

General Information

Name: Hon Steven J Levin

CONFIDENTIAL**PID 43610****AGENCY INFORMATION**

Organization	Suborganization	Title
Judicial Circuit (19Th)	Elected Constitutional Officer	Circuit Judge

CANDIDATE FOR

Position	Agency Name	Position sought or held
Circuit Judge	19th Judicial Circuit	Circuit Court Judge, Group 7

Net WorthMy Net Worth as of December 31, 2025 was \$ 18,218,738.87.

Assets

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use.

The aggregate value of my household goods and personal effect is \$ 70,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Real Estate approximately 1.5 acres and structure and approximately 2800 sq ft structure	\$ 2,600,000.00
vehicles	\$ 65,000.00
stocks; cash; ;securities at Morgan Stanley, Merrill, Bank of America (excluding children accounts);Seacoast; Lincoln; DROP; Prudential	\$ 15,483,738.87

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2025 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☒ I elect to file a copy of my 2025 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
See Attached		

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
See Attached			

Interests in Specified Businesses**Business Entity # 1**

N/A

Training

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Steven J Levin

Digitally signed: 04/11/2026

Filed with COE: 04/11/2026

Form	1040 Department of the Treasury—Internal Revenue Service	2025	OMB No. 1545-0074	IRS Use Only—Do not write or staple in this space.
U.S. Individual Income Tax Return				
For the year Jan. 1–Dec. 31, 2025, or other tax year beginning 2025, ending 2025, See separate instructions.				
Filed pursuant to section 301.9100-2		Combat zone		Deceased
Other				Spouse

Your first name and middle initial STEVEN	Last name LEVIN	Your social security number [REDACTED]
If joint return, spouse's first name and middle initial [REDACTED]	Last name [REDACTED]	Spouse's social security number [REDACTED]
Home address (number and street). If you have a P.O. box, see instructions. [REDACTED]		Apt. no. [REDACTED]
City, town, or post office. If you have a foreign address, also complete spaces below. State [REDACTED]		ZIP code [REDACTED]
Foreign country name [REDACTED]	Foreign province/state/county [REDACTED]	Foreign postal code [REDACTED]

Filing Status

Check only one box.

☒ Single

☒ Married filing jointly (even if only one had income)

☐ Married filing separately (MFS). Enter spouse's SSN above and full name here: _____

☐ Head of household (HOH)

☐ Qualifying surviving spouse (QSS)

If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____

☐ If treating a nonresident alien or dual-status alien spouse as a U.S. resident for the entire year, check the box and enter their name (see instructions and attach statement if required): _____

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)? (See instructions.) ... ☐ Yes ☒ No

Dependents	Dependent 1	Dependent 2	Dependent 3	Dependent 4
(1) First name				
(2) Last name				
(3) SSN				
(4) Relationship				
(5) Check if lived with you more than half of 2025	(a) ☐ Yes (b) ☐ And in the U.S.	(a) ☐ Yes (b) ☐ And in the U.S.	(a) ☐ Yes (b) ☐ And in the U.S.	(a) ☐ Yes (b) ☐ And in the U.S.
(6) Check if	☐ Full-time student ☐ Permanently and totally disabled	☐ Full-time student ☐ Permanently and totally disabled	☐ Full-time student ☐ Permanently and totally disabled	☐ Full-time student ☐ Permanently and totally disabled
(7) Credits	☐ Child tax credit ☐ Credit for other dependents	☐ Child tax credit ☐ Credit for other dependents	☐ Child tax credit ☐ Credit for other dependents	☐ Child tax credit ☐ Credit for other dependents

☐ 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	1a Total amount from Form(s) W-2, box 1 (see instructions) 193,507 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 31 1f g Wages from Form 8919, line 6 1g h Other earned income (see instructions). Enter type and amount: 1h i Nontaxable combat pay election (see instructions) 1i z Add lines 1a through 1h 1z 193,507	
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.	2a Tax-exempt interest 5,803	2b Taxable interest 10,429
	3a Qualified dividends 51,811	3b Ordinary dividends 117,238
	c Check if your child's dividends are included in 1 ☐ Line 3a 2 ☐ Line 3b	
	4a IRA distributions 4a	b Taxable amount 4b
	c Check if (see instructions) 1 ☐ Rollover 2 ☐ QCD 3 ☐	
	5a Pensions and annuities 5a	b Taxable amount 5b
	c Check if (see instructions) 1 ☐ Rollover 2 ☐ PSO 3 ☐	
	6a Soc. sec. ben. 6a	b Taxable amount 6b
	c If you elect to use the lump-sum election method, check here (see instructions) ☐	
	d If you are married filing separately and lived apart from your spouse the entire year (see inst.), check here ☐	
7a Capital gain or (loss). Attach Schedule D if required 7a 49,956		
b Check if: ☐ Schedule D not required ☐ Includes child's capital gain or (loss)		
8 Additional income from Schedule 1, line 10 8 107		
9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7a, and 8. This is your total income 9 371,237		
10 Adjustments to income from Schedule 1, line 26 10 0		
11a Subtract line 10 from line 9. This is your adjusted gross income 11a 371,237		

Tax and Credits

- 11b Amount from line 11a (adjusted gross income) 11b 371,237
- 12a Someone can claim ☐ You as a dependent ☐ Your spouse as a dependent
- b ☐ Spouse itemizes on a separate return c ☐ You were a dual-status alien
- d You: ☒ Were born before January 2, 1961 ☐ Are blind
- Spouse: ☒ Was born before January 2, 1961 ☐ Is blind

Standard Deduction for -

- Single or Married filing separately, \$15,750
- Married filing jointly or Qualifying surviving spouse, \$31,500
- Head of household, \$23,825
- If you checked a box on line 12a, 12b, 12c, or 12d, see instr.

e Standard deduction or itemized deductions (from Schedule A)

13a Qualified business income deduction from Form 8995 or Form 8995-A

b Additional deductions from Schedule 1-A, line 38

14 Add lines 12e, 13a, and 13b

15 Subtract line 14 from line 11b. If zero or less, enter -0-. This is your **taxable income**16 **Tax** (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 49723 ☐

17 Amount from Schedule 2, line 3

18 Add lines 16 and 17

19 Child tax credit or credit for other dependents from Schedule 8812

20 Amount from Schedule 3, line 8

21 Add lines 19 and 20

22 Subtract line 21 from line 18. If zero or less, enter -0-

23 Other taxes, including self-employment tax, from Schedule 2, line 21

24 Add lines 22 and 23. This is your **total tax****Payments and Refundable Credits**

25 Federal income tax withheld from:

a Form(s) W-2 25 29,238

b Form(s) 1099 25b

c Other forms (see instructions) 25c

d Add lines 25a through 25c 25d 29,238

26 2025 estimated tax payments and amount applied from 2024 return 26 64,000

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)

c If you do not want to claim the EIC, check here ☐28 Additional child tax credit (ACTC) from Schedule 8812. If you do not want to claim the ACTC, check here ☐

29 American opportunity credit from Form 8863, line 9 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** 3233 Add lines 25d, 26, and 32. These are your **total payments** 33 93,238**Refund**34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid** 34 32,08235a Amount of line 34 you want **refunded to you**. If Form 8888 is attached, check here ☐Direct deposit?
See instructions.

b Routing number

c Type: ☐ Checking ☐ Savings

d Account number

36 Amount of line 34 you want **applied to your 2026 estimated tax** 36 32,082**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

38 Estimated tax penalty (see instructions) 38

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

Designee's name

Phone no.

Personal identification number (PIN)

Sign Here

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

Your signature

Date

Your occupation

If the IRS sent you an Identity Protection PIN, enter it here (see instr.)

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

Phone no.

Email address

Paid

Preparer's name

Preparer's signature

Date

PTIN

Check if:

Preparer

Firm's name

Phone

Use Only

Firm's address

Firm's EIN

SCHEDULE 1
(Form 1040)Department of the Treasury
Internal Revenue Service**Additional Income and Adjustments to Income**

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

2025Attachment
Sequence No. **01**

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

Your social security number

STEVEN **LEVIN**

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	
4	Other gains or (losses). Check if any from Form(s): ☐ 4797 ☐ 4684	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	0
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation. If you repaid a 2025 overpayment (see instructions), check here 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 ABLE 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: MORGAN STANLEY	8z	107
9	Total other income. Add lines 8a through 8z	9	107
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	107

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

Schedule 1 (Form 1040) 2025

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

2025Attachment
Sequence No. **02**

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

Your social security number

STEVEN **LEVIN****Part I Tax****1** Additions to tax:

- a** Excess advance premium tax credit repayment. Attach Form 8962
- b** Repayment of new clean vehicle credit(s) transferred to a registered dealer from Schedule A (Form 8936), Part II. Attach Form 8936 and Schedule A (Form 8936)
- 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)
- d** Recapture of net EPE from Form 4255, line 2a, column (i)
- e** Excessive payments (EPs) on gross EPE from Form 4255. Check applicable box and enter amount. See instructions.
 (i) ☐ Line 1a (ii) ☐ Line 1c
 (iii) ☐ Line 1d (iv) ☐ Line 2a
- f** 20% EP from Form 4255. Check applicable box and enter amount. See instructions.
 (i) ☐ Line 1a (ii) ☐ Line 1c
 (iii) ☐ Line 1d (iv) ☐ Line 2a
- y** Other additions to tax (see instructions):
- z** Add lines 1a through 1y

1a

1b

1c

1d

1e

1f

1y

1z

2

3

2 Alternative minimum tax. Attach Form 6251**3** Add lines 1z and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17.**Part II Other Taxes****4** Self-employment tax. Attach Schedule SE. Check if any exemption from tax (see instructions):1 ☐ 4361 2 ☐ 4029 3 ☐**5** Social security and Medicare tax on unreported tip income. Attach Form 4137**6** Uncollected social security and Medicare tax on wages. Attach Form 8919**7** Total additional social security and Medicare tax. Add lines 5 and 6**8** Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.
If not required, check here ☐**9** Household employment taxes. Attach Schedule H**10** Reserved for future use**11** Additional Medicare Tax. Attach Form 8959**12** Net investment income tax. Attach Form 8960**13** Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12**14** Interest on tax due on installment income from the sale of certain residential lots and timeshares**15** Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000**16** Recapture of low-income housing credit. Attach Form 8611

(continued on page 2)

Schedule 2 (Form 1040) 2025

STEVEN [REDACTED] LEVIN [REDACTED]

Schedule 2 (Form 1040) 2025

Page **2****Part II Other Taxes** (continued)**17** Other additional taxes:**a** Recapture of other credits. List type, form number, and amount:

17a

b Recapture of federal mortgage subsidy. If you sold your home, see instructions

17b

c Additional tax on HSA distributions. Attach Form 8889

17c

d Additional tax on an HSA because you didn't remain an eligible individual.
Attach Form 8889

17d

e Additional tax on Archer MSA distributions. Attach Form 8853

17e

f Additional tax on Medicare Advantage MSA distributions. Attach Form 8853

17f

g Recapture of a charitable contribution deduction related to a fractional interest
in tangible personal property

17g

h Income you received from a nonqualified deferred compensation plan that fails
to meet the requirements of section 409A

17h

i Compensation you received from a nonqualified deferred compensation plan
described in section 457A

17i

j Section 72(m)(5) excess benefits tax

17j

k Golden parachute payments

17k

l Tax on accumulation distribution of trusts

17l

m Excise tax on insider stock compensation from an expatriated corporation

17m

n Look-back interest under section 167(g) or 460(b) from Form 8697 or 8881

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 (I)

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

4,607

Schedule 2 (Form 1040) 2025

SCHEDULE 3
(Form 1040)Department of the Treasury
Internal Revenue Service**Additional Credits and Payments**

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

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

OMB No. 1545-0074

2025Attachment
Sequence No. **03**

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

Your social security number

STEVEN LEVIN**Part I Nonrefundable Credits**

1	Foreign tax credit. Attach Form 1116 if required	1	370
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	370

Part II Other Payments and Refundable Credits

9	Net premium tax credit. Attach Form 8962	9	
10	Amount paid with request for extension to file (see instructions)	10	
11	Excess social security and tier 1 RRTA tax withheld	11	
12	Credit for federal tax on fuels. Attach Form 4136	12	
13	Other payments or refundable credits:		
a	Form 2439	13a	
b	Section 1341 credit for repayment of amounts included in income from earlier years	13b	
c	Net elective payment election amount from Form 3800, Part III, line 6, column (j)	13c	
d	Deferred amount of net 965 tax liability (see instructions)	13d	
z	Other refundable credits (see instructions):		
		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	

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

Schedule 3 (Form 1040) 2025

Form **2210**Department of the Treasury
Internal Revenue Service

Name(s) shown on tax return

**Underpayment of Estimated Tax by
Individuals, Estates, and Trusts**

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

Go to www.irs.gov/Form2210 for instructions and the latest information.

OMB No. 1545-0074

2025Attachment
Sequence No. **06**

Identifying number

STEVEN **LEVIN****Do You Have To File Form 2210?**

Complete lines 1 through 7 below. Is line 4 or line 7 less than \$1,000?

Yes → **Don't file Form 2210. You don't owe a penalty.**

No → Complete lines 8 and 9 below. Is line 6 equal to or more than line 9?

Yes → **You don't owe a penalty. Don't file Form 2210 unless box E in Part II applies, then file page 1 of Form 2210.**

No → You may owe a penalty. Does any box in Part II below apply?

Yes → You must file Form 2210. Does box B, C, or D in Part II apply?

No → **You aren't required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III as a worksheet and enter your penalty amount on your tax return, but don't file Form 2210.**

Yes → **You must figure your penalty.**

You aren't required to figure your penalty because the IRS will figure it and send you a bill for any unpaid amount. If you want to figure it, you may use Part III as a worksheet and enter your penalty amount on your tax return, but file only page 1 of Form 2210.

Part I Required Annual Payment

1 Enter your 2025 tax after credits from Form 1040, 1040-SR, or 1040-NR, line 22. (See the instructions if not filing Form 1040.)	1	56,549
2 Other taxes, including self-employment tax and, if applicable, additional Medicare Tax and/or Net Investment Income Tax (see instructions)	2	4,607
3 Other payments and refundable credits (see instructions)	3	
4 Current year tax. Combine lines 1, 2, and 3. If less than \$1,000, stop; you don't owe a penalty.	4	61,156
5 Multiply line 4 by 90% (0.90)	5	55,040
6 Withholding taxes. Don't include estimated tax payments. See instructions	6	29,238
7 Subtract line 6 from line 4. If less than \$1,000, stop; you don't owe a penalty. Don't file Form 2210	7	31,918
8 Maximum required annual payment based on prior year's tax (see instructions)	8	97,574
9 Required annual payment. Enter the smaller of line 5 or line 8	9	55,040

Next: Is line 9 more than line 6?

- ☐ **No.** You don't owe a penalty. Don't file Form 2210 unless box E below applies.
- ☒ **Yes.** You may owe a penalty, but don't file Form 2210 unless one or more boxes in Part II below applies.
- If box B, C, or D applies, you must figure your penalty and file Form 2210.
 - If box A or E applies (but not B, C, or D), file only page 1 of Form 2210. You aren't required to figure your penalty; the IRS will figure it and send you a bill for any unpaid amount. If you want to figure your penalty, you may use Part III as a worksheet and enter your penalty on your tax return, but file only page 1 of Form 2210.

Part II Reasons for Filing. Check applicable boxes. If none apply, don't file Form 2210.

- A ☐ You request a **waiver** (see instructions) of your entire penalty. You must check this box and file page 1 of Form 2210, but you aren't required to figure your penalty.
- B ☐ You request a **waiver** (see instructions) of part of your penalty. You must figure your penalty and waiver amount and file Form 2210.
- C ☒ Your income varied during the year and your penalty is reduced or eliminated when figured using the **annualized income installment method**. You must figure the penalty using Schedule AI and file Form 2210.
- D ☐ Your penalty is lower when figured by treating the federal income tax withheld from your income as paid on the dates it was actually withheld, instead of in equal amounts on the payment due dates. You must figure your penalty and file Form 2210.
- E ☐ You filed or are filing a joint return for either 2024 or 2025, but not for both years, and line 8 above is smaller than line 5 above. You must file page 1 of Form 2210, but you aren't required to figure your penalty (unless box B, C, or D applies).

For Paperwork Reduction Act Notice, see separate instructions.

STEVEN [REDACTED] LEVIN [REDACTED]

Form 2210 (2025)

Page 2

Part III Penalty Computation (See the instructions if you're filing Form 1040-NR.)

Section A—Figure Your Underpayment		Payment Due Dates			
		(a) 4/15/25	(b) 6/15/25	(c) 9/15/25	(d) 1/15/26
10 Required installments. If box C in Part II applies, enter the amounts from Schedule AI, line 27. Otherwise, enter 25% (0.25) of line 9, Form 2210, in each column. For fiscal year filers, see instructions.	10	5,000	5,346	5,950	38,744
11 Estimated tax paid and tax withheld (see the instructions). For column (a) only, also enter the amount from line 11 on line 15, column (a). If line 11 is equal to or more than line 10 for all payment periods, stop here; you don't owe a penalty. Don't file Form 2210 unless you checked a box in Part II.	11	7,310	23,310	23,310	39,308

Complete lines 12 through 18 of one column before going to line 12 of the next column.

12 Enter the amount, if any, from line 18 in the previous column.	12		2,310	20,274	37,634
13 Add lines 11 and 12.	13		25,620	43,584	76,942
14 Add the amounts on lines 16 and 17 in the previous column.	14				
15 Subtract line 14 from line 13. If zero or less, enter -0-. For column (a) only, enter the amount from line 11.	15	7,310	25,620	43,584	76,942
16 If line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-.	16		0	0	
17 Underpayment. If line 10 is equal to or more than line 15, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18.	17				
18 Overpayment. If line 15 is more than line 10, subtract line 10 from line 15. Then go to line 12 of the next column.	18	2,310	20,274	37,634	

Section B—Figure the Penalty (Use the Worksheet for Form 2210, Part III, Section B—Figure the Penalty in the instructions.)

19 Penalty. Enter the total penalty from line 14 of the Worksheet for Form 2210, Part III, Section B—Figure the Penalty. Include this amount on Form 1040, 1040-SR, or 1040-NR, line 28; or Form 1041, line 27.

Don't file Form 2210 unless you checked a box in Part II

19

Form 2210 (2025)

SCHEDULE A
(Form 1040)Department of the Treasury
Internal Revenue Service**Itemized Deductions**

Attach to Form 1040 or 1040-SR.

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

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

OMB No. 1545-0074

2025Attachment
Sequence No. **07**

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

STEVEN LEVIN

Your social security number

**Medical
and
Dental
Expenses**

Caution: Do not include expenses reimbursed or paid by others.

- 1 Medical and dental expenses (see instructions) **1**
- 2 Enter amount from Form 1040 or 1040-SR, line 11b **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 (SALT).
- a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box ☒ **5a** **5,343**
- b State and local real estate taxes (see instructions) **5b** **6,666**
- c State and local personal property taxes **5c**
- d Add lines 5a through 5c **5d** **12,009**
- e Enter the smaller of line 5d or \$40,000 (\$20,000 if married filing separately). If Form 1040 or 1040-SR, line 11b is more than \$500,000 (\$250,000 if married filing separately), or if you completed Form 2555, Form 4563, or excluded income from Puerto Rico, see instructions **5e** **12,009**
- 6 Other taxes. List type and amount: **6**

7 Add lines 5e and 6 **7** **12,009****Interest
You Paid**

Caution: Your mortgage interest deduction may be limited. See instructions.

- 8 Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box ☐
- a Home mortgage interest and points reported to you on Form 1098. See instructions if limited **8a**
- 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**
- 9 Investment interest. Attach Form 4952 if required. See instructions **9**

10 Add lines 8e and 9 **10****Gifts to
Charity**

Caution: If you made a gift and got a benefit for it, see instructions.

- 11 Gifts by cash or check. If you made any gift of \$250 or more, see instructions **11** **753**
- 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** **23,543**
- 13 Carryover from prior year **13**
- 14 Add lines 11 through 13 **14** **24,296**

**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 12e **17** **36,305**
- 18 If you elect to itemize deductions even though they are less than your standard deduction, check this box ☐ **18**

SCHEDULE B
(Form 1040)

Department of the Treasury
Internal Revenue Service

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

2025

Attachment
Sequence No. **08**

Name(s) shown on return

Your social security number

STEVEN [REDACTED] LEVIN

Part I
Interest

(See instructions
and the
Instructions for
Form 1040,
line 2b.)

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.

	Amount
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: MORGAN STANLEY - Acct [REDACTED] MERRILL LYNCH - Acct [REDACTED] [REDACTED] **-***-**** [REDACTED] **-***-****	3 6,490 1,968 1,968
2 Add the amounts on line 1	10,429
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	
4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b.	10,429

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

Part II
Ordinary Dividends

(See instructions
and the
Instructions for
Form 1040,
line 3b.)

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

5 List name of payer: PRUDENTIAL MORGAN STANLEY - Acct [REDACTED] MORGAN STANLEY - Acct [REDACTED] MERRILL LYNCH - Acct [REDACTED] [REDACTED] **-***-**** [REDACTED] **-***-****	848 36,797 8,027 41,362 15,102 15,102
6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b.	117,238

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

Part III
Foreign Accounts and Trusts

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.

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 instructions.

- 7a** At any time during 2025, 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.
- 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 2025, 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.

Yes	No
☐	☒
☐	☐
☐	☐
☐	☒

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

2025Attachment
Sequence No. 12

Name(s) shown on return

STEVEN LEVIN

Your social security number

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 or Form 1099-DA 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 or Box G checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B or Box H checked	3,418	3,418	0	0
3 Totals for all transactions reported on Form(s) 8949 with Box C or Box I 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	-154
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 the back.			7	-154

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 or Form 1099-DA 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 or Box J checked	137,660	92,479	0	45,181
9 Totals for all transactions reported on Form(s) 8949 with Box E or Box K checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F or Box L checked				
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			13	4,929
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 the back			15	50,110

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

Schedule D (Form 1040) 2025

STEVEN [REDACTED] LEVIN

Page **2**

Schedule D (Form 1040) 2025

Part III Summary

16 Combine lines 7 and 15 and enter the result..... • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7a. 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 7a. Then, go to line 22. 17 Are lines 15 and 16 both gains? ☒ Yes. Go to line 18. ☐ No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet..... 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..... 20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☒ 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. ☐ 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 7a, the smaller of: • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. ☐ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.	16 49,956 18 19 21 ()
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Schedule D (Form 1040) 2025

Form 8949 (2025)

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

Social security number or taxpayer identification number

STEVEN LEVIN

Before you check Box D, E, F, J, K, or L below, see whether you received any Form(s) 1099-B, Form(s) 1099-DA, or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B or Form 1099-DA. They 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 and Form(s) 1099-DA 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, F, J, K, or L 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 was not reported to the IRS
- ☐ (F) Long-term transactions, other than digital asset transactions, not reported to you on Form 1099-B or Form 1099-DA
- ☐ (J) Long-term transactions reported on Form(s) 1099-DA showing basis was reported to the IRS (see Note above)
- ☐ (K) Long-term transactions reported on Form(s) 1099-DA showing basis was not reported to the IRS
- ☐ (L) Long-term digital asset transactions not reported to you on Form 1099-DA or Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	(f) Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(g) Amount of adjustment	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
							(f) Code(s) from instructions		
	MORGAN STANLEY	Various	Various	137,610	92,445				45,165
	MORGAN STANLEY	Various	Various	50	34				16
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 or Box J above is checked), line 9 (if Box E or Box K (if Box E above is checked), or line 10 (if Box F or Box L above is checked)			137,660	92,479			0	45,181

Note: If you checked Box D or Box J 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.

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

Your social security number

STEVEN LEVIN

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

28	(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
A		P				
B		P				
C						
D						

Passive Income and Loss		Nonpassive Income and Loss	
(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss allowed (see Schedule K-1)	(j) Section 179 expense deduction from Form 4562
A	0		
B	0		
C			
D			
29a Totals			
b Totals			
30 Add columns (h) and (k) of line 29a		30	0
31 Add columns (g), (i), and (j) of line 29b		31	0
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31		32	0

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A		
B		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A	0		
B			
34a Totals			
b Totals			
35 Add columns (d) and (f) of line 34a		35	0
36 Add columns (c) and (e) of line 34b		36	0
37 Total estate and trust income or (loss). Combine lines 35 and 36		37	0

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

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5	41	
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AN; and Schedule K-1 (Form 1041), box 14, code F. See instructions	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

Form **8960**

Net Investment Income Tax— Individuals, Estates, and Trusts

Attach to your tax return.

OMB No. 1545-2227

2025Attachment
Sequence No. **72**Department of the Treasury
Internal Revenue ServiceGo to www.irs.gov/Form8960 for instructions and the latest information.

Name(s) shown on your tax return

Your social security number or EIN

STEVEN LEVIN**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	10,429
2	Ordinary dividends (see instructions)	2	117,238
3	Annuities (see instructions)	3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a	
4b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b	
4c	Combine lines 4a and 4b	4c	
5a	Net gain or loss from disposition of property (see instructions)	5a	49,956
5b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b	
5c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c	
5d	Combine lines 5a through 5c	5d	49,956
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)	6	
7	Other modifications to investment income (see instructions)	7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7	8	177,623

Part II Investment Expenses Allocable to Investment Income and Modifications

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

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	177,623
13	Modified adjusted gross income (see instructions)	13	371,237
14	Threshold based on filing status (see instructions)	14	250,000
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	121,237
16	Enter the smaller of line 12 or line 15	16	121,237
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	4,607
18a	Net investment income (line 12 above)	18a	
18b	Deductions for distributions of net investment income and charitable deductions (see instructions)	18b	
18c	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	
19b	Highest tax bracket for estates and trusts for the year (see instructions)	19b	
19c	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	

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

Form **8960** (2025)

Form **8283**

(Rev. December 2025)

Department of the Treasury
Internal Revenue Service**Noncash Charitable Contributions**Attach one or more Forms 8283 to your tax return if you claimed a total deduction
of over \$500 for all contributed property.Go to www.irs.gov/Form8283 for instructions and the latest information.

OMB No. 1545-0074

Attachment
Sequence No. **36**

Name(s) shown on your income tax return

STEVEN [REDACTED] LEVIN

Identifying number

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

Name:

Identifying number:

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

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

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

1	(a) Name and address of the donee organization	(b) If donated property is a vehicle (see instructions), check the box. Also enter the vehicle identification number (unless Form 1098-C is attached).	(c) Description and condition of donated property (For a vehicle, enter the year, make, model, and mileage. For securities and other property, see instructions.)
A	26 [REDACTED] MEMPHIS TN 38105	☐	8 SHARE CONSTELLATION BRANDS
B	UNIVERSITY OF [REDACTED] [REDACTED] CORAL GABLES FL 33124	☐	37 SHARES CONSTELLATION BRANDS
C	[REDACTED] STUART FL 34996	☐	11 SHARES CONSTELLATION BRANDS
D	BONE [REDACTED] FOUNDAT ARLINGTON AA 22202	☐	19 SHARES CONSTELLATION BRANDS

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	12/03/02	Various	Purchase	1,000	1,101	Sales
B	12/03/25	Various	Purchase	5,000	5,094	Sales
C	12/02/25	Various	Purchase	1,000	1,928	Sales
D	12/02/25	Various	Purchase	2,000	2,616	Sales

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)d ☐ Other real estatei ☐ Vehiclesb ☐ Qualified conservation contributione ☐ Equipmentj ☐ Clothing and household itemsb(1) ☐ Certified historic structuref ☐ Securitiesk ☐ Digital assets

NPS # _____

g ☐ Collectiblesl ☐ Otherc ☐ Art (contribution of less than \$20,000)h ☐ Intellectual property

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						

Form **8283**

(Rev. December 2025)

Department of the Treasury
Internal Revenue Service**Noncash Charitable Contributions**Attach one or more Forms 8283 to your tax return if you claimed a total deduction
of over \$500 for all contributed property.

OMB No. 1545-0074

Attachment
Sequence No. **36**Go to www.irs.gov/Form8283 for instructions and the latest information.

Name(s) shown on your income tax return

STEVEN [REDACTED] LEVIN

Identifying number

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

Name:

Identifying number:

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

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

1	(a) Name and address of the donee organization	(b) If donated property is a vehicle (see instructions), check the box. Also enter the vehicle identification number (unless Form 1098-C is attached).	(c) Description and condition of donated property (For a vehicle, enter the year, make, model, and mileage. For securities and other property, see instructions.)
A	[REDACTED] OLNEY MD 20830	☐	19 SHARES CONSTELLATION BRANDS
B	[REDACTED] WEST PALM BEACH FL 33401	☐	31 SHARES CONSTELLATION BRANDS
C	[REDACTED] TAMPA FL 33612	☐	97 SHARES CONSTELLATION BRANDS
D		☐	

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

	(d) Date of the contribution	(e) Date acquired by donor (mo., yr.)	(f) How acquired by donor	(g) Donor's cost or adjusted basis	(h) Fair market value (see instructions)	(i) Method used to determine the fair market value
A	12/02/25	Various	Purchase	2,000	2,616	Sales
B	12/02/25	Various	Purchase	5,000	5,094	Sales
C	12/02/25	Various	Purchase	5,000	5,094	Sales
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 contributionb(1) ☐ Certified historic structure

NPS # _____

c ☐ Art (contribution of less than \$20,000)d ☐ Other real estatee ☐ Equipmentf ☐ Securitiesg ☐ Collectiblesh ☐ Intellectual propertyi ☐ Vehiclesj ☐ Clothing and household itemsk ☐ Digital assetsl ☐ 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.

Form **8283** (Rev. 12-2025)

Form 1040	Partner's Basis Worksheet Page 1	2025
Name STEVEN LEVIN		Taxpayer Identification Number
Name of Entity		EIN
Passive Activity Type Other Passive		K1 Unit 1

Part 1 - Partners Basis

1. Adjusted basis at the beginning of tax year	1.	0
Section A - Increases		
2. Acquisitions of partnership interests and contributions of money and property	2.	905,913
3. Increase in liabilities	3.	
4a. Ordinary business income	4a.	
4b. Net rental real estate income	4b.	
4c. Other net rental income	4c.	
4d. Interest income	4d.	1,968
4e. Ordinary dividends	4e.	15,102
4f. Dividend equivalents	4f.	
4g. Royalties	4g.	
4h. Net short-term capital gain	4h.	
4i. Net long-term capital gain	4i.	
4j. Net section 1231 gain and ordinary business gains	4j.	
4k. Other income	4k.	
4l. Tax-exempt interest, other tax-exempt income, and recapture of credits	4l.	
4m. Other increases to basis	4m.	
4n. Business interest expense (BIE)	4n.	
4o. Total increases (add lines 4a through 4n)	4o.	17,070
5. Gain recognized on contributions of property during the year	5.	
6. Excess of deductions for depletion over basis of property (other than oil and gas)	6.	
7. Total basis before decreases (add lines 1, 2, 3, 4o, 5 and 6)	7.	922,983
Section B - Decreases		
8. Withdrawals, distributions of money, and the adjusted basis of distributed property		
8a. Cash and marketable securities distributed	8a.	
8b. Distributions subject to section 737	8b.	
8c. Other property distributed	8c.	
8d. Total distributions (add lines 8a through 8c)	8d.	
9a. Decrease in share of partnership liabilities	9a.	
9b. Partner's liabilities assumed by the partnership during the tax year	9b.	
9c. Decrease in liabilities (sum of lines 9a and 9b)	9c.	
10. Total distributions and decrease in liabilities (add lines 8d and 9c)	10.	0
11. Basis after distributions (line 7 less line 10)	11.	922,983
12. Nondeductible expenses. (See Partner's Basis Worksheet Page 2)	12.	0
13a. Oil and gas property depletion deduction up to adjusted basis of property	13a.	
13b. Other decreases	13b.	
13c. Total decreases other than distributions. Combine lines 12 to 13b.	13c.	
14. Basis after nondeductible expenses and depletion. (line 11 less line 13c)	14.	922,983
15. Total deductions and losses. (See Partner's Basis Worksheet Page 2)	15.	77
16. Allowable deductions and losses. (See Partner's Basis Worksheet Page 2)	16.	77
17. Unutilized EBIE on sale of partnership interest	17.	
18. Adjusted basis at the end of the year. (Subtract lines 16 and 17 from line 14. Do not enter less than zero)	18.	922,906

Gain Recognized on Distributions

19. Total distributions less other property distributions. (Line 10 less line 8c)	19.	
20. Total basis before decreases (line 7)	20.	
21. Gain recognized on excess distributions. (Subtract line 20 from line 19)	21.	
• Sch E page 2, ordinary income • Sch D/8949, short-term capital gain • Sch D/8949, long-term capital gain		
22. Gain recognized on disposition of section 737 property	22.	

Form 1040	Partner's Basis Worksheet Page 2	2025
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Name STEVEN LEVIN	Taxpayer Identification Number [REDACTED]
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Name of Entity [REDACTED]	K1 Unit 1
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Passive Activity Type **Other Passive**

Description	Suspended Amount	Current Year	Total Loss	Percent	Allowed loss and Deductions	Disallowed Loss Carryforward
12. Nondeductible expenses						
13. Depletion for oil and gas						
15. Ptrship losses and deductions						
Ordinary business loss						
Net rental real estate loss						
Other net rental loss						
Short-term capital loss		77	77	1.0000	77	
Long-term capital loss						
28% capital loss						
Section 1231 loss						
4797 - Ordinary loss						
Other portfolio loss						
1256 contracts/straddles						
Other losses - Sch E						
Other losses - 1040 Sch 1						
Section 179 expense						
Cash contributions						
Cash contributions (30%)						
Noncash contrib (50%)						
Noncash contrib (30%)						
Cap gain prop 50% (30%)						
Cap gain prop (20%)						
Portfolio deduct (other)						
Investment interest expense						
Deductions-royalty income						
Section 59(e)(2) expenditures						
Preproductive period exp.						
Reforestation expense ded.						
Foreign taxes						
Other deductions						
Total losses and deductions		77	77	1.0000	77	

Form 1040	Partner's Basis Worksheet Page 1	2025
Name [REDACTED]		Taxpayer Identification Number [REDACTED]
Name of Entity [REDACTED]		K1 Unit 2
Passive Activity Type Other Passive		

Part 1 - Partners Basis

1. Adjusted basis at the beginning of tax year,	1.	0
Section A - Increases		
2. Acquisitions of partnership interests and contributions of money and property	2.	905,912
3. Increase in liabilities	3.	
4a. Ordinary business income	4a.	
4b. Net rental real estate income	4b.	
4c. Other net rental income	4c.	
4d. Interest income	4d.	1,968
4e. Ordinary dividends	4e.	15,102
4f. Dividend equivalents	4f.	
4g. Royalties	4g.	
4h. Net short-term capital gain	4h.	
4i. Net long-term capital gain	4i.	
4j. Net section 1231 gain and ordinary business gains	4j.	
4k. Other income	4k.	
4l. Tax-exempt interest, other tax-exempt income, and recapture of credits	4l.	
4m. Other increases to basis	4m.	
4n. Business interest expense (BIE)	4n.	
4o. Total increases (add lines 4a through 4n)	4o.	17,070
5. Gain recognized on contributions of property during the year	5.	
6. Excess of deductions for depletion over basis of property (other than oil and gas)	6.	
7. Total basis before decreases (add lines 1,2,3, 4o, 5 and 6)	7.	922,982
Section B - Decreases		
8. Withdrawals, distributions of money, and the adjusted basis of distributed property		
8a. Cash and marketable securities distributed	8a.	
8b. Distributions subject to section 737	8b.	
8c. Other property distributed	8c.	
8d. Total distributions (add lines 8a through 8c)	8d.	
9a. Decrease in share of partnership liabilities	9a.	
9b. Partner's liabilities assumed by the partnership during the tax year	9b.	
9c. Decrease in liabilities (sum of lines 9a and 9b)	9c.	
10. Total distributions and decrease in liabilities (add lines 8d and 9c)	10.	0
11. Basis after distributions (line 7 less line 10)	11.	922,982
12. Nondeductible expenses. (See Partner's Basis Worksheet Page 2)	12.	0
13a. Oil and gas property depletion deduction up to adjusted basis of property	13a.	
13b. Other decreases	13b.	
13c. Total decreases other than distributions. Combine lines 12 to 13b.	13c.	
14. Basis after nondeductible expenses and depletion. (line 11 less line 13c)	14.	922,982
15. Total deductions and losses. (See Partner's Basis Worksheet Page 2)	15.	77
16. Allowable deductions and losses. (See Partner's Basis Worksheet Page 2)	16.	77
17. Unutilized EBIE on sale of partnership interest	17.	
18. Adjusted basis at the end of the year. (Subtract lines 16 and 17 from line 14. Do not enter less than zero)	18.	922,905

Gain Recognized on Distributions

19. Total distributions less other property distributions. (Line 10 less line 8c)	19.	
20. Total basis before decreases (line 7)	20.	
21. Gain recognized on excess distributions. (Subtract line 20 from line 19)	21.	
• Sch E page 2, ordinary income		
• Sch D/8949, short-term capital gain		
• Sch D/8949, long-term capital gain		
22. Gain recognized on disposition of section 737 property	22.	

Form 1040	Partner's Basis Worksheet Page 2	2025
Name [REDACTED]		Taxpayer Identification Number [REDACTED]
Name of Entity [REDACTED]		
Passive Activity Type Other Passive		K1 Unit 2

Description	Suspended Amount	Current Year	Total Loss	Percent	Allowed loss and Deductions	Disallowed Loss Carryforward
12. Nondeductible expenses						
13. Depletion for oil and gas						
15. Ptrship losses and deductions						
Ordinary business loss						
Net rental real estate loss						
Other net rental loss						
Short-term capital loss		77	77	1.0000	77	
Long-term capital loss						
28% capital loss						
Section 1231 loss						
4797 - Ordinary loss						
Other portfolio loss						
1256 contracts/straddles						
Other losses - Sch E						
Other losses - 1040 Sch 1						
Section 179 expense						
Cash contributions						
Cash contributions (30%)						
Noncash contrib (50%)						
Noncash contrib (30%)						
Cap gain prop 50% (30%)						
Cap gain prop (20%)						
Portfolio deduct (other)						
Investment interest expense						
Deductions-royalty income						
Section 59(e)(2) expenditures						
Preproductive period exp.						
Reforestation expense ded.						
Foreign taxes						
Other deductions						
Total losses and deductions		77	77	1.0000	77	