.
Go to www.irs.gov/ScheduleD for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. 12

Name(s) shown on return

Your social security number

JOEL E. JACOB

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked				
2	Totals for all transactions reported on Form(s) 8949 with Box B checked				
3	Totals for all transactions reported on Form(s) 8949 with Box C checked				
4	Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824				4
5	Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				5
6	Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions				6 ()
7	Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2				7

Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked				
9	Totals for all transactions reported on Form(s) 8949 with Box E checked				
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	35,000.	27,887.		7,113.
11	Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11
12	Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13	Capital gain distributions. See the instructions		STMT 12		13 11,589.
14	Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 ()
15	Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on page 2				15 18,702.

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

Schedule D (Form 1040) 2023

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	18,702.
<ul style="list-style-type: none"> If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22. If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 		
17 Are lines 15 and 16 both gains? <input checked="" type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.		
18 If you are required to complete the 28% Rate Gain Worksheet(see instructions), enter the amount, if any, from line 7 of that worksheet	18	
19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19	
20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? <input checked="" type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. <input type="checkbox"/> No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: <ul style="list-style-type: none"> The loss on line 16; or (\$3,000), or if married filing separately, (\$1,500) <p>Note: When figuring which amount is smaller, treat both amounts as positive numbers.</p>	21	()
22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? <input type="checkbox"/> Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. <input type="checkbox"/> No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

JOEL E. JACOB

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

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

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

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

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

Table with 7 main columns: (a) Description of property, (b) Date acquired, (c) Date sold or disposed of, (d) Proceeds (sales price), (e) Cost or other basis, (f) Adjustment codes, (g) Amount of adjustment, (h) Gain or (loss). Includes entry for DRIVE CHARLEVOIX with proceeds of 35,000 and gain of 7,113.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked)

35,000. 27,887. 7,113.

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

SCHEDULE E
(Form 1040)

Supplemental Income and Loss

OMB No. 1545-0074

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

2023

Department of the Treasury
Internal Revenue Service

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

Attachment
Sequence No 13

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

Name(s) shown on return

Your social security number

JOEL E. JACOB

Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

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

1a Physical address of each property (street, city, state, ZIP code)
 A [REDACTED], CANTON [REDACTED]
 B CHARLEVOIX, MI
 C CHARLEVOIX, MI

1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
			A	B	C
A	4		365		<input type="checkbox"/>
B	1		365		<input type="checkbox"/>
C	5		365		<input type="checkbox"/>

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

Income:	Properties		
	A	B	C
3 Rents received	897,547.	364,159.	65,568.
4 Royalties received			
Expenses:			
5 Advertising			
6 Auto and travel (see instructions)	1,686.	3,199.	
7 Cleaning and maintenance			
8 Commissions			
9 Insurance	14,324.	26,925.	420.
10 Legal and other professional fees			
11 Management fees			
12 Mortgage interest paid to banks, etc. (see instructions)	228,048.	56,775.	14,849.
13 Other interest			
14 Repairs		87,843.	
15 Supplies			
16 Taxes	102,790.	50,203.	6,959.
17 Utilities	44,733.	8,741.	
18 Depreciation expense or depletion	81,023.	112,225.	
19 Other (list) STMT 13 STMT 14 STMT 15	20,403.	2,941.	1,147.
20 Total expenses. Add lines 5 through 19	493,007.	348,852.	23,375.
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	404,540.	15,307.	42,193.
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)			

23a Total of all amounts reported on line 3 for all rental properties	23a	
b Total of all amounts reported on line 4 for all royalty properties	23b	
c Total of all amounts reported on line 12 for all properties	23c	
d Total of all amounts reported on line 18 for all properties	23d	
e Total of all amounts reported on line 20 for all properties	23e	

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

SCHEDULE E
(Form 1040)

Supplemental Income and Loss

OMB No. 1545-0074

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

2023

Attachment
Sequence No. 13

Department of the Treasury
Internal Revenue Service

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

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

Name(s) shown on return

Your social security number

JOEL E. JACOB

Part I Income or Loss From Rental Real Estate and Royalties Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

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

1a Physical address of each property (street, city, state, ZIP code)
 A CHARLEVOIX, MI
 B [REDACTED], CHARLEVOIX, MI
 C CHARTER AIRLINE

1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	5		365		<input type="checkbox"/>
B	4		365		<input type="checkbox"/>
C	8		365		<input type="checkbox"/>

Type of Property:

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

Income:	Properties		
	A	B	C
3 Rents received	194,118.	70,934.	1,442,161.
4 Royalties received			
Expenses:			
5 Advertising			11,454.
6 Auto and travel (see instructions)	1,422.		
7 Cleaning and maintenance			4,675.
8 Commissions			
9 Insurance	3,018.	2,659.	43,255.
10 Legal and other professional fees	69.		
11 Management fees			
12 Mortgage interest paid to banks, etc. (see instructions)	29,665.	16,876.	
13 Other interest			36,097.
14 Repairs	64,134.		151,653.
15 Supplies			
16 Taxes	2,371.	5,452.	49.
17 Utilities	835.	5,184.	
18 Depreciation expense or depletion	6,410.	7,991.	455,740.
19 Other (list) STMT 16 STMT 17 STMT 18	2,920.	2,940.	723,672.
20 Total expenses. Add lines 5 through 19	110,844.	41,102.	1,426,595.
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	83,274.	29,832.	15,566.
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)			
23a Total of all amounts reported on line 3 for all rental properties	23a	3,034,487.	
b Total of all amounts reported on line 4 for all royalty properties	23b		
c Total of all amounts reported on line 12 for all properties	23c	346,213.	
d Total of all amounts reported on line 18 for all properties	23d	663,389.	
e Total of all amounts reported on line 20 for all properties	23e	2,443,775.	
24 Income. Add positive amounts shown on line 21. Do not include any losses	24	590,712.	
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25		
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	26	590,712.	

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2023

LHA 321491 11-07-23

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

JOEL E. JACOB

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations

Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you must check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (f) on line 28 and attach Form 6198. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section Yes No

Table with 6 columns: (a) Name, (b) Enter P for partnership, S for S corporation, (c) Check if foreign partnership, (d) Employer identification number, (e) Check if basis computation is required, (f) Check if any amount is not at risk. Rows include M. JACOB & SONS and THE BOTTLE CREW, L.L.C.

Summary table for Part II with columns: (g) Passive loss allowed, (h) Passive income from Schedule K-1, (i) Nonpassive loss allowed, (j) Section 179 expense deduction, (k) Nonpassive income from Schedule K-1. Includes totals for 29a, 29b, 30, 31, and 32.

Part III Income or Loss From Estates and Trusts

Table with 2 columns: (a) Name, (b) Employer identification number. Rows A and B.

Summary table for Part III with columns: (c) Passive deduction or loss allowed, (d) Passive income from Schedule K-1, (e) Deduction or loss from Schedule K-1, (f) Other income from Schedule K-1. Includes totals for 34a, 34b, 35, 36, and 37.

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

Table with 5 columns: (a) Name, (b) Employer identification number, (c) Excess inclusion from Schedules Q, line 2c, (d) Taxable income (net loss) from Schedules Q, line 1b, (e) Income from Schedules Q, line 3b. Row 38.

39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below

Part V Summary

Summary table for Part V with 2 columns: Description, Amount. Rows 40-43.

SCHEDULE E
INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2023

Name **JOEL E. JACOB**
Passthrough M. JACOB & SONS - M. JACOB & SONS
S CORPORATION

ID [REDACTED]

SSN/EIN [REDACTED]
 TAXPAYER

OTHER PASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
SCHEDULE E, PAGE 2								
Ordinary business income (loss)	222,756.							
Rental real estate income (loss)								
Other net rental income (loss)								
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments								
Section 179 and carryover								
Disallowed section 179 expense								
Excess farm loss								
Net income (loss)	222,756.							222,756.
First passive other								
Second passive other								
Cost depletion								
Percentage depletion								
Depletion carryover								
Disallowed due to 65% limitation								
Unreimbursed expenses (nonpassive)								
Nonpassive other								
Total Schedule E (page 2)	222,756.							222,756.
FORM 4797								
Section 1231 gain (loss)								
Section 179 recapture on disposition								
SCHEDULE D								
Net short-term cap. gain (loss)								
Net long-term cap. gain (loss)								
Section 1256 contracts & straddles								
FORM 4952								
Investment interest expense - Sch. A								
Other net investment income								
ITEMIZED DEDUCTIONS								
Charitable contributions	3,876.							3,876.
Deductions related to portfolio income								
Other	5,411.							5,411.

SCHEDULE E
INCOME FROM PASSTHROUGH STATEMENT, PAGE 2

2023

Name JOEL E. JACOB
 Passthrough M. JACOB & SONS - M. JACOB & SONS
 S CORPORATION

ID

TAXPAYER

SSN/EIN

OTHER PASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
INTEREST AND DIVIDENDS								
Interest income	1,813.							1,813.
Interest from U.S. bonds								
Ordinary dividends								
Qualified dividends								
Tax-exempt interest income								
FORM 6251								
Depreciation adjustment after 12/31/86								-20.
Adjusted gain or loss								
Beneficiary's AMT adjustment								
Depletion (other than oil)								
Other								
MISCELLANEOUS								
Self-employment earnings (loss)/Wages								
Gross farming & fishing inc								
Royalties								
Royalty expenses/depletion								
Undistributed capital gains credit								
Backup withholding								
Credit for estimated tax								
Cancellation of debt								
Medical insurance - 1040								
Dependent care benefits								
Retirement plans								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL								
Other taxes/recapture of credits								
Credits								
Casualty and theft loss								
FORM 8985								
Qualified business income								
Qualified service income								
Section 199A W-2 wages	224,464.							224,464.
Section 199A unadjusted basis	143,871.							143,871.

INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2023

SCHEDULE E

Name JOEL E. JACOB
 Passthrough THE BOTTLE CREW, L.L.C.
 S CORPORATION

ID

SSN/EIN

TAXPAYER

	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
NONPASSIVE								
SCHEDULE E, PAGE 2								
Ordinary business income (loss)	5,612,918.							
Rental real estate income (loss)								
Other net rental income (loss)								
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments								
Section 179 and carryover	28,096.							
Disallowed section 179 expense								
Excess farm loss								
Net income (loss)	5,584,822.							5,584,822.
First passive other								
Second passive other								
Cost depletion								
Percentage depletion								
Depletion carryover								
Disallowed due to 65% limitation								
Unreimbursed expenses (nonpassive)								
Nonpassive other								
Total Schedule E (page 2)	5,584,822.							5,584,822.
FORM 4797								
Section 1231 gain (loss)								
Section 179 recapture on disposition								
SCHEDULE D								
Net short-term cap. gain (loss)								
Net long-term cap. gain (loss)								
Section 1256 contracts & straddles								
FORM 4952								
Investment interest expense - Sch. A								
Other net investment income								
ITEMIZED DEDUCTIONS								
Charitable contributions								
Deductions related to portfolio income								
Other	16,343.							16,343.

SCHEDULE E
Name JOEL E. JACOB
Passthrough THE BOTTLE CREW, L.L.C.
S CORPORATION

INCOME FROM PASSTHROUGH STATEMENT, PAGE 2

ID [REDACTED]

SSN/EIN [REDACTED]
TAXPAYER

2023

	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
INTEREST AND DIVIDENDS								
Interest income								
Interest from U.S. bonds								
Ordinary dividends								
Qualified dividends								
Tax-exempt interest income								
FORM 6251								
Depreciation adjustment after 12/31/86								
Adjusted gain or loss								
Beneficiary's AMT adjustment								
Depletion (other than oil)								
Other								
MISCELLANEOUS								
Self-employment earnings (loss)/Wages	331,390.							331,390.
Gross farming & fishing inc								
Royalties								
Royalty expenses/depletion								
Undistributed capital gains credit								
Backup withholding								
Credit for estimated tax								
Cancellation of debt								
Medical insurance - 1040	21,310.							21,310.
Dependent care benefits								
Retirement plans								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL								
Other taxes/recapture of credits								
Credits								
Casualty and theft loss								
FORM 8995								
Qualified business income								
Qualified service income	2,487,482.							2,487,482.
Section 199A W-2 wages								
Section 199A unadjusted basis	1,701,419.							1,701,419.

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

Department of the Treasury
Internal Revenue Service

Attach to your tax return.
Go to www.irs.gov/Form4797 for instructions and the latest information.

Name(s) shown on return

Identifying number

JOEL E. JACOB

~~79-58-7105~~

1a Enter the gross proceeds from sales or exchanges reported to you for 2023 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20	1a	
b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets	1b	
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets	1c	

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)

3 Gain, if any, from Form 4684, line 39	3	
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37	4	
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5	
6 Gain, if any, from line 32, from other than casualty or theft	6	
7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows	7	

Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.

Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.

8 Nonrecaptured net section 1231 losses from prior years. See instructions STATEMENT 19	8	
9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions	9	

Part II Ordinary Gains and Losses (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):		

11 Loss, if any, from line 7	11	()
12 Gain, if any, from line 7 or amount from line 8, if applicable	12	
13 Gain, if any, from line 31	13	9,000.
14 Net gain or (loss) from Form 4684, lines 31 and 38a	14	
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17 Combine lines 10 through 16	17	9,000.

18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.

a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions	18a	
b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4	18b	9,000.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A TRAILER - CREW HOUSE	08/01/21	05/10/23
B		
C		
D		

These columns relate to the properties on lines 19A through 19D.		Property A	Property B	Property C	Property D
20 Gross sales price (Note: See line 1a before completing.)	20	9,000.			
21 Cost or other basis plus expense of sale	21	9,495.			
22 Depreciation (or depletion) allowed or allowable	22	9,495.			
23 Adjusted basis. Subtract line 22 from line 21	23				
24 Total gain. Subtract line 23 from line 20	24	9,000.			
25 If section 1245 property:					
a Depreciation allowed or allowable from line 22	25a	9,495.			
b Enter the smaller of line 24 or 25a	25b	9,000.			
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.					
a Additional depreciation after 1975. See instructions	26a				
b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b				
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c				
d Additional depreciation after 1969 and before 1976	26d				
e Enter the smaller of line 26c or 26d	26e				
f Section 291 amount (corporations only)	26f				
g Add lines 26b, 26e, and 26f	26g				
27 If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.					
a Soil, water, and land clearing expenses	27a				
b Line 27a multiplied by applicable percentage	27b				
c Enter the smaller of line 24 or 27b	27c				
28 If section 1254 property:					
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a				
b Enter the smaller of line 24 or 28a	28b				
29 If section 1255 property:					
a Applicable percentage of payments excluded from income under section 126. See instructions	29a				
b Enter the smaller of line 24 or 29a. See instructions	29b				

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties. Add property columns A through D, line 24	30	9,000.
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	9,000.
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33	
34 Recomputed depreciation. See instructions	34	
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

Qualified Business Income Deduction

2023

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

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

Attachment
Sequence No. **55A**

Name(s) shown on return

Your taxpayer identification number

JOEL E. JACOB

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

Use this form if your taxable income, before your qualified business income deduction, is above \$182,100 (\$364,200 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

Part I Trade, Business, or Aggregation Information

Complete Schedules A, B, and/or C (Form 8995-A), as applicable, before starting Part I. Attach additional worksheets when needed. See instructions.

1	(a) Trade, business, or aggregation name	(b) Check if specified service	(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if patron
A	M. JACOB & SONS	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]	<input type="checkbox"/>
B	THE BOTTLE CREW, L.L.C.	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]	<input type="checkbox"/>
C	CREW HOUSE LLC - COMMERCIAL REAL ESTATE - 605	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]	<input type="checkbox"/>

Part II Determine Your Adjusted Qualified Business Income

	A	B	C
2 Qualified business income from the trade, business, or aggregation. See instructions	222,756.	5,584,822.	413,540.
3 Multiply line 2 by 20% (0.20). If your taxable income is \$182,100 or less (\$364,200 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13	44,551.	1,116,964.	82,708.
4 Allocable share of W-2 wages from the trade, business, or aggregation	224,464.	2,487,482.	
5 Multiply line 4 by 50% (0.50)	112,232.	1,243,741.	
6 Multiply line 4 by 25% (0.25)	56,116.	621,871.	
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property	143,871.	1,701,419.	3,076,879.
8 Multiply line 7 by 2.5% (0.025)	3,597.	42,535.	76,922.
9 Add lines 6 and 8	59,713.	664,406.	76,922.
10 Enter the greater of line 5 or line 9	112,232.	1,243,741.	76,922.
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10	44,551.	1,116,964.	76,922.
12 Phased-in reduction. Enter the amount from line 26, if any			
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	44,551.	1,116,964.	76,922.
14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any. See instructions			
15 Qualified business income component. Subtract line 14 from line 13	44,551.	1,116,964.	76,922.
16 Total qualified business income component. Add all amounts reported on line 15	1,256,827.		

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form **8995-A** (2023)

Part III Phased-in Reduction

Complete Part III only if your taxable income is more than \$182,100 but not \$232,100 (\$364,200 and \$464,200 if married filing jointly) and line 10 is less than line 3. Otherwise, skip Part III.

		A	B	C
17	Enter the amounts from line 3	17		
18	Enter the amounts from line 10	18		
19	Subtract line 18 from line 17	19		
20	Taxable income before qualified business income deduction	20		
21	Threshold. Enter \$182,100 (\$364,200 if married filing jointly)	21		
22	Subtract line 21 from line 20	22		
23	Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	23		
24	Phase-in percentage. Divide line 22 by line 23	24	%	
25	Total phase-in reduction. Multiply line 19 by line 24	25		
26	Qualified business income after phase-in reduction. Subtract line 25 from line 17. Enter this amount here and on line 12, for the corresponding trade or business	26		

Part IV Determine Your Qualified Business Income Deduction

27	Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16	27	1,256,827.	
28	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions	28		
29	Qualified REIT dividends and PTP (loss) carryforward from prior years	29	()	
30	Total qualified REIT dividends and PTP income. Combine lines 28 and 29. If less than zero, enter -0-	30		
31	REIT and PTP component. Multiply line 30 by 20% (0.20)	31		
32	Qualified business income deduction before the income limitation. Add lines 27 and 31	32	1,256,827.	
33	Taxable income before qualified business income deduction	33	6,193,975.	
34	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	34	22,742.	
35	Subtract line 34 from line 33. If zero or less, enter -0-	35	6,171,233.	
36	Income limitation. Multiply line 35 by 20% (0.20)	36	1,234,247.	
37	Qualified business income deduction before the domestic production activities deduction (DPAD) under section 199A(g). Enter the smaller of line 32 or line 36	37	1,234,247.	
38	DPAD under section 199A(g) allocated from an agricultural or horticultural cooperative. Don't enter more than line 33 minus line 37	38		
39	Total qualified business income deduction. Add lines 37 and 38	39	1,234,247.	
40	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-	40	()	

Qualified Business Income Deduction

Department of the Treasury
Internal Revenue Service

Attach to your tax return.
Go to www.irs.gov/Form8995A for instructions and the latest information.

Name(s) shown on return

Your taxpayer identification number

JOEL E. JACOB

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

Use this form if your taxable income, before your qualified business income deduction, is above \$182,100 (\$364,200 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

Part I Trade, Business, or Aggregation Information

Complete Schedules A, B, and/or C (Form 8995-A), as applicable, before starting Part I. Attach additional worksheets when needed. See instructions.

1	(a) Trade, business, or aggregation name	(b) Check if specified service	(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if patron
A	B1 LOG CABIN LLC - RESIDENTIAL RENTAL - CHARL	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]	<input type="checkbox"/>
B	G7 LLC - LAND RENTAL - CHARLEVOIX, MI	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]	<input type="checkbox"/>
C	7 CREW LLC - FARM LAND RENTAL - CHARLEVOIX, M	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]	<input type="checkbox"/>

Part II Determine Your Adjusted Qualified Business Income

	A	B	C
2 Qualified business income from the trade, business, or aggregation. See instructions	15,307.	42,193.	83,274.
3 Multiply line 2 by 20% (0.20). If your taxable income is \$182,100 or less (\$364,200 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13	3,061.	8,439.	16,655.
4 Allocable share of W-2 wages from the trade, business, or aggregation			
5 Multiply line 4 by 50% (0.50)			
6 Multiply line 4 by 25% (0.25)			
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property	1,652,500.		250,000.
8 Multiply line 7 by 2.5% (0.025)	41,313.		6,250.
9 Add lines 6 and 8	41,313.		6,250.
10 Enter the greater of line 5 or line 9	41,313.		6,250.
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10	3,061.		6,250.
12 Phased-in reduction. Enter the amount from line 26, if any			
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	3,061.	0.	6,250.
14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any. See instructions			
15 Qualified business income component. Subtract line 14 from line 13	3,061.	0.	6,250.
16 Total qualified business income component. Add all amounts reported on line 15			

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form **8995-A** (2023)

Part III Phased-in Reduction

Complete Part III only if your taxable income is more than \$182,100 but not \$232,100 (\$364,200 and \$464,200 if married filing jointly) and line 10 is less than line 3. Otherwise, skip Part III.

		A	B	C
17	Enter the amounts from line 3	17		
18	Enter the amounts from line 10	18		
19	Subtract line 18 from line 17	19		
20	Taxable income before qualified business income deduction	20		
21	Threshold. Enter \$182,100 (\$364,200 if married filing jointly)	21		
22	Subtract line 21 from line 20	22		
23	Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	23		
24	Phase-in percentage. Divide line 22 by line 23	24	%	
25	Total phase-in reduction. Multiply line 19 by line 24	25		
26	Qualified business income after phase-in reduction. Subtract line 25 from line 17. Enter this amount here and on line 12, for the corresponding trade or business	26		

Part IV Determine Your Qualified Business Income Deduction

27	Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16	27		
28	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions	28		
29	Qualified REIT dividends and PTP (loss) carryforward from prior years	29	()	
30	Total qualified REIT dividends and PTP income. Combine lines 28 and 29. If less than zero, enter -0-	30		
31	REIT and PTP component. Multiply line 30 by 20% (0.20)	31		
32	Qualified business income deduction before the income limitation. Add lines 27 and 31	32		
33	Taxable income before qualified business income deduction	33		
34	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	34		
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		
36	Income limitation. Multiply line 35 by 20% (0.20)	36		
37	Qualified business income deduction before the domestic production activities deduction (DPAD) under section 199A(g). Enter the smaller of line 32 or line 36	37		
38	DPAD under section 199A(g) allocated from an agricultural or horticultural cooperative. Don't enter more than line 33 minus line 37	38		
39	Total qualified business income deduction. Add lines 37 and 38	39		
40	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-	40	()	

Qualified Business Income Deduction

2023

Attachment Sequence No. **55A**

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

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

Name(s) shown on return

Your taxpayer identification number

JOEL E. JACOB

[REDACTED]

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

Use this form if your taxable income, before your qualified business income deduction, is above \$182,100 (\$364,200 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

Part I Trade, Business, or Aggregation Information

Complete Schedules A, B, and/or C (Form 8995-A), as applicable, before starting Part I. Attach additional worksheets when needed. See instructions.

1	(a) Trade, business, or aggregation name	(b) Check if specified service	(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if patron
A	LARS PCH LLC - COMMERCIAL RENTAL - ANCE ROAD,	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]	<input type="checkbox"/>
B	ALFIN AIR LLC - CHARTER AIRLINE	<input type="checkbox"/>	<input type="checkbox"/>	[REDACTED]	<input type="checkbox"/>
C		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

Part II Determine Your Adjusted Qualified Business Income

	A	B	C
2 Qualified business income from the trade, business, or aggregation. See instructions	29,832.	15,566.	
3 Multiply line 2 by 20% (0.20). If your taxable income is \$182,100 or less (\$364,200 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13	5,966.	3,113.	
4 Allocable share of W-2 wages from the trade, business, or aggregation			
5 Multiply line 4 by 50% (0.50)			
6 Multiply line 4 by 25% (0.25)			
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property	311,667.	1,860,938.	
8 Multiply line 7 by 2.5% (0.025)	7,792.	46,523.	
9 Add lines 6 and 8	7,792.	46,523.	
10 Enter the greater of line 5 or line 9	7,792.	46,523.	
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10	5,966.	3,113.	
12 Phased-in reduction. Enter the amount from line 26, if any			
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	5,966.	3,113.	
14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any. See instructions			
15 Qualified business income component. Subtract line 14 from line 13	5,966.	3,113.	
16 Total qualified business income component. Add all amounts reported on line 15			

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form 8995-A (2023)

Part III Phased-in Reduction

Complete Part III only if your taxable income is more than \$182,100 but not \$232,100 (\$364,200 and \$464,200 if married filing jointly) and line 10 is less than line 3. Otherwise, skip Part III.

		A	B	C
17	Enter the amounts from line 3	17		
18	Enter the amounts from line 10	18		
19	Subtract line 18 from line 17	19		
20	Taxable income before qualified business income deduction	20		
21	Threshold. Enter \$182,100 (\$364,200 if married filing jointly)	21		
22	Subtract line 21 from line 20	22		
23	Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	23		
24	Phase-in percentage. Divide line 22 by line 23	24	%	
25	Total phase-in reduction. Multiply line 19 by line 24	25		
26	Qualified business income after phase-in reduction. Subtract line 25 from line 17. Enter this amount here and on line 12, for the corresponding trade or business	26		

Part IV Determine Your Qualified Business Income Deduction

27	Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16	27		
28	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions	28		
29	Qualified REIT dividends and PTP (loss) carryforward from prior years	29	()	
30	Total qualified REIT dividends and PTP income. Combine lines 28 and 29. If less than zero, enter -0-	30		
31	REIT and PTP component. Multiply line 30 by 20% (0.20)	31		
32	Qualified business income deduction before the income limitation. Add lines 27 and 31	32		
33	Taxable income before qualified business income deduction	33		
34	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	34		
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		
36	Income limitation. Multiply line 35 by 20% (0.20)	36		
37	Qualified business income deduction before the domestic production activities deduction (DPAD) under section 199A(g). Enter the smaller of line 32 or line 36	37		
38	DPAD under section 199A(g) allocated from an agricultural or horticultural cooperative. Don't enter more than line 33 minus line 37	38		
39	Total qualified business income deduction. Add lines 37 and 38	39		
40	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-	40	()	

Additional Medicare Tax

2023

Department of the Treasury
Internal Revenue Service

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.

Attachment
Sequence No. 71

Name(s) shown on return
JOEL E. JACOB

Your social security number
[REDACTED]

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	331,390.	
2 Unreported tips from Form 4137, line 6	2		
3 Wages from Form 8919, line 6	3		
4 Add lines 1 through 3	4	331,390.	
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	200,000.	
6 Subtract line 5 from line 4. If zero or less, enter -0-	6		131,390.
7 Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II	7		1,183.

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		1,183.
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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	5,988.	
20 Enter the amount from line 1	20	331,390.	
21 Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	4,805.	
22 Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages	22		1,183.
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		1,183.

Net Investment Income Tax - Individuals, Estates, and Trusts

2023

Attachment
Sequence No. 72

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

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

Name(s) shown on your tax return

JOEL E. JACOB

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	4,488.
2 Ordinary dividends (see instructions)		2	4,040.
3 Annuities (see instructions)		3	
4a Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a	6,398,290.	
b Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions) STATEMENT 21	4b	-5,989,362.	
c Combine lines 4a and 4b		4c	408,928.
5a Net gain or loss from disposition of property (see instructions)	5a	27,702.	
b Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b	-9,000.	
c Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c		
d Combine lines 5a through 5c		5d	18,702.
6 Adjustments to investment income for certain CFCs and PFICs (see instructions)		6	
7 Other modifications to investment income (see instructions) SEE STATEMENT 22		7	1,988.
8 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7		8	438,146.

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	4,900.	
c Miscellaneous investment expenses (see instructions)	9c		
d Add lines 9a, 9b, and 9c		9d	4,900.
10 Additional modifications (see instructions)		10	
11 Total deductions and modifications. Add lines 9d and 10		11	4,900.

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	433,246.
Individuals:			
13 Modified adjusted gross income (see instructions)	13	6,744,600.	
14 Threshold based on filing status (see instructions)	14	200,000.	
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	6,544,600.	
16 Enter the smaller of line 12 or line 15		16	433,246.
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	16,463.
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	

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

Lines 5a-5d - Net Gains and Losses Worksheet

Keep for Your Records

	(A) Capital gains/(losses) Form 1040, Line 7, or Form 1041, Line 4	(B) Ordinary gains/(losses) Sch. 1 (1040), Line 4, or Form 1041, Line 7	Total of columns (A) + (B)
1. Beginning Net Gains and Losses	18,702.	9,000.	Enter this amount on line 5a 27,702.
2. Gains and Losses excluded from Net Investment Income, use current year amounts for lines 2a-2g and 2l.			
(a) Enter net gains from the disposition of property used in a non-section 1411 trade or business (enter as negative amounts): Name of Trade or Business Amount TRAILER - CREW () HOUSE (9,000.)	()	(9,000.)	
(b) Enter net losses from the disposition of property used in a non-section 1411 trade or business (enter as positive amounts): Name of Trade or Business Amount _____	_____	_____	
(c) Enter net losses from a former passive activity (FPA) allowed by reason of section 469(f)(1)(A) _____	_____	_____	
(d) Gains recognized in the current year for payments received on an installment sale obligation or private annuity for the disposition of property used in a non-section 1411 trade or business _____	()	_____	
(e) Enter the net gain attributable to the net unrealized appreciation (NUA) in employer securities _____	()	_____	
(f) In the case of a QEF (other than a QEF held in a section 1411 trade or business) with respect to which a section 1.1411-10(g) election is not in effect, enter the amount treated as long-term capital gain for regular income tax purposes under section 1293(a)(1)(B) _____	()	_____	
(g) Enter any other gains and losses included in net investment income that are not otherwise reported on Form 8960 and any other gains and losses excluded from net investment income reported on line 5a (enter excluded gains as a negative number and excluded losses as a positive number) _____	_____	_____	
(h) Enter the amount reported on line 2(i) of this worksheet from your prior tax year return calculations. Enter as a positive no. _____	_____	_____	
(i) If you do not have a capital loss carryover to next year, then skip this line and go to line 2(j). Otherwise, enter the lesser of (i)(1) or (i)(2) as a negative number _____ (i)(1) If the sum of the amounts reported on lines 2(a)-2(h) and line 3(d), column (A), is greater than zero, enter that amount here. Otherwise, enter -0- on line 2(i) and go to line 2(j) _____ OR (i)(2) The amount of capital loss carried over to next year (Schedule D (Form 1040), line 16, less the amount allowed as a current deduction on Schedule D (Form 1040), line 21) entered as a positive number _____	()	_____	
(j) Sum of lines 2(a)-2(i) _____	_____	-9,000.	Enter this amount on line 5b -9,000.
3. Adjustment for Gains and Losses attributable to the disposition of interests in partnerships and S corporations ...			Enter this amount on line 5c _____
Add lines 1, 2(j) and 3 _____	18,702.	0.	Enter this amount on line 5d 18,702.

323267 09-21-23

Line 7 - Deduction Recoveries Worksheet

CALIFORNIA

1. Enter total amount of recovery included in gross income	1.	<u>0.</u>	
<ul style="list-style-type: none"> • Don't include recoveries of items that are included in net investment income in the year of recovery (included on lines 1-6). • Don't include recoveries of items if the amount relates to a deduction taken in a tax year beginning before 2013. • Don't include recoveries of items if the amount relates to a deduction taken in a tax year beginning after 2012, and you weren't subject to the NIIT solely because your MAGI was below the applicable threshold. 			
<div style="border: 1px solid black; padding: 2px; display: inline-block;">CAUTION</div> <i>This rule doesn't apply if you incurred an NOL in such year, and a portion of such NOL constitutes a section 1411 NOL.</i>			
2. Amount of the recovery that would've been included in gross income, except for the application of the tax benefit rule under section 111	2.	<u>6,901.</u>	
3. Total amount of recovery (add lines 1 and 2)	3.	<u>6,901.</u>	
4. Enter the percentage of the deduction allocated to net investment income in the prior year. (If the deduction wasn't allocated between investment income and noninvestment income, enter 100%.)	4.	<u>.024269997</u>	
5. Enter the lesser of (a) line 3 multiplied by line 4, or (b) the total amount deducted on the prior year Form 8960 attributable to items recovered (after any deduction limitations imposed by section 67 or 68)	5.	<u>167.</u>	

Calculation of recoveries when the deduction isn't taken into account in computing your section 1411 NOL

6. Multiply line 5 by 3.8% (0.038)	6.	<u>6.</u>	
7. Enter the amount of net investment income in the year of the deduction (previous year's Form 8960, line 12, unless line 12 is zero, then previous year's Form 8960, line 8 minus line 11)	7.	<u>622,549.</u>	
8. Add the amount on line 5 to line 7	8.	<u>622,716.</u>	
9. Using the previous year's Form 8960, recalculate the NIIT for the year of the deduction by replacing the amount reported on line 12 with the amount reported on line 8 of this worksheet (don't use the net investment income reported on that year's Form 8960, line 12). Enter your recalculated NIIT here	9.	<u>23,663.</u>	
10. Enter the NIIT reported for the year of the deduction	10.	<u>23,657.</u>	
11. Subtract line 10 from line 9	11.	<u>6.</u>	
12. Enter the smaller of line 6 or line 11	12.	<u>6.</u>	
13. Divide line 12 by 3.8% (0.038). Enter the result here and include on Form 8960, line 7 AMOUNT FULLY TAXED. LINE 12 EQUALS LINE 6.	13.	<u>167.</u>	

Calculation of recoveries when the deduction is taken into account in computing your section 1411 NOL

14. Enter the amount of the section 1411 NOL in the year of the deduction (entered as a positive number)	14.	<u> </u>	
15. Enter the amount of the section 1411 NOL in the year of the deduction recomputed without the amount on line 5 (entered as a positive number, but not less than zero)	15.	<u> </u>	
16. Subtract line 15 from line 14. Enter the result here and include on Form 8960, line 7	16.	<u> </u>	

Line 7 - Deduction Recoveries Worksheet

MICHIGAN

1. Enter total amount of recovery included in gross income	1.	0.
<ul style="list-style-type: none"> • Don't include recoveries of items that are included in net investment income in the year of recovery (included on lines 1-6). • Don't include recoveries of items if the amount relates to a deduction taken in a tax year beginning before 2013. • Don't include recoveries of items if the amount relates to a deduction taken in a tax year beginning after 2012, and you weren't subject to the NIIT solely because your MAGI was below the applicable threshold. 		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">CAUTION</div> This rule doesn't apply if you incurred an NOL in such year, and a portion of such NOL constitutes a section 1411 NOL.		
2. Amount of the recovery that would've been included in gross income, except for the application of the tax benefit rule under section 111	2.	32,026.
3. Total amount of recovery (add lines 1 and 2)	3.	32,026.
4. Enter the percentage of the deduction allocated to net investment income in the prior year. (If the deduction wasn't allocated between investment income and noninvestment income, enter 100%.)	4.	.056864768
5. Enter the lesser of (a) line 3 multiplied by line 4, or (b) the total amount deducted on the prior year Form 8960 attributable to items recovered (after any deduction limitations imposed by section 67 or 68)	5.	1,821.

Calculation of recoveries when the deduction isn't taken into account in computing your section 1411 NOL

6. Multiply line 5 by 3.8% (0.038)	6.	69.
7. Enter the amount of net investment income in the year of the deduction (previous year's Form 8960, line 12, unless line 12 is zero, then previous year's Form 8960, line 8 minus line 11)	7.	622,549.
8. Add the amount on line 5 to line 7	8.	624,370.
9. Using the previous year's Form 8960, recalculate the NIIT for the year of the deduction by replacing the amount reported on line 12 with the amount reported on line 8 of this worksheet (don't use the net investment income reported on that year's Form 8960, line 12). Enter your recalculated NIIT here	9.	23,726.
10. Enter the NIIT reported for the year of the deduction	10.	23,657.
11. Subtract line 10 from line 9	11.	69.
12. Enter the smaller of line 6 or line 11	12.	69.
13. Divide line 12 by 3.8% (0.038). Enter the result here and include on Form 8960, line 7 AMOUNT FULLY TAXED. LINE 12 EQUALS LINE 6.	13.	1,821.

Calculation of recoveries when the deduction is taken into account in computing your section 1411 NOL

14. Enter the amount of the section 1411 NOL in the year of the deduction (entered as a positive number)	14.	
15. Enter the amount of the section 1411 NOL in the year of the deduction recomputed without the amount on line 5 (entered as a positive number, but not less than zero)	15.	
16. Subtract line 15 from line 14. Enter the result here and include on Form 8960, line 7	16.	

Lines 9 and 10 - Application of Itemized Deduction Limitations on Deductions Properly Allocable to Investment Income Worksheet

Keep for Your Records

Part III - Deductions Properly Allocable to Investment Income (Individuals Only)

1. Enter the amount of Miscellaneous Itemized Deductions properly allocable to investment income from column (C) of Part II:

Description	Line	Amount
(a) N/A	N/A	N/A
(b) N/A	N/A	N/A

2. Enter the amount of state, local, and foreign income taxes that are properly allocable to investment income (limited to \$10,000, \$5,000 if MFS) STMT 23 2. 4,900.

3. Enter the amounts of other Itemized Deductions properly allocable to investment income
(Description and Form 8960 line number where they'll be reported):

Description	Line	Amount
(a)		
(b)		

4. Enter the total deductions properly allocable to investment income. Enter the sum of lines 2 and 3 4. 4,900.

5. Enter the amount of total itemized deductions reported on Form 1040 5. 550,625.

6. Enter all other itemized deductions allowed but not subject to the section 68 deduction limitation:

(a) Investment Interest Expense	N/A	
(b) Casualty Losses (other than losses described in section 165(c)(1))	N/A	
(c) Medical Expenses	N/A	
(d) Gambling Losses	N/A	
(e) Total of lines 6(a) through 6(d)		6e. <u>N/A</u>

7. Subtract line 6e from line 5 7. 550,625.

8. Enter the lesser of line 7 or line 4 8. 4,900.

TIP This is the amount of itemized deductions that are properly allocable to investment income. Use Part IV of this worksheet to reconcile this amount to the individual deduction amounts reported on Form 8960, lines 9 and 10.

Part IV - Reconciliation of Schedule A Deductions to Form 8960, Lines 9 and 10 (Individuals Only)

(A)	(B)	(C)
Reenter the amounts and descriptions from Part III, lines 1 - 3.	IF Part III, line 8 is less than Part III, line 4, THEN divide line 8 by line 4 AND enter the amount in column (B). IF the amounts reported on Part III, lines 4 and 8 are equal, THEN enter 1.00 in column (B).	Multiply the individual amounts in column (A) by the amount in column (B). Enter these amounts in the appropriate location on lines 9 and 10.
Miscellaneous Itemized Deductions properly allocable to investment income:		
1. (a) N/A	N/A	N/A
(b) N/A	N/A	N/A
2. State, local, and foreign income taxes	4,900.	1.0000 = 4,900.
Itemized Deductions Included on Line 3 of Part III:		
3. (a)		
(b)		

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

2023

CALIFORNIA

Name(s) **JOEL E. JACOB** Your social security number or EIN XXXXXXXXXX

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

1	Taxable interest			1	
2	Ordinary dividends			2	
3	Annuities from nonqualified plans			3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc.	4a	798,541.	4c	5,887.
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business	4b	-792,654.		
c	Combine lines 4a and 4b				
5a	Net gain or loss from disposition of property	5a		5d	
b	Net gain or loss from disposition of property that is not subject to net investment income tax	5b			
c	Adjustment from disposition of partnership interest or S corporation stock	5c			
d	Combine lines 5a through 5c				
6	Changes in investment income for certain CFCs and PFICs			6	
7	Other modifications to investment income			7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			8	5,887.

Part II State Income Tax Pro-ration for 2023 Income Tax Payments

9	State total income	9	798,541.
10	State income tax payments for 2023	10	SEE STATEMENT 24 26,901.
11	2023 state income tax payments attributable to investment income, line 8 divided by line 9 times line 10	11	198.

Part III State Income Tax Pro-ration for 2022 Estimate Payments Made in 2023

12	State estimate payments for 2022	12	
13	Percent of state income taxes attributable to investment income for 2022	13	.024270
14	2022 state estimate payments attributable to investment income. Line 12 times line 13	14	

Part IV State Income Tax Pro-ration for Balance of Prior Years Tax Plus Extension Payments Paid in 2023

15	Balance of prior years tax plus extension payments paid in 2023	15	
16	Percent of state income taxes attributable to investment income for 2022	16	.024270
17	Balance of prior years tax and extension payments attributable to investment income. Line 15 times line 16	17	

Part V Reduction of State Tax Deduction

18	Reduction of state tax deduction	18	()
19	Percent of state income taxes attributable to investment income for 2022	19	
20	Reduction of state tax deduction attributable to investment income. Line 18 times line 19	20	()

Part VI Total State Income Tax Payments Attributable to Investment Income

21	Combine lines 11, 14, 17 and 20. Carry to Form 8960, Line 9 Worksheet, Part III, line 2	21	198.
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**Net Investment Income Tax -
Individuals, Estates, and Trusts**

2023

CONNECTICUT

Name(s) **JOEL E. JACOB** Your social security number or EIN XXXXXXXXXX

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

1 Taxable interest				32.
2 Ordinary dividends				
3 Annuities from nonqualified plans				
4a Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc.	4a	3,889.		
b Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business	4b			
c Combine lines 4a and 4b			4c	3,889.
5a Net gain or loss from disposition of property	5a			
b Net gain or loss from disposition of property that is not subject to net investment income tax	5b			
c Adjustment from disposition of partnership interest or S corporation stock	5c			
d Combine lines 5a through 5c			5d	
6 Changes in investment income for certain CFCs and PFICs			6	
7 Other modifications to investment income			7	
8 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			8	3,921.

Part II State Income Tax Pro-ration for 2023 Income Tax Payments

9 State total income				922.
10 State income tax payments for 2023		SEE STATEMENT 25	10	236.
11 2023 state income tax payments attributable to investment income, line 8 divided by line 9 times line 10			11	236.

Part III State Income Tax Pro-ration for 2022 Estimate Payments Made in 2023

12 State estimate payments for 2022				
13 Percent of state income taxes attributable to investment income for 2022			13	
14 2022 state estimate payments attributable to investment income. Line 12 times line 13			14	0.

Part IV State Income Tax Pro-ration for Balance of Prior Years Tax Plus Extension Payments Paid in 2023

15 Balance of prior years tax plus extension payments paid in 2023				
16 Percent of state income taxes attributable to investment income for 2022			16	
17 Balance of prior years tax and extension payments attributable to investment income. Line 15 times line 16			17	0.

Part V Reduction of State Tax Deduction

18 Reduction of state tax deduction				
19 Percent of state income taxes attributable to investment income for 2022			19	
20 Reduction of state tax deduction attributable to investment income. Line 18 times line 19			20	

Part VI Total State Income Tax Payments Attributable to Investment Income

21 Combine lines 11, 14, 17 and 20. Carry to Form 8960, Line 9 Worksheet, Part III, line 2				236.
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Form 8960 (2023)

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

2023

ILLINOIS

Name(s) **JOEL E. JACOB** Your social security number or EIN XXXXXXXXXX

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

1	Taxable interest		1	94.
2	Ordinary dividends		2	
3	Annuities from nonqualified plans		3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc.	181,510.	4c	11,541.
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business	-169,969.		
c	Combine lines 4a and 4b			
5a	Net gain or loss from disposition of property		5d	
b	Net gain or loss from disposition of property that is not subject to net investment income tax			
c	Adjustment from disposition of partnership interest or S corporation stock			
d	Combine lines 5a through 5c			
6	Changes in investment income for certain CFCs and PFICs		6	
7	Other modifications to investment income		7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7		8	11,635.

Part II State Income Tax Pro-ration for 2023 Income Tax Payments

9	State total income		9	181,533.
10	State income tax payments for 2023	SEE STATEMENT 26	10	8,986.
11	2023 state income tax payments attributable to investment income, line 8 divided by line 9 times line 10		11	576.

Part III State Income Tax Pro-ration for 2022 Estimate Payments Made in 2023

12	State estimate payments for 2022		12	
13	Percent of state income taxes attributable to investment income for 2022		13	.124951
14	2022 state estimate payments attributable to investment income. Line 12 times line 13		14	

Part IV State Income Tax Pro-ration for Balance of Prior Years Tax Plus Extension Payments Paid in 2023

15	Balance of prior years tax plus extension payments paid in 2023		15	
16	Percent of state income taxes attributable to investment income for 2022		16	.124951
17	Balance of prior years tax and extension payments attributable to investment income. Line 15 times line 16		17	

Part V Reduction of State Tax Deduction

18	Reduction of state tax deduction		18	()
19	Percent of state income taxes attributable to investment income for 2022		19	.124951
20	Reduction of state tax deduction attributable to investment income. Line 18 times line 19		20	()

Part VI Total State Income Tax Payments Attributable to Investment Income

21	Combine lines 11, 14, 17 and 20. Carry to Form 8960, Line 9 Worksheet, Part III, line 2		21	576.
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**Net Investment Income Tax -
Individuals, Estates, and Trusts**

2023

MICHIGAN

Name(s) **JOEL E. JACOB** Your social security number or EIN XXXXXXXXXX

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

1	Taxable interest		1	3,333.
2	Ordinary dividends		2	3,945.
3	Annuities from nonqualified plans		3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc.	4a	3,526,705.	
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business	4b	-3,275,194.	
c	Combine lines 4a and 4b	4c		251,511.
5a	Net gain or loss from disposition of property	5a	27,702.	
b	Net gain or loss from disposition of property that is not subject to net investment income tax	5b	-9,000.	
c	Adjustment from disposition of partnership interest or S corporation stock	5c		
d	Combine lines 5a through 5c	5d		18,702.
6	Changes in investment income for certain CFCs and PFICs	6		
7	Other modifications to investment income	7		
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7	8		277,491.

Part II State Income Tax Pro-ration for 2023 Income Tax Payments

9	State total income	9	4,038,429.
10	State income tax payments for 2023	10	44,704.
11	2023 state income tax payments attributable to investment income, line 8 divided by line 9 times line 10	11	3,072.

Part III State Income Tax Pro-ration for 2022 Estimate Payments Made in 2023

12	State estimate payments for 2022	12	
13	Percent of state income taxes attributable to investment income for 2022	13	.056865
14	2022 state estimate payments attributable to investment income. Line 12 times line 13	14	

Part IV State Income Tax Pro-ration for Balance of Prior Years Tax Plus Extension Payments Paid in 2023

15	Balance of prior years tax plus extension payments paid in 2023	15	
16	Percent of state income taxes attributable to investment income for 2022	16	.056865
17	Balance of prior years tax and extension payments attributable to investment income. Line 15 times line 16	17	

Part V Reduction of State Tax Deduction

18	Reduction of state tax deduction	18	()
19	Percent of state income taxes attributable to investment income for 2022	19	.056865
20	Reduction of state tax deduction attributable to investment income. Line 18 times line 19	20	()

Part VI Total State Income Tax Payments Attributable to Investment Income

21	Combine lines 11, 14, 17 and 20. Carry to Form 8960, Line 9 Worksheet, Part III, line 2	21	3,072.
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**Net Investment Income Tax -
Individuals, Estates, and Trusts**

2023

NEBRASKA

Name(s) **JOEL E. JACOB** Your social security number or EIN
[REDACTED]

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

1 Taxable interest				81.
2 Ordinary dividends				
3 Annuities from nonqualified plans				
4a Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc.	4a	9,929.		
b Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business	4b			
c Combine lines 4a and 4b			4c	9,929.
5a Net gain or loss from disposition of property	5a			
b Net gain or loss from disposition of property that is not subject to net investment income tax	5b			
c Adjustment from disposition of partnership interest or S corporation stock	5c			
d Combine lines 5a through 5c			5d	
6 Changes in investment income for certain CFCs and PFICs			6	
7 Other modifications to investment income			7	
8 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7			8	10,010.

Part II State Income Tax Pro-ration for 2023 Income Tax Payments

9 State total income				10,010.
10 State income tax payments for 2023		SEE STATEMENT 28	10	653.
11 2023 state income tax payments attributable to investment income, line 8 divided by line 9 times line 10			11	653.

Part III State Income Tax Pro-ration for 2022 Estimate Payments Made in 2023

12 State estimate payments for 2022				
13 Percent of state income taxes attributable to investment income for 2022			13	1.000000
14 2022 state estimate payments attributable to investment income. Line 12 times line 13			14	0.

Part IV State Income Tax Pro-ration for Balance of Prior Years Tax Plus Extension Payments Paid in 2023

15 Balance of prior years tax plus extension payments paid in 2023				
16 Percent of state income taxes attributable to investment income for 2022			16	1.000000
17 Balance of prior years tax and extension payments attributable to investment income. Line 15 times line 16			17	0.

Part V Reduction of State Tax Deduction

18 Reduction of state tax deduction				()
19 Percent of state income taxes attributable to investment income for 2022			19	1.000000
20 Reduction of state tax deduction attributable to investment income. Line 18 times line 19			20	(0)

Part VI Total State Income Tax Payments Attributable to Investment Income

21 Combine lines 11, 14, 17 and 20. Carry to Form 8960, Line 9 Worksheet, Part III, line 2				653.
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Form 8960 (2023)

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

2023

NORTH CAROLINA

Name(s)
JOEL E. JACOB Your social security number or EIN
[REDACTED]

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

1 Taxable interest									
2 Ordinary dividends									
3 Annuities from nonqualified plans									
4a Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc.	4a	3,509.							
b Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business	4b								
c Combine lines 4a and 4b				4c		3,509.			
5a Net gain or loss from disposition of property	5a								
b Net gain or loss from disposition of property that is not subject to net investment income tax	5b								
c Adjustment from disposition of partnership interest or S corporation stock	5c								
d Combine lines 5a through 5c				5d					
6 Changes in investment income for certain CFCs and PFICs				6					
7 Other modifications to investment income				7					
8 Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7				8		3,509.			

Part II State Income Tax Pro-ration for 2023 Income Tax Payments

9 State total income									
10 State income tax payments for 2023		SEE STATEMENT 29							
11 2023 state income tax payments attributable to investment income, line 8 divided by line 9 times line 10									

Part III State Income Tax Pro-ration for 2022 Estimate Payments Made in 2023

12 State estimate payments for 2022									
13 Percent of state income taxes attributable to investment income for 2022									
14 2022 state estimate payments attributable to investment income. Line 12 times line 13									

Part IV State Income Tax Pro-ration for Balance of Prior Years Tax Plus Extension Payments Paid in 2023

15 Balance of prior years tax plus extension payments paid in 2023									
16 Percent of state income taxes attributable to investment income for 2022									
17 Balance of prior years tax and extension payments attributable to investment income. Line 15 times line 16									

Part V Reduction of State Tax Deduction

18 Reduction of state tax deduction									
19 Percent of state income taxes attributable to investment income for 2022									
20 Reduction of state tax deduction attributable to investment income. Line 18 times line 19									

Part VI Total State Income Tax Payments Attributable to Investment Income

21 Combine lines 11, 14, 17 and 20. Carry to Form 8960, Line 9 Worksheet, Part III, line 2									
									165.

Form 8960 (2023)

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

Identifying number

JOEL E. JACOB

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.

	(a) Name and address of the donee organization	(b) If donated property is a vehicle, 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	BOAT ANGEL OUTREACH CENTER [REDACTED]	<input type="checkbox"/>	1966 HINCKLEY BERMUDA 40' SAILBOAT
B		<input type="checkbox"/>	
C		<input type="checkbox"/>	
D		<input type="checkbox"/>	

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	05/22/23		PURCHASE		33,100.	
B						
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						

For Paperwork Reduction Act Notice, see separate instructions.

Depreciation and Amortization (Including Information on Listed Property)

2023

Attachment Sequence No. 179

Department of the Treasury Internal Revenue Service

Attach to your tax return.

SUMMARY

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

JOEL E. JACOB

ALL BUSINESS ACTIVITIES

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 rows for Section 179 election details, including maximum amount, total cost, and threshold cost.

Table with 3 columns: (a) Description of property, (b) Cost (business use only), (c) Elected cost. Includes a total row for allowable pass-through section 179 expense.

Table with 13 rows for carryover and business income limitation calculations, including lines 7 through 13.

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

Table with 3 rows for special depreciation allowance and other depreciation details, including lines 14 through 16.

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

Table with 2 rows for MACRS deductions for assets placed in service in tax years beginning before 2023, including line 17 and 18.

Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Includes rows for 3-year through 25-year property and residential/nonresidential real property.

Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System

Table with 6 columns: (a) Class life, (b) Recovery period, (c) Convention, (d) Method, (e) Depreciation deduction. Includes rows for 12-year, 30-year, and 40-year class lives.

Part IV Summary (See instructions.)

Table with 3 rows for summary calculations, including lines 21, 22, and 23.

S Corporation Shareholder Stock and Debt Basis Limitations

Attach to your tax return.

Go to www.irs.gov/Form7203 for instructions and the latest information.

Name of shareholder
JOEL E. JACOB

Identifying number
[REDACTED]

A Name of S corporation
THE BOTTLE CREW, L.L.C.

B Employer identification number
[REDACTED]

C Stock block (see instructions):

D Check applicable box(es) to indicate how stock was acquired:
(1) Original shareholder (2) Purchased (3) Inherited (4) Gift (5) Other:

E Check if you have a Regulations section 1.1367-1(g) election in effect during the tax year for this S corporation

Part I Shareholder Stock Basis

1	Stock basis at the beginning of the corporation's tax year	1	9,864,165.
2	Basis from any capital contributions made or additional stock acquired during the tax year	2	
3a	Ordinary business income (enter losses in Part III)	3a	5,612,918.
b	Net rental real estate income (enter losses in Part III)	3b	
c	Other net rental income (enter losses in Part III)	3c	
d	Interest income	3d	
e	Ordinary dividends	3e	
f	Royalties	3f	
g	Net capital gains (enter losses in Part III)	3g	
h	Net section 1231 gain (enter losses in Part III)	3h	
i	Other Income (enter losses in Part III)	3i	
j	Excess depletion adjustment	3j	
k	Tax-exempt income	3k	
l	Recapture of business credits	3l	
m	Other items that increase stock basis	3m	
4	Add lines 3a through 3m	4	5,612,918.
5	Stock basis before distributions. Add lines 1, 2, and 4	5	15,477,083.
6	Distributions (excluding dividend distributions) <i>Note: If line 6 is larger than line 5, subtract line 5 from line 6 and report the result as a capital gain on Form 8949 and Schedule D. See instructions.</i>	6	1,249,079.
7	Stock basis after distributions. Subtract line 6 from line 5. If the result is zero or less, enter -0-, skip lines 8 through 14, and enter -0- on line 15	7	14,228,004.
8a	Nondeductible expenses	8a	8,287.
b	Depletion for oil and gas	8b	
c	Business credits (sections 50(c)(1) and (5))	8c	
9	Add lines 8a through 8c	9	8,287.
10	Stock basis before loss and deduction items. Subtract line 9 from line 7. If the result is zero or less, enter -0-, skip lines 11 through 14, and enter -0- on line 15	10	14,219,717.
11	Allowable loss and deduction items. Enter the amount from line 47, column (c)	11	49,406.
12	Debt basis restoration (see net increase in instructions for line 23)	12	
13	Other items that decrease stock basis	13	
14	Add lines 11, 12, and 13	14	49,406.
15	Stock basis at the end of the corporation's tax year. Subtract line 14 from line 10. If the result is zero or less, enter -0-	15	14,170,311.

Part II Shareholder Debt Basis

Section A - Amount of Debt (if more than three debts, see instructions.)

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

Part II Shareholder Debt Basis (continued)

Section B - Adjustments to Debt Basis				
Description	(a) Debt 1	(b) Debt 2	(c) Debt 3	(d) Total
21 Debt basis at the beginning of the corporation's tax year				
22 Enter the amount, if any, from line 17				
23 Debt basis restoration (see instructions)				
24 Debt basis before repayment. Add lines 21, 22, and 23				
25 Divide line 24 by line 18				
26 Nontaxable debt repayment. Multiply line 25 by line 19				
27 Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24				
28 Nondeductible expenses and oil and gas depletion deductions in excess of stock basis				
29 Debt basis before losses and deductions. Subtract line 28 from line 27. If the result is zero or less, enter -0-				
30 Allowable losses in excess of stock basis. Enter the amount from line 47, column (d)				
31 Debt basis at the end of the corporation's tax year. Subtract line 30 from line 29. If the result is zero or less, enter -0-				

Section C - Gain on Loan Repayment

32 Repayment. Enter the amount from line 19				
33 Nontaxable repayments. Enter the amount from line 26				
34 Reportable gain. Subtract line 33 from line 32				

Part III Shareholder Allowable Loss and Deduction Items

Description	(a) Current year losses and deductions	(b) Carryover amounts (column (e)) from the previous year	(c) Allowable loss from stock basis	(d) Allowable loss from debt basis	(e) Carryover amounts
35 Ordinary business loss					
36 Net rental real estate loss					
37 Other net rental loss					
38 Net capital loss					
39 Net section 1231 loss					
40 Other loss					
41 Section 179 deductions	28,096.		28,096.		
42 Charitable contributions					
43 Investment interest expense					
44 Section 59(e)(2) expenditures					
45 Other deductions	21,310.		21,310.		
46 Foreign taxes paid or accrued					
47 Total loss. Add lines 35 through 46 for each column. Enter the total loss in column (c) on line 11 and enter the total loss in column (d) on line 30	49,406.		49,406.		

Form **7203**

(Rev. December 2022)
Department of the Treasury
Internal Revenue Service

**ALTERNATIVE MINIMUM TAX
S Corporation Shareholder Stock and
Debt Basis Limitations**

OMB No. 1545-2302

Attach to your tax return.

Go to www.irs.gov/Form7203 for instructions and the latest information.

Attachment
Sequence No. **203**

Name of shareholder **JOEL E. JACOB** Identifying number [REDACTED]

A Name of S corporation **THE BOTTLE CREW, L.L.C.** B Employer identification number [REDACTED]

C Stock block (see instructions):

D Check applicable box(es) to indicate how stock was acquired:
(1) Original shareholder (2) Purchased (3) Inherited (4) Gift (5) Other:

E Check if you have a Regulations section 1.1367-1(g) election in effect during the tax year for this S corporation

Part I Shareholder Stock Basis

1	Stock basis at the beginning of the corporation's tax year	1	970,733.
2	Basis from any capital contributions made or additional stock acquired during the tax year	2	
3a	Ordinary business income (enter losses in Part III)	3a	5,612,918.
b	Net rental real estate income (enter losses in Part III)	3b	
c	Other net rental income (enter losses in Part III)	3c	
d	Interest income	3d	
e	Ordinary dividends	3e	
f	Royalties	3f	
g	Net capital gains (enter losses in Part III)	3g	
h	Net section 1231 gain (enter losses in Part III)	3h	
i	Other income (enter losses in Part III)	3i	
j	Excess depletion adjustment	3j	
k	Tax-exempt income	3k	
l	Recapture of business credits	3l	
m	Other items that increase stock basis	3m	
4	Add lines 3a through 3m	4	5,612,918.
5	Stock basis before distributions. Add lines 1, 2, and 4	5	6,583,651.
6	Distributions (excluding dividend distributions) <i>Note: If line 6 is larger than line 5, subtract line 5 from line 6 and report the result as a capital gain on Form 8949 and Schedule D. See instructions.</i>	6	1,249,079.
7	Stock basis after distributions. Subtract line 6 from line 5. If the result is zero or less, enter -0-, skip lines 8 through 14, and enter -0- on line 15	7	5,334,572.
8a	Nondeductible expenses	8a	8,287.
b	Depletion for oil and gas	8b	
c	Business credits (sections 50(c)(1) and (5))	8c	
9	Add lines 8a through 8c	9	8,287.
10	Stock basis before loss and deduction items. Subtract line 9 from line 7. If the result is zero or less, enter -0-, skip lines 11 through 14, and enter -0- on line 15	10	5,326,285.
11	Allowable loss and deduction items. Enter the amount from line 47, column (c)	11	49,406.
12	Debt basis restoration (see net increase in instructions for line 23)	12	
13	Other items that decrease stock basis	13	
14	Add lines 11, 12, and 13	14	49,406.
15	Stock basis at the end of the corporation's tax year. Subtract line 14 from line 10. If the result is zero or less, enter -0-	15	5,276,879.

Part II Shareholder Debt Basis

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

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

Part II Shareholder Debt Basis (continued)

Section B - Adjustments to Debt Basis

Description	(a) Debt 1	(b) Debt 2	(c) Debt 3	(d) Total
21 Debt basis at the beginning of the corporation's tax year				
22 Enter the amount, if any, from line 17				
23 Debt basis restoration (see instructions)				
24 Debt basis before repayment. Add lines 21, 22, and 23				
25 Divide line 24 by line 18				
26 Nontaxable debt repayment. Multiply line 25 by line 19				
27 Debt basis before nondeductible expenses and losses. Subtract line 26 from line 24				
28 Nondeductible expenses and oil and gas depletion deductions in excess of stock basis				
29 Debt basis before losses and deductions. Subtract line 28 from line 27. If the result is zero or less, enter -0-				
30 Allowable losses in excess of stock basis. Enter the amount from line 47, column (d)				
31 Debt basis at the end of the corporation's tax year. Subtract line 30 from line 29. If the result is zero or less, enter -0-				

Section C - Gain on Loan Repayment

32 Repayment. Enter the amount from line 19				
33 Nontaxable repayments. Enter the amount from line 26				
34 Reportable gain. Subtract line 33 from line 32				

Part III Shareholder Allowable Loss and Deduction Items

Description	(a) Current year losses and deductions	(b) Carryover amounts (column (e)) from the previous year	(c) Allowable loss from stock basis	(d) Allowable loss from debt basis	(e) Carryover amounts
35 Ordinary business loss					
36 Net rental real estate loss					
37 Other net rental loss					
38 Net capital loss					
39 Net section 1231 loss					
40 Other loss					
41 Section 179 deductions	28,096.		28,096.		
42 Charitable contributions					
43 Investment interest expense					
44 Section 59(e)(2) expenditures					
45 Other deductions	21,310.		21,310.		
46 Foreign taxes paid or accrued					
47 Total loss. Add lines 35 through 46 for each column. Enter the total loss in column (c) on line 11 and enter the total loss in column (d) on line 30	49,406.		49,406.		

Self-Employed Health Insurance Deduction

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form7206 for instructions and the latest information.

Name(s) shown on return

Your taxpayer identification number

JOEL E. JACOB

Note: Use a separate Form 7206 for each trade or business under which an insurance plan is established.

<p>1 Enter the total amount paid in 2023 for health insurance coverage established under your business (or the S corporation in which you were a more-than-2% shareholder) for 2023 for you, your spouse, and your dependents. But don't include the following. See instructions</p> <ul style="list-style-type: none"> • Amounts for any month you were eligible to participate in a health plan subsidized by your employer or your spouse's employer or the employer of either your dependent or your child who was under the age of 27 at the end of 2023. • Any amounts paid, not to exceed \$3,000, from retirement plan distributions that were nontaxable because you are a retired public safety officer. See instructions. • Any payments for qualified long-term care insurance (see line 2). 	<p>1 21,310.</p>
<p>2 For coverage under a qualified long-term care insurance contract, enter for each person covered the smaller of (a) or (b).</p> <p>(a) Total payments made for that person during the year.</p> <p>(b) The amount shown below. Use the person's age at the end of the tax year.</p> <ul style="list-style-type: none"> \$480 - if that person is age 40 or younger \$890 - if age 41 to 50 \$1,790 - if age 51 to 60 \$4,770 - if age 61 to 70 \$5,960 - if age 71 or older <p>Note: The amount of long-term care premiums that can be included as a medical expense is limited by the person's age. Don't include payments for any month you were eligible to participate in a long-term care insurance plan subsidized by your employer or your spouse's employer, or the employer of either your dependent or your child who was under the age of 27 at the end of 2023. If more than one person is covered, figure separately the amount to enter for each person. Then enter the total of those amounts</p>	
<p>3 Add lines 1 and 2</p>	<p>3 21,310.</p>
<p>4 Enter your net profit* and any other earned income** from the trade or business under which the insurance plan is established. Don't include Conservation Reserve Program payments exempt from self-employment tax. If the business is an S corporation, skip to line 11</p>	
<p>5 Enter the total of all net profits* from Schedule C (Form 1040), line 31; Schedule F (Form 1040), line 34; or Schedule K-1 (Form 1065), box 14, code A, plus any other income allocable to the profitable businesses. Don't include Conservation Reserve Program payments exempt from self-employment tax. See the Instructions for Schedule SE (Form 1040). Don't include any net losses shown on these schedules</p>	
<p>6 Divide line 4 by line 5</p>	
<p>7 Multiply Schedule 1 (Form 1040), line 15, deductible part of self-employment tax, by the percentage on line 6</p>	
<p>8 Subtract line 7 from line 4</p>	
<p>9 Enter the amount, if any, from Schedule 1 (Form 1040), line 16, self-employed SEP, SIMPLE, and qualified plans, attributable to the same trade or business in which the insurance plan is established</p>	
<p>10 Subtract line 9 from line 8</p>	
<p>11 Enter your Medicare wages (box 5 of Form W-2) from an S corporation in which you are a more-than-2% shareholder and in which the insurance plan is established</p>	<p>11 331,390.</p>
<p>12 Enter any amount from Form 2555, line 45, attributable to the amount entered on line 4 or 11 above</p>	
<p>13 Subtract line 12 from line 10 or 11, whichever applies</p>	<p>13 331,390.</p>
<p>14 Self-employed health insurance deduction. Enter the smaller of line 3 or line 13 here and on Schedule 1 (Form 1040), line 17. Don't include this amount when figuring any medical expense deduction on Schedule A (Form 1040)</p>	<p>14 21,310.</p>

* If you used either optional method to figure your net earnings from self-employment from any business, don't enter your net profit from the business. Instead, enter the amount attributable to that business from Schedule SE (Form 1040), Part I, line 4b.

** Earned income includes net earnings and gains from the sale, transfer, or licensing of property you created. However, it doesn't include capital gain income.

**Limitation on Business Interest Expense
Under Section 163(j)**

Attach to your tax return.

Go to www.irs.gov/Form8990 for instructions and the latest information.

Taxpayer name(s) shown on tax return: **JOEL E. JACOB** Identification number: [REDACTED]

- A If Form 8990 relates to an information return for a foreign entity (for example, Form 5471), enter:
 Name of foreign entity _____
 Employer identification number, if any _____
 Reference ID number _____
- B Is the foreign entity a CFC group member? See instructions Yes No
- C Is this Form 8990 filed by the specified group parent for an entire CFC group? See instructions Yes No
- D Has a CFC or a CFC group made a safe harbor election? If yes, see instructions for which lines of Form 8990 to complete Yes No

Part I Computation of Allowable Business Interest Expense

Part I is completed by all taxpayers subject to section 163(j). Schedule A and Schedule B need to be completed before Part I when the taxpayer is a partner or shareholder of a pass-through entity subject to section 163(j).

Section I - Business Interest Expense

1	Current year business interest expense (not including floor plan financing interest expense), before the section 163(j) limitation	1	36,097.		36,097.
2	Disallowed business interest expense carryforwards from prior years. (Does not apply to a partnership)	2			
3	Partner's excess business interest expense treated as paid or accrued in current year (Schedule A, line 44, column (h))	3			
4	Floor plan financing interest expense. See instructions	4			
5	Total business interest expense. Add lines 1 through 4	5			

Section II - Adjusted Taxable Income

Tentative Taxable Income

6	Tentative taxable income. See instructions	6	4,959,728.
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Additions (adjustments to be made if amounts are taken into account on line 6)

7	Any item of loss or deduction that is not properly allocable to a trade or business of the taxpayer. See instructions	7			6,722,494.
8	Any business interest expense not from a pass-through entity. See instr.	8	36,097.		
9	Amount of any net operating loss deduction under section 172	9			
10	Amount of any qualified business income deduction allowed under section 199A	10	1,234,247.		
11	Reserved for future use	11			
12	Amount of any loss or deduction items from a pass-through entity. See instructions	12	28,096.		
13	Other additions. See instructions	13			
14	Total current year partner's excess taxable income (Schedule A, line 44, column (f))	14			
15	Total current year S corporation shareholder's excess taxable income (Schedule B, line 46, column (c))	15	5,424,054.		
16	Total. Add lines 7 through 15	16			

Reductions (adjustments to be made if amounts are taken into account on line 6)

17	Any item of income or gain that is not properly allocable to a trade or business of the taxpayer. See instructions	17			5,835,674.
18	Any business interest income not from a pass-through entity. See instructions	18			
19	Amount of any income or gain items from a pass-through entity. See instructions	19	5,835,674.		
20	Other reductions. See instructions	20			
21	Total. Combine lines 17 through 20	21		5,835,674.	
22	Adjusted taxable income. Combine lines 6, 16, and 21. See instructions	22		5,846,548.	

Section III - Business Interest Income

23	Current year business interest income. See instructions	23		
24	Excess business interest income from pass-through entities (total of Schedule A, line 44, column (g), and Schedule B, line 46, column (d))	24		
25	Total. Add lines 23 and 24			25

Section IV - Section 163(f) Limitation Calculations

Limitation on Business Interest Expense

26	Multiply the adjusted taxable income from line 22 by the applicable percentage. See instructions	26	1,753,964.	
27	Business interest income (line 25)	27		
28	Floor plan financing interest expense (line 4)	28		
29	Total. Add lines 26, 27, and 28			29 1,753,964.

Allowable Business Interest Expense

30	Total current year business interest expense deduction. See instructions	30	36,097.
----	---	----	---------

Carryforward

31	Disallowed business interest expense. Subtract line 29 from line 5. (If zero or less, enter -0-.)	31	
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Part II Partnership Pass-Through Items

Part II is only completed by a partnership that is subject to section 163(f). The partnership items below are allocated to the partners and are not carried forward by the partnership. See the instructions for more information.

Excess Business Interest Expense

32	Excess business interest expense. Enter amount from line 31	32	
----	--	----	--

Excess Taxable Income (If you entered an amount on line 32, skip lines 33 through 37.)

33	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.)	33	
34	Subtract line 33 from line 26. (If zero or less, enter -0-.)	34	
35	Divide line 34 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.)	35	
36	Excess taxable income. Multiply line 35 by line 22	36	

Excess Business Interest Income

37	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.)	37	
----	---	----	--

Part III S Corporation Pass-Through Items

Part III is only completed by S corporations that are subject to section 163(f). The S corporation items below are allocated to the shareholders. See the instructions for more information.

Excess Taxable Income

38	Subtract the sum of lines 4 and 25 from line 5. (If zero or less, enter -0-.)	38	
39	Subtract line 38 from line 26. (If zero or less, enter -0-.)	39	
40	Divide line 39 by line 26. Enter the result as a decimal. (If line 26 is zero, enter -0-.)	40	
41	Excess taxable income. Multiply line 40 by line 22	41	

Excess Business Interest Income

42	Excess business interest income. Subtract the sum of lines 1, 2, and 3 from line 25. (If zero or less, enter -0-.)	42	
----	---	----	--

SCHEDULE A Summary of Partner's Section 163(f) Excess Items

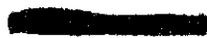
Any taxpayer that owns an interest in a partnership subject to section 163(f) should complete Schedule A before completing Part I.

(a) Name of partnership	(b) EIN	Excess Business Interest Expense			(f) Current year excess taxable income	(g) Current year excess business interest income	(h) Excess business interest expense treated as paid or accrued (see instructions)	(i) Current year excess business interest expense carryforward (see instructions)
		(c) Current year (see instructions)	(d) Prior year carryforward (see instructions)	(e) Total ((c) plus (d))				
43								
44	Total				0.	0.		0.

SCHEDULE B Summary of S Corporation Shareholder's Excess Taxable Income and Excess Business Interest Income

Any taxpayer that is required to complete Part I and is a shareholder in an S corporation that has excess taxable income or excess business interest income should complete Schedule B before completing Part I.

(a) Name of S corporation	(b) EIN	(c) Current year excess taxable income	(d) Current year excess business interest income
45 M. JACOB & SONS THE BOTTLE CREW, L.L.C.		216,139.	0.
		5,207,915.	0.
46	Total	5,424,054.	0.



FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 1

T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
T THE BOTTLE CREW LLC	331,390.	86,261.	12,678.		9,932.	5,988.
TOTALS	331,390.	86,261.	12,678.		9,932.	5,988.

FORM 1040 QUALIFIED DIVIDENDS STATEMENT 2

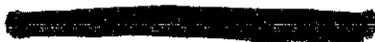
NAME OF PAYER	ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS
MERRILL LYNCH -	2,104.	2,104.
PERSHING -	1,936.	1,936.
TOTAL INCLUDED IN FORM 1040, LINE 3A		4,040.

FORM 1040 TAX STATEMENT 3

DESCRIPTION	AMOUNT
FROM QUALIFIED DIVIDENDS AND CAPITAL GAIN WORKSHEET	1,791,565.
TOTAL TO FORM 1040, LINE 16	1,791,565.

FORM 1040 FEDERAL INCOME TAX WITHHELD - FORM(S) W-2 STATEMENT 4

T S DESCRIPTION	AMOUNT
T THE BOTTLE CREW LLC	86,261.
TOTAL TO FORM 1040, LINE 25A	86,261.





SCHEDULE 1	STATE AND LOCAL INCOME TAX REFUNDS	STATEMENT	7
	2022	2021	2020
	CALIFORNIA		
GROSS STATE/LOCAL INC TAX REFUNDS	6,901.		
LESS: TAX PAID IN FOLLOWING YEAR			
NET TAX REFUNDS CALIFORNIA	6,901.		
	MICHIGAN		
GROSS STATE/LOCAL INC TAX REFUNDS	32,026.		
LESS: TAX PAID IN FOLLOWING YEAR			
NET TAX REFUNDS MICHIGAN	32,026.		
			NORTH CAROLINA
GROSS STATE/LOCAL INC TAX REFUNDS			10.
LESS: TAX PAID IN FOLLOWING YEAR			
NET TAX REFUNDS NORTH CAROLINA			10.
		NORTH CAROLINA	
GROSS STATE/LOCAL INC TAX REFUNDS		90.	
LESS: TAX PAID IN FOLLOWING YEAR			
NET TAX REFUNDS NORTH CAROLINA		90.	
TOTAL NET TAX REFUNDS	38,927.	90.	10.

SCHEDULE A	STATE AND LOCAL INCOME TAXES	STATEMENT	8
DESCRIPTION	AMOUNT		
FROM K-1 - M. JACOB & SONS			5,411.
FROM K-1 - THE BOTTLE CREW, L.L.C.			16,343.
THE BOTTLE CREW LLC			12,678.
CALIFORNIA 2ND QTR ESTIMATE PAYMENTS			20,000.
CALIFORNIA PRIOR YEAR OVERPAYMENT APPLIED			6,901.
MICHIGAN PRIOR YEAR OVERPAYMENT APPLIED			32,026.
TOTAL TO SCHEDULE A, LINE 5A			93,359.



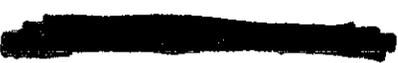


SCHEDULE A CASH CONTRIBUTIONS STATEMENT 9

DESCRIPTION	AMOUNT 60% LIMIT	AMOUNT 30% LIMIT
AMERICAN CANCER SOCIETY	500.	
AMERICAN FRIENDS OF LEKET ISRAEL	5,000.	
ASU HILLEL	12,000.	
CHARLEVOIX ELEMENTARY SCHOOL	2,000.	
COLEL CHABAD	1,000.	
CONGREGATION SHAAREY ZEDEK	1,604.	
FRIENDS OF UNITED HATZALAH	5,000.	
FRIENDSHIP EDUCATIONAL FOUNDATION	250,000.	
GLEANERS COMMUNITY FOOD BANK	49,973.	
HOLLYWOOD FOOD COALITION	10,000.	
JEWISH COMMUNITY CENTER	5,000.	
JEWISH FEDERATION OF DETROIT	93,000.	
MAKE A WISH	800.	
MISCELLANEOUS ORGANIZED CHARITIES	2,530.	
NORTHWEST ARKANSAS FOOD BANK	33,333.	
ORT AMERICA	15,000.	
RICHSTONE FAMILY CENTER	1,000.	
THE ZEKELMAN HOLOCAUST CENTER	1,000.	
UNITED MITOCHONDRIAL	500.	
YAD EZRA	5,100.	
YESHIVA BETH YEHUDA	500.	
FROM K-1 - M. JACOB & SONS	3,876.	
SUBTOTALS	498,716.	
TOTAL TO SCHEDULE A, LINE 11		498,716.

SCHEDULE A MORTGAGE INTEREST AND POINTS REPORTED ON FORM 1098 STATEMENT 10

DESCRIPTION	AMOUNT
HUNTINGTON BANK, 5555 CLEVELAND AVE - GW 1N09, COLUMBUS, OH 43231	8,809.
TOTAL TO SCHEDULE A, LINE 8A	8,809.



SCHEDULE A	REAL ESTATE TAXES	STATEMENT 11
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DESCRIPTION	AMOUNT
POINTVIEW	22,664.
CHARLEVOIX - [REDACTED]	4,524.
HIGHLAND BEACH - [REDACTED]	8,253.
TOTAL TO SCHEDULE A, LINE 5B	35,441.

SCHEDULE D	CAPITAL GAIN DISTRIBUTIONS	STATEMENT 12
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NAME OF PAYER	TOTAL CAPITAL GAIN	28% GAIN
MERRILL LYNCH - [REDACTED]	11,589.	
TOTALS TO SCHEDULE D, LINE 13	11,589.	

[REDACTED]

SCHEDULE E OTHER EXPENSES STATEMENT 13

CREW HOUSE LLC - COMMERCIAL REAL ESTATE - [REDACTED], CANTON, [REDACTED]

DESCRIPTION	AMOUNT
BANK FEES	1,988.
DEDUCTIBLE MEALS AND ENTERTAINMENT	12,918.
AMORTIZATION	5,019.
RENT	478.
TOTAL TO SCHEDULE E, PAGE 1, LINE 19	20,403.

SCHEDULE E OTHER EXPENSES STATEMENT 14

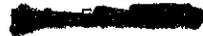
B1 LOG CABIN LLC - RESIDENTIAL RENTAL - CHARLEVOIX, MI

DESCRIPTION	AMOUNT
BANK FEES	25.
DUES, LICENSE, SUBSCRIPTIONS	805.
AMORTIZATION	2,111.
TOTAL TO SCHEDULE E, PAGE 1, LINE 19	2,941.

SCHEDULE E OTHER EXPENSES STATEMENT 15

G7 LLC - LAND RENTAL - CHARLEVOIX, MI

DESCRIPTION	AMOUNT
BANK FEES	15.
AMORTIZATION	1,132.
TOTAL TO SCHEDULE E, PAGE 1, LINE 19	1,147.



SCHEDULE E OTHER EXPENSES STATEMENT 16

7 CREW LLC - FARM LAND RENTAL - CHARLEVOIX, MI

DESCRIPTION	AMOUNT
BANK FEES	15.
DUES, LICENSE, SUBSCRIPTIONS	55.
AMORTIZATION	2,850.
TOTAL TO SCHEDULE E, PAGE 1, LINE 19	2,920.

SCHEDULE E OTHER EXPENSES STATEMENT 17

LARS PCH LLC - COMMERCIAL RENTAL - [REDACTED], CHARLEVOIX, MI

DESCRIPTION	AMOUNT
BANK FEES	15.
AMORTIZATION	2,925.
TOTAL TO SCHEDULE E, PAGE 1, LINE 19	2,940.

SCHEDULE E OTHER EXPENSES STATEMENT 18

ALFIN AIR LLC - CHARTER AIRLINE

DESCRIPTION	AMOUNT
BANK FEES	10.
FUEL	357,958.
MSP CHARGES	296,468.
LICENSE AND SUBSCRIPTIONS	64,631.
AMORTIZATION	4,605.
TOTAL TO SCHEDULE E, PAGE 1, LINE 19	723,672.



FORM 4797

NONRECAPTURED NET SECTION 1231 LOSSES
FROM PRIOR YEARS

STATEMENT 19

<u>TAX YEAR</u>	<u>SECTION 1231 LOSSES</u>	<u>SECTION 1231 LOSSES RECAPTURED</u>	<u>NONRECAPTURED SECTION 1231 LOSSES</u>
2018	218.		218.
2019			
2020	25,195.		25,195.
2021			
2022			
TOTAL TO FORM 4797, LINE 8	<u>25,413.</u>	<u></u>	<u>25,413.</u>



FORM 8960	TRADE OR BUSINESS INCOME	STATEMENT 21
CREW HOUSE LLC - COMMERCIAL REAL ESTATE - [REDACTED], CAN THE BOTTLE CREW, L.L.C.		-404,540. -5,584,822.
AMOUNT TO FORM 8960, LINE 4B		-5,989,362.

FORM 8960	OTHER MODIFICATIONS TO INVESTMENT INCOME	STATEMENT 22
AMOUNT FROM LINE 7 WORKSHEET, LINE 13 FOR CA	167.	
AMOUNT FROM LINE 7 WORKSHEET, LINE 13 FOR MI	1,821.	
TOTAL RECOVERY OF PRIOR YEAR FORM 8960, LINE 9B	1,988.	1,988.
AMOUNT TO FORM 8960, LINE 7		1,988.

FORM 8960	STATE INCOME TAX	STATEMENT 23
CALIFORNIA		198.
CONNECTICUT		236.
ILLINOIS		576.
MICHIGAN		3,072.
NEBRASKA		653.
NORTH CAROLINA		165.
AMOUNT TO LINES 9 AND 10 WORKSHEET, PART III, LINE 2		4,900.

FORM 8960	STATE INCOME TAX PAYMENTS	STATEMENT 24
CALIFORNIA		
DESCRIPTION		AMOUNT
ESTIMATE OR PRIOR YEAR OVERPAYMENT		26,901.
TOTAL TO STATE FORM 8960, LINE 10		26,901.

JOEL E. JACOB

[REDACTED]

FORM 8960 STATE INCOME TAX PAYMENTS STATEMENT 25

CONNECTICUT

DESCRIPTION AMOUNT

TOTAL TO STATE FORM 8960, LINE 10

FORM 8960 STATE INCOME TAX PAYMENTS STATEMENT 26

ILLINOIS

DESCRIPTION AMOUNT

M. JACOB & SONS 577.
THE BOTTLE CREW, L.L.C. 8,409.

TOTAL TO STATE FORM 8960, LINE 10 8,986.

FORM 8960 STATE INCOME TAX PAYMENTS STATEMENT 27

MICHIGAN

DESCRIPTION AMOUNT

THE BOTTLE CREW LLC 12,678.
MICHIGAN PRIOR YEAR OVERPAYMENT APPLIED 32,026.

TOTAL TO STATE FORM 8960, LINE 10 44,704.

FORM 8960 STATE INCOME TAX PAYMENTS STATEMENT 28

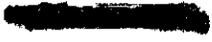
NEBRASKA

DESCRIPTION AMOUNT

M. JACOB & SONS 653.

TOTAL TO STATE FORM 8960, LINE 10 653.

JOEL E. JACOB



FORM 8960

STATE INCOME TAX PAYMENTS

STATEMENT 29

NORTH CAROLINA

DESCRIPTION

AMOUNT

M. JACOB & SONS

167.

TOTAL TO STATE FORM 8960, LINE 10

167.

JOEL E. JACOB



FORM 4562

PART I - BUSINESS INCOME

STATEMENT 36

INCOME TYPE

AMOUNT

S CORP - THE BOTTLE CREW, L.L.C.
WAGES

5,612,918.
331,390.

TOTAL BUSINESS INCOME USED IN FORM 4562, LINE 11

5,944,308.

▼ DETACH HERE ▼

Form **4868** Department of the Treasury Internal Revenue Service (99) For calendar year 2023, or other tax year beginning , 2023, ending

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

1019 **2023**

Part I Identification	Part II Individual Income Tax
<p>1 Your name(s)</p> <p>JOEL E. JACOB </p>	<p>4 Estimate of total tax liability for 2023 \$ <u>2,871,685.</u></p> <p>5 Total 2023 payments <u>1,271,685.</u></p> <p>6 Balance due. Subtract line 5 from line 4 <u>1,600,000.</u></p> <p>7 Amount you are paying ► <u>1,600,000.</u></p>
<p>2 Your social security number 379-58-7795</p> <p>3 Spouse's social security number</p>	<p>8 Check here if you are "out of the country" and a U.S. citizen or resident ► <input type="checkbox"/></p> <p>9 Check here if you file Form 1040NR or 1040NR-EZ and did not receive wages as an employee subject to U.S. income tax withholding ► <input type="checkbox"/></p>

379587795 YI JACO 30 0 202312 670

2023 W-2 and EARNINGS SUMMARY



Employee Reference Copy W-2 Wage and Tax Statement 2023

Copy C for employee's records. OMB No. 1545-0048

d Control number	Dept.	Corp.	Employer use only
000022 K2/ITW			A 13

c Employer's name, address, and ZIP code
THE BOTTLE CREW LLC
 [REDACTED]
 Batch #90720

e/f Employee's name, address, and ZIP code
JOEL E JACOB
 [REDACTED]

b Employer's FED ID number	a Employer's SSA number
1 Wages, tips, other comp. 331390.21	2 Federal income tax withheld 86260.98
3 Social security wages 160200.00	4 Social security tax withheld 9932.40
5 Medicare wages and tips 331390.21	6 Medicare tax withheld 5987.67
7 Social security tips	8 Allocated tips
9	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
14 Other 80.48 AUTO 21309.65 S-CORP	12b 12c 12d
15 State Employer's state ID no. MI 38-3475060	16 State wages, tips, etc. 331390.21
17 State income tax 12677.55	18 Local wages, tips, etc.
19 Local income tax	20 Locality name

This blue section is your Earnings Summary which provides more detailed information on the generation of your W-2 statement. The reverse side includes instructions and other general information.

1. Your Gross Pay was adjusted as follows to produce your W-2 Statement.

	Wages, Tips, other Compensation Box 1 of W-2	Social Security Wages Box 3 of W-2	Medicare Wages Box 5 of W-2	MI, State Wages, Tips, Etc. Box 16 of W-2
Gross Pay	310,080.56	310,080.56	310,080.56	310,080.56
Less Wages Over Limit	N/A	171,190.21	N/A	N/A
Plus SCRF	21,309.65	21,309.65	21,309.65	21,309.65
Reported W-2 Wages	331,390.21	160,200.00	331,390.21	331,390.21

Note - Fringe benefits include : COMPANY CAR PERSONAL USE \$80.48

2. Employee Name and Address.

JOEL E JACOB
 [REDACTED]
 [REDACTED]