



**2025 Federal Tax Return Filing
Instructions
FOR THE YEAR ENDING
December 31, 2025**

Prepared for	JUANA SUAREZ CONDE																
Tax Summary	<table> <tr><td>Gross Income.....</td><td>\$7250</td></tr> <tr><td>Adjusted Gross Income.....</td><td>\$6738</td></tr> <tr><td>Total Deductions.....</td><td>\$23750</td></tr> <tr><td>Total Taxable Income.....</td><td>\$0</td></tr> <tr><td>Total Tax.....</td><td>\$1024</td></tr> <tr><td>Total Payments.....</td><td>\$0</td></tr> <tr><td>Refund Amount.....</td><td>\$0</td></tr> <tr><td>Amount You Owe.....</td><td>\$1024</td></tr> </table>	Gross Income.....	\$7250	Adjusted Gross Income.....	\$6738	Total Deductions.....	\$23750	Total Taxable Income.....	\$0	Total Tax.....	\$1024	Total Payments.....	\$0	Refund Amount.....	\$0	Amount You Owe.....	\$1024
Gross Income.....	\$7250																
Adjusted Gross Income.....	\$6738																
Total Deductions.....	\$23750																
Total Taxable Income.....	\$0																
Total Tax.....	\$1024																
Total Payments.....	\$0																
Refund Amount.....	\$0																
Amount You Owe.....	\$1024																
Make check payable to																	
Mailing Address	<p>Since you are filing your return electronically and you chose to use an electronic signature, you do not mail your return.</p>																

Instructions

If you e-filed your return and it has been accepted, you will get notified via text or email if you opted for that option.

If you have a balance due being paid by check or are paper filing the return, mail it to the address indicated.

Keep a copy of your return and supporting documents for your records.

Statement of Profit and Loss

For the year ended December 31, 2025

Juana Suarez Conde

Income	2025 Amounts	2024 Amounts	Difference
Gross receipts or sales	7,250		7,250
Returns and allowances			
Net sales	<u>7,250</u>	<u></u>	<u>7,250</u>
Cost of goods sold			
Gross profit	<u>7,250</u>	<u></u>	<u>7,250</u>
Other income			
Gross income	<u>7,250</u>	<u></u>	<u>7,250</u>
Expenses			
Advertising			
Car and truck expenses			
Commissions and fees			
Contract labor			
Depletion			
Depreciation and section 179 expense			
Employee benefit programs			
Insurance			
Interest: Mortgage			
Interest: Other			
Legal and professional services			
Office expenses			
Pension and profit-sharing plans			
Rent or lease: Vehicles, machinery and equipment			
Rent or lease: Other business property			
Repairs and maintenance			
Supplies			
Taxes and licenses			
Travel			
Deductible meals			
Utilities			
Wages			
Other expenses			
Total expenses	<u></u>	<u></u>	<u></u>
Net income (loss)	<u>7,250</u>	<u></u>	<u>7,250</u>

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Note: This report is based solely upon information that you provided to H&R Block. We do not perform any independent verification of your information, and this report should not be relied upon by third parties.

INTERNAL REVENUE SERVICE
P O Box 1214
Charlotte, NC 28201-1214

Fold here for #10 envelope

INTERNAL REVENUE SERVICE
P O Box 1214
Charlotte, NC 28201-1214

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2026 INCOME TAX ESTIMATOR/PLANNER

JUANA SUAREZ CONDE
274-71-8323

Keep for Your Records

	Current 2025	Adjustments 2026	Estimated 2026
Filing status	Single		Single
INCOME:			
Wages, salaries, tips, etc.			
Interest income			
Ordinary dividend income (excluding Qualified Dividends)			
IRA distributions and pension income			
Taxable social security income			
Capital gain or (loss) (Schedule D) (including Qual Dividends)			
Schedule 1 Income			
Refunds of state and local taxes			
Alimony received from divorces finalized before 1/1/2025			
Business income or (loss) (Schedule C)	7,250		7,250
Other gains or (losses) (Form 4797)			
Rental real estate, partnerships, estates, etc. (Schedule E)			
Farm income or (loss) (Schedule F)			
Unemployment compensation			
Other income			
Total income	7,250		7,250
ADDITIONAL DEDUCTIONS:			
Qualified tips deduction			
Qualified overtime compensation deduction			
Qualified vehicle loan interest deduction			
Senior deduction	6,000		6,000
ADJUSTMENTS:			
Schedule 1 Adjustments			
Educator expenses			
Certain business expenses of reservists, performing artist, and fee-basis government officials			
Health savings account deduction (Form 8889)			
Qualified moving expenses			
Deductible part of self-employment tax (Schedule SE)	512		512
Self-employed SEP, SIMPLE and qualified plans deduction ..			
Self-employed health insurance			
Penalty on early withdrawal of savings			
Alimony paid on divorces finalized before 1/1/2025			
IRA deduction			
Student loan interest deduction			
Archer MSA deduction			
Other adjustments			
Total adjustments	512		512
ADJUSTED GROSS INCOME:	6,738		6,738
DEDUCTIONS:			
Standard deduction	17,750	400	18,150
Itemized deductions:			
Medical and dental expenses			
Sales, income, and other taxes paid	388		388
Interest paid			
Gifts to charity			
Casualty and theft losses			
Other miscellaneous deductions			
Total itemized deductions	388		388
Deduction actually claimed	17,750	400	18,150
Qualified business income deduction			

2026 INCOME TAX ESTIMATOR/PLANNER

JUANA SUAREZ CONDE
274-71-8323

Keep for Your Records

	Current 2025	Adjustments 2026	Estimated 2026
TAX COMPUTATION (BEFORE CREDITS):			
Taxable income	0	-400	0
Tax			
Schedule 2 - Taxes			
Additions to Tax			
Alternative minimum tax			
Tax rate	10.0%		10.0%
CREDITS:			
Child and other dependents tax credit			
Schedule 3 - Nonrefundable Credits			
Foreign tax credit			
Child care credit			
Education credit			
Retirement savings contribution credit			
Other credits			
Total credits			
OTHER TAXES:			
Schedule 2 - Other Taxes			
Self-employment tax	1,024		1,024
Additional tax on IRAs			
Other taxes			
Total other taxes	1,024		1,024
PAYMENTS:			
Federal income tax withheld			
Estimated payments			
Earned income credit			
Additional child tax credit			
Schedule 3 - Refundable Credits and Payments			
American opportunity credit			
ACA premium tax credit			
Other payments			
Total payments			
AMOUNT DUE / REFUND:			
Amount overpaid			
Overpayment applied to next year			
Refund			
Amount due	1,024		1,024

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Note: These amounts and calculations are for estimating purposes only and should not be assumed to be your final refund or liability for 2025 taxes. State implications have not been considered in these calculations. Be sure to schedule a tax appointment to have your 2025 tax return prepared using the actual 2025 tax forms issued by the Internal Revenue Service and your actual 2025 source documents.

ADDITIONAL DISCLOSURES:

As per the new OBBB Act, Taxpayers aged 65 or older may qualify for a \$6,000 deduction each. The deduction phases out for AGI above \$75,000 (single) or \$150,000 (MFJ), and is unavailable above \$175,000/\$250,000 Standard deduction limits increased to \$32,200 for MFJ and QSS filers \$24,150 for head of household (HOH) filers \$16,100 single # The State and local tax deduction is limited to \$10,000 (\$5,000 MFS)

2025 TWO YEAR COMPARISON

JUANA SUAREZ CONDE
274-71-8323

Keep for Your Records
Difference

	2025	2024	
Filing status	Single		
INCOME:			
Wages, salaries, tips, etc.			
Interest income			
Ordinary dividend income			
IRA distributions and pension income			
Taxable social security income			
Capital gain or (loss) (Schedule D)			
Schedule 1 - Income			
Refunds of state and local taxes			
Alimony received			
Business income or (loss) (Schedule C)	7,250		7,250
Other gains or (losses) (Form 4797)			
Rental real estate, partnerships, estates, etc. (Schedule E)			
Farm income or (loss) (Schedule F)			
Unemployment compensation			
Other income			
Total income	7,250		7,250
ADJUSTMENTS:			
Schedule 1 - Adjustments			
Educator expenses			
Busn expenses for reservists, performing artists, etc			
Health savings account deduction			
Moving expenses			
Deductible part of self-employment tax	512		512
Self-employed SEP, SIMPLE and qualified plans deduction			
Self-employed health insurance			
Penalty on early withdrawal of savings			
Alimony paid			
IRA contributions			
Student loan interest deduction			
Archer MSA deduction			
Other adjustments			
Total adjustments	512		512
ADJUSTED GROSS INCOME:	6,738		6,738
DEDUCTIONS:			
Standard deduction or Itemized deductions	17,750		17,750
Charitable contributions if taking standard deduction	N/A		
If itemized, Schedule A deductions:			
Medical and dental expenses			
Sales, income, and other taxes paid	388		388
Interest paid			
Gifts to charity			
Casualty and theft losses			
Other miscellaneous deductions			
Qualified business income deduction			
Schedule 1-A Additional deductions			
Qualified tips deduction			
Qualified overtime compensation deduction			
Qualified passenger vehicle loan interest deduction			
Enhanced deduction for seniors	6,000		6,000
TAXABLE INCOME:			

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2025 TWO YEAR COMPARISON

JUANA SUAREZ CONDE
274-71-8323

Keep for Your Records

	2025	2024	Difference
TAX COMPUTATION (BEFORE CREDITS):			
Tax			
Tax calculation method	TABLE		
Schedule 2 - Taxes			
Additions to Tax			
Alternative minimum tax			
Total taxes			
Tax rate	10%	%	
CREDITS:			
Child and other dependents tax credit			
Schedule 3 - Non-Refundable Credits			
Foreign tax credit			
Child care credit			
Education credit			
Retirement savings contribution credit			
Other credits			
Total credits			
OTHER TAXES:			
Schedule 2 - Other Taxes			
Self-employment tax	1,024		1,024
Additional tax on IRAs			
Other taxes			
TOTAL TAXES:	1,024		1,024
PAYMENTS:			
Federal income tax withheld			
Estimated payments made			
Earned income credit			
Refundable child tax credit or additional child tax credit			
American opportunity credit			
Schedule 3 - Refundable Credits & Payments			
ACA premium tax credit			
Qualified sick and family leave credit			
Other payments			
Total payments			
AMOUNT DUE / REFUND:			
Amount overpaid			
Overpayment applied to next year			
Refund			
Amount due	1,024		1,024
Penalty			

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Tax Calculation Methods:

Sch D = Sch D tax worksheet
Sch J = Inc Aver for Farmer/Fisherman
FEITW = Foreign Earned Income Tax WS

QDCGTW = Qual Div Cap Gain Tax WS
F8615 = Child with unearned income

TCW = Tax Comp Worksheet (rates)
TABLE = Tax Table

Form 1040-SR U.S. Income Tax Return for Seniors 2025

For the year Jan. 1-Dec. 31, 2025, or other tax year beginning _____, 2025, ending _____, 20__ See separate instructions.

Filed pursuant to section 301.9100-2 [] Combat zone [] Deceased [] Spouse [] Other []

Your first name and middle initial: JUANA Last name: SUAREZ CONDE Your social security number: 274-71-8323

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

Home address (number and street): 207 Hattie St Apt. no.: 496

City, town, or post office: Miami State: TX ZIP code: 79059

Foreign country name: Foreign province/state/county: Foreign postal code: Presidential Election Campaign [] You [] Spouse

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

Digital Assets: At any time during 2025, 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)? [] Yes [X] No

Table with 5 columns: Dependents (see inst.), Dependent 1, Dependent 2, Dependent 3, Dependent 4. Rows include (1) First name, (2) Last name, (3) SSN, (4) Relationship, (5) Check if lived with you more than half of 2025, (6) Check if Full-time student/Permanently and totally disabled, (7) Credits.

[] Check if your filing status is MFS or HOH and you lived apart from your spouse for the last 6 months of 2025, or you are legally separated according to your state law under a written separation agreement or a decree of separate maintenance and you did not live in the same household as your spouse at the end of 2025.

Income table with rows 1a through 1z. 1a Total amount from Form(s) W-2, box 1. 1b Household employee wages not reported on Form(s) W-2. 1c Tip income not reported on line 1a. 1d Medicaid waiver payments not reported on Form(s) W-2. 1e Taxable dependent care benefits from Form 2441, line 26. 1f Employer-provided adoption benefits from Form 8839, line 31. 1g Wages from Form 8919, line 6. 1h Other earned income (see instructions). Enter type and amount. 1i Nontaxable combat pay election (see instructions). 1z Add lines 1a through 1h.

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form 1040-SR (2025) Created 9/5/25

Attach Sch. B if required.	2a Tax-exempt interest	2a	b Taxable interest	2b
	3a Qualified dividends	3a	b Ordinary dividends	3b
	c Check if your child's dividends are included in: 1 <input type="checkbox"/> Line 3a 2 <input type="checkbox"/> Line 3b			
	4a IRA distributions	4a	b Taxable amount	4b
	c Check if (see instructions): 1 <input type="checkbox"/> Rollover 2 <input type="checkbox"/> QCD 3 <input type="checkbox"/> _____			
	5a Pensions and annuities	5a	b Taxable amount	5b
	c Check if (see instructions): 1 <input type="checkbox"/> Rollover 2 <input type="checkbox"/> PSO 3 <input type="checkbox"/> _____			
	6a Social security benefits	6a	b Taxable amount	6b
	c If you elect to use the lump-sum election method, check here (see instructions) <input type="checkbox"/>			
	d If you are married filing separately and lived apart from your spouse the entire year (see inst.), check here <input type="checkbox"/>			
	7a Capital gain or (loss). Attach Schedule D if required			7a
	b Check if: <input type="checkbox"/> Schedule D not required			
	<input type="checkbox"/> Includes child's capital gain or (loss)			
	8 Additional income from Schedule 1, line 10		8	7,250
	9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7a, and 8. This is your total income		9	7,250
	10 Adjustments to income from Schedule 1, line 26		10	512
	11a Subtract line 10 from line 9. This is your adjusted gross income		11a	6,738
Tax and Credits	b Amount from line 11a (adjusted gross income)		11b	6,738
	12a Someone can claim <input type="checkbox"/> You as a dependent <input type="checkbox"/> Your spouse as a dependent b <input type="checkbox"/> Spouse itemizes on a separate return c <input type="checkbox"/> You were a dual-status alien d You: <input checked="" type="checkbox"/> Were born before January 2, 1961 <input type="checkbox"/> Are blind Spouse: <input type="checkbox"/> Was born before January 2, 1961 <input type="checkbox"/> Is blind			
Standard Deduction	e Standard deduction or itemized deductions (from Schedule A)			12e 17,750
See Standard Deduction Chart on the last page of this form.	13a Qualified business income deduction from Form 8995 or Form 8995-A		13a	
	b Additional deductions from Schedule 1-A, line 38		13b	6,000
	14 Add lines 12e, 13a, and 13b		14	23,750
	15 Subtract line 14 from line 11b. If zero or less, enter -0-. This is your taxable income		15	0
	16 Tax (see instructions). Check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form(s) 4972 3 <input type="checkbox"/> _____			16 0
	17 Amount from Schedule 2, line 3		17	
	18 Add lines 16 and 17		18	0
	19 Child tax credit or credit for other dependents from Schedule 8812		19	
	20 Amount from Schedule 3, line 8		20	
	21 Add lines 19 and 20		21	
	22 Subtract line 21 from line 18. If zero or less, enter -0-		22	0
	23 Other taxes, including self-employment tax, from Schedule 2, line 21		23	1,024
	24 Add lines 22 and 23. This is your total tax		24	1,024

Go to www.irs.gov/Form1040SR for instructions and the latest information.

Form 1040-SR (2025)

Payments and Refundable Credits	25 Federal income tax withheld from:		
	a Form(s) W-2	25a	
	b Form(s) 1099	25b	
	c Other forms (see instructions)	25c	
	d Add lines 25a through 25c		25d
26	2025 estimated tax payments and amount applied from 2024 return		26
	If you made estimated tax payments with your former spouse in 2025, enter their SSN (see instructions): _____		
	27a Earned income credit (EIC)	27a	
	b Clergy filing Schedule SE (see instructions)		<input type="checkbox"/>
	c If you do not want to claim the EIC, check here		<input checked="" type="checkbox"/>
28	Additional child tax credit (ACTC) from Schedule 8812. If you do not want to claim the ACTC, check here	28	<input type="checkbox"/>
29	American opportunity credit from Form 8863, line 8	29	
30	Refundable adoption credit from Form 8839, line 13	30	
31	Amount from Schedule 3, line 15	31	
32	Add lines 27a, 28, 29, 30, and 31. These are your total other payments and refundable credits		32
33	Add lines 25d, 26, and 32. These are your total payments		33
Refund	34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid .		34
	35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here		35a
	b Routing number XXXXXXXXXXXXXXXXXXXX	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
	d Account number XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
	36 Amount of line 34 you want applied to your 2026 estimated tax	36	
Amount You Owe	37 Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions		37 1,024
	38 Estimated tax penalty (see instructions)	38	

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

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

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

Your signature	Date	Your occupation House Cleaning	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. 7208390545 Email address michael.dombaugh@gmail.com

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

Go to www.irs.gov/Form1040SR for instructions and the latest information. Form **1040-SR** (2025)

Standard Deduction Chart*

Add the number of boxes checked on line 12d on page 2 1

IF your filing status is...	AND the number of boxes checked is...	THEN your standard deduction is...
Single	1	\$17,750
	2	19,750
Married filing jointly	1	\$33,100
	2	34,700
	3	36,300
	4	37,900
Qualifying surviving spouse	1	\$33,100
	2	34,700
Head of household	1	\$25,625
	2	27,625
Married filing separately**	1	\$17,350
	2	18,950
	3	20,550
	4	22,150

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*Don't use this chart if someone can claim you (or your spouse if filing jointly) as a dependent, your spouse itemizes on a separate return, or you were a dual-status alien. Instead, see instructions.

**You can check the boxes for your spouse if your filing status is married filing separately and your spouse had no income, isn't filing a return, and can't be claimed as a dependent on another person's return.

Go to www.irs.gov/Form1040SR for instructions and the latest information.

Form 1040-SR (2025)

DO NOT FILE

SCHEDULE 1

(Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2025

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

JUANA SUAREZ CONDE

Your social security number

274-71-8323

For 2025, enter the amount reported to you on Form(s) 1099-K that was included in error or for personal

items sold at a loss

Note: The remaining amounts reported to you on Form(s) 1099-K should be reported elsewhere on your return depending on the nature of the transaction. See www.irs.gov/1099k.

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions):		
3	Business income or (loss). Attach Schedule C	3	7,250
4	Other gains or (losses). Check if any from Form(s): <input type="checkbox"/> 4797 <input type="checkbox"/> 4684	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation. If you repaid a 2025 overpayment (see instructions), check here <input type="checkbox"/> and enter amount repaid:	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	
v	Digital assets received as ordinary income not reported elsewhere. See instructions	8v	
z	Other income. List type and amount:	8z	0
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	7,250

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

Schedule 1 (Form 1040) 2025 Created 7/25/25

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. If claiming only storage fees (see instructions), check here <input type="checkbox"/>		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	512
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
18	Penalty on early withdrawal of savings		18	
19a	Alimony paid		19a	
b	Recipient's SSN			
c	Date of original divorce or separation agreement (see instructions):			
20	IRA deduction. If you are married filing separately and lived apart from your spouse for the entire year (see instructions), check here <input type="checkbox"/>		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	512

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**SCHEDULE 1-A
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Additional Deductions

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

2025
Attachment
Sequence No. **1A**

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

Your social security number
274-71-8323

Part I Modified Adjusted Gross Income (MAGI) Amount

1	Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11b	1	6,738
2a	Enter any income from Puerto Rico that you excluded	2a	
b	Enter the amount from Form 2555, line 45	2b	
c	Enter the amount from Form 2555, line 50	2c	
d	Enter the amount from Form 4563, line 15	2d	
e	Add lines 2a, 2b, 2c, and 2d	2e	
3	Add lines 1 and 2e	3	6,738

Part II No Tax on Tips

Caution: Fill out Part II only if you received qualified tips. These tips must have been received in an occupation listed at IRS.gov/TippedOccupations. You and/or your spouse who received qualified tips must have a valid social security number to claim the deduction. If married, you must file jointly to claim this deduction. See instructions.

4	Qualified tips received as an employee. If you received tips as an employee with respect to employment with more than one employer, enter -0- on lines 4a and 4b and see the instructions to determine the amount to enter on line 4c. If you received tips as an employee in more than one occupation, see the instructions.		
a	Enter qualified tips included on Form W-2, box 7, but see the instructions if Form W-2, box 5 is more than \$176,100 or you received tips that are not subject to social security and Medicare taxes	4a	0
b	Qualified tips included on Form 4137, line 1, row A, column (c). If Form 4137 is not filed, enter -0-	4b	0
c	If you only received qualified tips as an employee with respect to employment with one employer, enter the larger of line 4a or line 4b. Otherwise, see the instructions to determine the amount to enter on line 4c. If you received tips as an employee in more than one occupation, see the instructions	4c	
5	Qualified tips received in the course of a trade or business. Qualified tip amount included in Form 1099-NEC, box 1; Form 1099-MISC, box 3; or Form 1099-K, box 1a. Do not enter more than the net profit from the trade or business. If you received qualified tips in the course of more than one trade or business or in more than one occupation, see instructions	5	
6	Add lines 4c and 5	6	
7	Enter the smaller of the amount on line 6 or \$25,000	7	
8	Enter the amount from line 3	8	
9	Enter \$150,000 (\$300,000 if married filing jointly)	9	
10	Subtract line 9 from line 8. If zero or less, enter the amount from line 7 on line 13	10	
11	Divide line 10 by \$1,000. If the resulting number isn't a whole number, decrease the result to the next lower whole number. (For example, decrease 1.5 to 1, and decrease 0.05 to 0.)	11	
12	Multiply line 11 by \$100	12	
13	Qualified tips deduction. Subtract line 12 from line 7. If zero or less, enter -0-	13	0

Part III No Tax on Overtime

Caution: Fill out Part III only if you received qualified overtime compensation. You and/or your spouse who received the qualified overtime compensation must have a valid social security number to claim this deduction. If married, you must file jointly to claim this deduction. See instructions.

14a	Qualified overtime compensation included in Form W-2, box 1. If you received qualified overtime compensation not reported on Form W-2, box 1, see instructions	14a	
b	Qualified overtime compensation included in Form 1099-NEC, box 1, or Form 1099-MISC, box 3 (see instructions)	14b	
c	Add lines 14a and 14b	14c	
15	Enter the smaller of the amount on line 14c or \$12,500 (\$25,000 if married filing jointly)	15	
16	Enter the amount from line 3	16	
17	Enter \$150,000 (\$300,000 if married filing jointly)	17	
18	Subtract line 17 from line 16. If zero or less, enter the amount from line 15 on line 21	18	
19	Divide line 18 by \$1,000. If the resulting number isn't a whole number, decrease the result to the next lower whole number. (For example, decrease 1.5 to 1, and decrease 0.05 to 0.)	19	
20	Multiply line 19 by \$100	20	
21	Qualified overtime compensation deduction. Subtract line 20 from line 15. If zero or less, enter -0-	21	0

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

Schedule 1-A (Form 1040) 2025 Created 11/4/25

Part IV No Tax on Car Loan Interest

Caution: Fill out Part IV only if you, or your spouse if married filing jointly, paid or accrued qualified passenger vehicle loan interest (QPVLI). Column (iii) is the total QPVLI paid in 2025 less the amounts reported in column (ii). See instructions.

22	Applicable passenger vehicle (see instructions). If more than two VINs, see instructions.	Interest for this loan:	
		(ii) Deducted on Schedule C, Schedule E, or Schedule F	(iii) Schedule 1-A
	(i) Vehicle identification number (VIN)		
a			
b			
23	Add lines 22a and 22b, column (iii)	23	
24	Enter the smaller of the amount on line 23 or \$10,000	24	
25	Enter the amount from line 3	25	
26	Enter \$100,000 (\$200,000 if married filing jointly)	26	
27	Subtract line 26 from line 25. If zero or less, enter the amount from line 24 on line 30	27	
28	Divide line 27 by \$1,000. If the resulting number isn't a whole number, increase the result to the next higher whole number. (For example, increase 1.5 to 2, and increase 0.05 to 1.)	28	
29	Multiply line 28 by \$200	29	
30	Qualified passenger vehicle loan interest deduction. Subtract line 29 from line 24. If zero or less, enter -0-	30	0

Part V Enhanced Deduction for Seniors

Caution: You and/or your spouse must have a valid social security number. If married, you must file jointly to claim this deduction. See instructions.

31	Enter the amount from line 3	31	6,738
32	Enter \$75,000 (\$150,000 if married filing jointly)	32	75,000
33	Subtract line 32 from line 31. If zero or less, enter \$6,000 on line 35	33	
34	Multiply line 33 by 6% (0.06)	34	
35	Subtract line 34 from \$6,000. If zero or less, enter -0-	35	6,000
36a	If you have a valid social security number (see instructions) and were born before January 2, 1961, enter the amount from line 35	36a	6,000
36b	If you are married filing jointly, your spouse has a valid social security number (see instructions), and your spouse was born before January 2, 1961, enter the amount from line 35	36b	
37	Enhanced deduction for seniors. Add lines 36a and 36b	37	6,000

Part VI Total Additional Deductions

38	Add lines 13, 21, 30, and 37. Enter here and on Form 1040 or 1040-SR, line 13b, or on Form 1040-NR, line 13c	38	6,000
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SCHEDULE 2
(Form 1040)

Additional Taxes

OMB No. 1545-0074

2025

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.

Attachment
Sequence No. **02**

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

Your social security number
274-71-8323

Part I Tax

1	Additions to tax:		
a	Excess advance premium tax credit repayment. Attach Form 8962	1a	
b	Repayment of new clean vehicle credits(s) transferred to a registered dealer from Schedule A (Form 8936), Part II. Attach Form 8936 and Schedule A (Form 8936)	1b	
c	Repayment of previously owned clean vehicle credit(s) transferred to a registered dealer from Schedule A (Form 8936), Part IV. Attach Form 8936 and Schedule A (Form 8936)	1c	
d	Recapture of net EPE from Form 4255, line 2a, column (I)	1d	
e	Excessive payments (EPs) on gross EPE from Form 4255. Check applicable box and enter amount. See instructions.		
	(i) <input type="checkbox"/> Line 1a (ii) <input type="checkbox"/> Line 1c		
	(iii) <input type="checkbox"/> Line 1d (iv) <input type="checkbox"/> Line 2a	1e	
f	20% EP from Form 4255. Check applicable box and enter amount. See instructions.		
	(i) <input type="checkbox"/> Line 1a (ii) <input type="checkbox"/> Line 1c		
	(iii) <input type="checkbox"/> Line 1d (iv) <input type="checkbox"/> Line 2a	1f	
y	Other additions to tax (see instructions):	1y	
z	Add lines 1a through 1y		1z
2	Alternative minimum tax. Attach Form 6251		2
3	Add lines 1z and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17		3

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE. Check if any exemption from (see instructions):		
	1 <input type="checkbox"/> 4361 2 <input type="checkbox"/> 4029 3 <input type="checkbox"/>	4	1,024
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	Reserved for future use	10	
11	Additional Medicare Tax. Attach Form 8959	11	
12	Net investment income tax. Attach Form 8960	12	
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) 2025 Created 5/8/25

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	Recapture of net EPE from Form 4255, line 1d, column (l)		19
20	Section 965 net tax liability installment from Form 965-A	20	
21	Add lines 4, 7 through 16, 18, and 19. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23; or Form 1040-NR, line 23b		21

1,024

1
SCHEDULE C
(Form 1040)

Profit or Loss From Business
(Sole Proprietorship)

OMB No. 1545-0074

2025
Attachment
Sequence No. **09**

Department of the Treasury
Internal Revenue Service

Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065.
Go to www.irs.gov/ScheduleC for instructions and the latest information.

Name of proprietor <u>JUANA SUAREZ CONDE</u>	Social security number (SSN) <u>274-71-8323</u>
A Principal business or profession, including product or service (see instructions) <u>Janitorial Services</u>	B Enter code from instructions <u>561720</u>
C Business name. If no separate business name, leave blank. <u>Juana Suarez Conde</u>	D Employer ID no. (EIN) (see instr.)
E Business address (including suite or room no.) <u>207 Hattie St</u> City, town or post office, state, and ZIP code <u>MIAMI, TX 79059</u>	
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify)	
G Did you "materially participate" in the operation of this business during 2025? If "No," see instructions for limit on losses	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
H If you started or acquired this business during 2025, check here	
I Did you make any payments in 2025 that would require you to file Form(s) 1099? See instructions	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
J If "Yes," did you or will you file required Form(s) 1099?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked <input type="checkbox"/>	1	7,250
2 Returns and allowances	2	
3 Subtract line 2 from line 1	3	7,250
4 Cost of goods sold (from line 42)	4	
5 Gross profit. Subtract line 4 from line 3	5	7,250
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7 Gross income. Add lines 5 and 6	7	7,250

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

8 Advertising	8		18 Office expense (see instructions)	18	
9 Car and truck expenses (see instructions)	9		19 Pension & profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	
13 Depreciation and section 179 expense deduction (not included in Part III) (see instr.)	13		21 Repairs and maintenance	21	
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15		23 Taxes and licenses	23	
16 Interest (see instructions):			24 Travel and meals:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	
b Other	16b		b Deductible meals (see instr.)	24b	
17 Legal and professional services	17		25 Utilities	25	
28 Total expenses before expenses for business use of home. Add lines 8 through 27b	28		26 Wages (less employment credits)	26	
29 Tentative profit or (loss). Subtract line 28 from line 7	29	7,250	27a Energy efficient commercial bldgs deduction (attach Form 7205)	27a	
30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. Simplified method filers only: Enter the total square footage of (a) your home: _____ and (b) the part of your home used for business: _____. Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30		27b Other expenses (from line 48)	27b	
31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3 , and on Schedule SE, line 2 . (If you checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3 . • If a loss, you must go to line 32.	31	7,250			
32 If you have a loss, check the box that describes your investment in this activity. See instructions. • If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3 , and on Schedule SE, line 2 . (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on Form 1041, line 3 . • If you checked 32b, you must attach Form 6198 . Your loss may be limited.	32a		32a <input type="checkbox"/> All investment is at risk.		
	32b		32b <input type="checkbox"/> Some investment is not at risk.		

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule C (Form 1040) 2025 Created 4/3/25

**SCHEDULE SE
(Form 1040)**

Self-Employment Tax

OMB No. 1545-0074

2025
Attachment
Sequence No. **17**

Department of the Treasury
Internal Revenue Service

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

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

Name of person with self-employment income (as shown on Form 1040, 1040-SR, 1040-SS, or 1040-NR) **JUANA SUAREZ CONDE** Social security number of person with self-employment income **274-71-8323**

Part I Self-Employment Tax

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

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

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

1a Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. **1a**

b If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code AQ **1b** ()

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

2 Net profit or (loss) from Schedule C, line 31; and Schedule K-1 (Form 1065), box 14, code A (other than farming). See instructions for other income to report or if you are a minister or member of a religious order **2** 7,250

3 Combine lines 1a, 1b, and 2 **3** 7,250

4a If line 3 is more than zero, multiply line 3 by 92.35% (0.9235). Otherwise, enter amount from line 3 **4a** 6,695

Note: If line 4a is less than \$400 due to Conservation Reserve Program payments on line 1b, see instructions.

b If you elect one or both of the optional methods, enter the total of lines 15 and 17 here **4b**

c Combine lines 4a and 4b. If less than \$400, **stop**; you don't owe self-employment tax. **Exception:** If less than \$400 and you had **church employee income**, enter -0- and continue **4c** 6,695

5a Enter your **church employee income** from Form W-2. See instructions for definition of church employee income. **5a**

b Multiply line 5a by 92.35% (0.9235). If less than \$100, enter -0- **5b** 0

6 Add lines 4c and 5b **6** 6,695

7 Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2025 **7** \$176,100

8a Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$176,100 or more, skip lines 8b through 10, and go to line 11. **8a**

b Unreported tips subject to social security tax from Form 4137, line 10 **8b**

c Wages subject to social security tax from Form 8919, line 10 **8c**

d Add lines 8a, 8b, and 8c **8d**

9 Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11 **9** 176,100

10 Multiply the **smaller** of line 6 or line 9 by 12.4% (0.124) **10** 830

11 Multiply line 6 by 2.9% (0.029) **11** 194

12 Self-employment tax. Add lines 10 and 11. Enter here and on **Schedule 2 (Form 1040), line 4, or Form 1040-SS, Part I, line 3.** **12** 1,024

13 Deduction for one-half of self-employment tax. Multiply line 12 by 50% (0.50). Enter here and on **Schedule 1 (Form 1040), line 15.** **13** 512

For Paperwork Reduction Act Notice, see your tax return instructions. Schedule SE (Form 1040) 2025 Created 5/7/25

2025 MISCELLANEOUS/NEC INCOME SUMMARY ATTACHMENT

JUANA SUAREZ CONDE
274-71-8323

Payer Name	Payer's Federal ID Number	T or S	Form	Activity	Rent (Box 1)	Royalties (Box 2)	Other Income (Box 3)	NonEmp Comp (NEC Box 1)	Federal Tax Withheld (Box 4)	State	State Income (Box 18)	State Tax Withheld (Box 16)
Various		T	MISC	SchC			7,250					

CLIENT COPY

DO NOT FILE

TOTAL

7,250

A voucher is printed at the bottom of this page.

NOTE: This is a new scannable voucher approved by the IRS for filing of the 1040-V for the year 2025. This is different than the voucher that is on the IRS website.

CLIENT COPY

- ▶ Use this voucher when making a payment with Form 1040.
- ▶ Do not staple this voucher or your payment to Form 1040.
- ▶ Make your check or money order payable to the "United States Treasury".
- ▶ Write your Social Security Number (SSN) on your check or money order.

Mail payment to:

INTERNAL REVENUE SERVICE
P O Box 1214
Charlotte, NC 28201-1214

DO NOT FILE

Separate here and mail with your payment and return.

Department of the Treasury Internal Revenue Service	2025 OMB No. 1545-0074	Form 1040-V Payment Voucher
▶ Use Form 1040-V when paying the balance due on Form 1040, Form 1040A, 1040EZ, or 1040NR. ▶ Enter your SSN on your check or money order. ▶ If your name, address, or SSN is incorrect, see instructions.		Amount you are paying by check or money order. Make your check or money order payable to "United States Treasury"
		Dollars 1,024

1729

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



JUANA SUAREZ CONDE
207 Hattie St 496
Miami, TX 79059

INTERNAL REVENUE SERVICE
P O Box 1214
Charlotte, NC 28201-1214

2025 QUALIFIED BUSINESS INCOME DEDUCTION WORKSHEET
DETAIL BY BUSINESS

JUANA SUAREZ CONDE

274-71-8323

Schedule/Form SchC # 1
Business Name Juana Su
EIN/SSN 274-71-8323
Business Type Non-Spec
Included in Aggregation #
PTP Income No

Qualified Business Income (QBI)

1. Specified Business Income/Loss from Sch/Form
2. Non-Specified Business Income/Loss from Sch/Form 7250
Less applicable adjustments from 1040 Schedule 1 & 1A
(includes SE Tax, SEHIN, Qual Retirement plans & qualified
Tips deductions) -512
3. QBID Qualified Losses and ST Gains from Asset Disposition
4. Net Qualified Business Income (QBI) (sum L1 - L3) 6738

Qualified Other Income (QOI)

5. Qualified REIT Sec 199A Dividends from 1099-DIV and K-1s
6. Qualified Other Income from PTPs
7. QOI Qualified Losses and ST Gains from Disposition incl Sale of PTP
8. Net Qualified Other Income (QOI) (L5 + L6 + L7)
9. Net QBI and QOI (L4 + L8) 6738

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DO NOT FILE

2026 CARRYFORWARD INFORMATION

JUANA SUAREZ CONDE
274-71-8323

Keep for Your Records

Itemized Returns Only – 2025 state and local tax refund (this amount will be proforma'd to

Taxable Refund Worksheet directly and may not be taxable in 2026)

Charitable contributions carryover to 2026	
Estimated short-term capital loss carryover	
Estimated long-term capital loss carryover	
2025 tax liability (for 2026 Form 2210 purposes)	1,024
Form 8839: 2025 carryover of unqualified expenses	
Refund amount applied to 2026	
Disallowed investment interest in 2025	
Additional state taxes paid	
Form 8396: Mortgage interest credit from 2023	
Mortgage interest credit from 2024	
Mortgage interest credit from 2025	
Form 8801: Minimum tax credit carryforward	0
Foreign Tax Credit carryforward to 2026	
General Business Credit carryforward to 2026	
Potential 2026 IRA contribution from 2025 tax refund	
NOL carryforward:	

Regular Tax		AMT Tax	
from 2005	from 2015	from 2005	from 2015
from 2006	from 2016	from 2006	from 2016
from 2007	from 2017	from 2007	from 2017
from 2008	from 2018	from 2008	from 2018
from 2009	from 2019	from 2009	from 2019
from 2010	from 2020	from 2010	from 2020
from 2011	from 2021	from 2011	from 2021
from 2012	from 2022	from 2012	from 2022
from 2013	from 2023	from 2013	from 2023
from 2014	from 2024	from 2014	from 2024
Gross NOL generated in 2025		* Gross AMT NOL generated in 2025	*
To be absorbed in carryback period		To be absorbed in carryback period	
Net carryforward from 2025		Net carryforward from 2025	
Total carryforward to 2026		* Total carryforward to 2026	*

- Amounts from Schedule E (Pages 1 and/or 2) that are eligible for carryforward to the next tax year are reported on Form 8582. Any associated Alternative Minimum Tax (AMT) carryforward amounts are reflected on the AMT version of Form 8582.
- If there are Form(s) 6252 in this tax return, the gross profit ratio and prior payments received (including the current year payments) will carry forward from each Form 6252.
- Gross NOL generated in CY and Total carryforward to NY includes the excess business loss from Form 461, line 16.