

2025 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/20/2026

General Information

Name: Hon Christine Edwards

PID 301997

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (13Th)	Elected Constitutional Officer	County Judge

Net Worth

My Net Worth as of June 1, 2026 was -\$ 358,970.14.

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 \$ 42,500.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Homestead	\$ 469,300.00
Truist Checking	\$ 60,051.12
Truist Money Market	\$ 15,722.69
FRS	\$ 12,837.85
Publix stock	\$ 1,290.40

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Aiadvantage	P.O. Box 4450, Portland, OR 97208	\$ 467,427.36
AES Student Loan	1200 N. 7th Street, Harrisburg, PA 17102	\$ 4,375.00
Freedom Mortgage	P.O. Box 619063, Dallas, Texas 75261	\$ 422,499.77
SBA Loan	409 3rd Street, SW, Washington DC, 20416	\$ 62,822.40
Grow Financial	P.O. Box 89909, Tampa, Florida 33689	\$ 4,810.60

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.

Christine Edwards

Digitally signed: 06/20/2026

Filed with COE: 06/20/2026

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 ☐ Spouse ☐ Other

Your first name and middle initial **CHRISTINE D** Last name **EDWARDS** Your social security number [REDACTED]

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

Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Check here if your main home, and your spouse's if filing a joint return, was in the U.S. for more than half of 2025. ☐

City, town, or post office. If you have a foreign address, also complete spaces below. State **FL** ZIP code **[REDACTED]** Presidential Election Campaign

TAMPA Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

Foreign country name Foreign province/state/country Foreign postal code ☐ You ☐ Spouse

Filing Status ☒ Single ☐ Head of household (HOH) ☐ Married filing jointly (even if only one had income) ☐ Qualifying surviving spouse (QSS)

Check only one box. ☐ Married filing separately (MFS). Enter spouse's SSN above and full name here: 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 tax 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 (see instructions) (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. (6) Check if (a) ☐ Full-time student (b) ☐ Permanently and totally disabled (7) Credits (a) ☐ Child tax credit (b) ☐ Credit for other dependents

If more than four dependents, see instructions and check here . . . ☐

☐ 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) 1a 182,391

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. 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 182,391

Attach Sch. B if required. 2a Tax-exempt interest 2a

3a Qualified dividends 3a

c Check if your child's dividends are included in 1 ☐ Line 3a 2 ☐ Line 3b

4a IRA distributions 4a b Taxable interest 2b

c Check if (see instructions) 1 ☐ Rollover 2 ☐ QCD 3 ☐ 3b Ordinary dividends 3b

5a Pensions and annuities 5a b Taxable amount 4b

c Check if (see instructions) 1 ☐ Rollover 2 ☐ PSO 3 ☐ 5b Taxable amount 5b

6a Social security benefits 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

b Check if: ☐ Schedule D not required ☐ Includes child's capital gain or (loss)

8 Additional income from Schedule 1, line 10 8 (18,574)

9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7a, and 8. This is your total income 9 163,817

10 Adjustments to income from Schedule 1, line 26 10

11a Subtract line 10 from line 9. This is your adjusted gross income 11a 163,817

Tax and Credits

11b	Amount from line 11a (adjusted gross income)	11b	163,817
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		
e	Standard deduction or itemized deductions (from Schedule A)	12e	40,361
13a	Qualified business income deduction from Form 8995 or Form 8995-A	13a	
b	Additional deductions from Schedule 1-A, line 38	13b	
14	Add lines 12e, 13a, and 13b	14	40,361
15	Subtract line 14 from line 11b. If zero or less, enter -0-. This is your taxable income	15	123,456
16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐	16	22,476
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	22,476
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	0
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	22,476
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	
24	Add lines 22 and 23. This is your total tax	24	22,476

Standard deduction for-

• Single or Married filing separately, \$15,750
• Married filing jointly or Qualifying surviving spouse, \$31,500
• Head of household, \$23,625
• If you checked a box on line 12a, 12b, 12c, or 12d, see inst.

Payments and Refundable Credits

25	Federal income tax withheld from:		
a	Form(s) W-2	25a	32,954
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	32,954
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)		☐
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	28	
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	0
33	Add lines 25d, 26, and 32. These are your total payments	33	32,954

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	10,478
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here ☐	35a	10,478
b	Routing number	c	Type: ☒ Checking ☐ Savings
d	Account number		
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	0
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)
BRITTANY BENNETT		

Sign Here

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

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
	02-12-2026	ATTORNEY	
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.	Email address		

Paid Preparer Use Only

Preparer's signature	Date	PTIN	Check it: ☐ Self-employed
BRITTANY BENNETT	02-19-2026		
Preparer's name	Phone no.		
BRITTANY BENNETT CPA PA			
Firm's name			
523 E LUMSDEN ROAD			
BRANDON, FL 33511			
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

2025

Attachment
Sequence No. **01**

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

Your social security number

CHRISTINE D EDWARDS

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	(18,574)
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 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	
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	(18,574)

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 ☐		14	
15	Deductible part of self-employment tax. Attach Schedule SE		15	
16	Self-employed SEP, SIMPLE, and qualified plans		16	
17	Self-employed health insurance deduction		17	
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 ☐		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 8i 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	0

**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

Your social security number

CHRISTINE D EDWARDS**Medical
and
Dental
Expenses****Caution:** Do not include expenses reimbursed or paid by others.

- 1 Medical and dental expenses (see instructions)
- 2 Enter amount from Form 1040 or 1040-SR, line 11b
- 3 Multiply line 2 by 7.5% (0.075)
- 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-

1**2****3****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 ☒
- b State and local real estate taxes (see instructions)
- c State and local personal property taxes
- d Add lines 5a through 5c
- 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
- 6 Other taxes. List type and amount:

5a**1,355****5b****6,556****5c****5d****7,911****5e****7,911****6**

- 7 Add lines 5e and 6

7**7,911****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
- 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
- c Points not reported to you on Form 1098. See instructions for special rules
- d Reserved for future use
- e Add lines 8a through 8c
- 9 Investment interest. Attach Form 4952 if required. See instructions
- 10 Add lines 8e and 9

8a**31,366****8b****8c****8d****8e****31,366****9****10****31,366****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
- 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
- 13 Carryover from prior year
- 14 Add lines 11 through 13

11**584****12****500****13****14****1,084****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
- 18 If you elect to itemize deductions even though they are less than your standard deduction, check this box ☐

17**40,361**

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Supplemental Income and Loss

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

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

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

OMB No. 1545-0074

2025

Attachment
Sequence No. **13**

Your social security number

CHRISTINE D EDWARDS

Part I **Income or Loss From Rental Real Estate and Royalties**

Note: If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

A Did you make any payments in 2025 that would require you to file Form(s) 1099? See instructions ☐ Yes ☒ No

B If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No

1a Physical address of each property (street, city, state, ZIP code)

A	FROM K1
B	
C	

1b	Type of Property (from list below)	2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	6	A			☐
B		B			☐
C		C			☐

Type of Property:

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

Income:

		Properties:		
		A	B	C
3	Rents received	3		
4	Royalties received	4		

Expenses:

5	Advertising	5		
6	Auto and travel (see instructions)	6		
7	Cleaning and maintenance	7		
8	Commissions	8		
9	Insurance	9		
10	Legal and other professional fees	10		
11	Management fees	11		
12	Mortgage interest paid to banks, etc. (see instructions)	12		
13	Other interest	13		
14	Repairs	14		
15	Supplies	15		
16	Taxes	16		
17	Utilities	17		
18	Depreciation expense or depletion	18		
19	Other (list) ROYALTY DED. FROM K1	19	105	
20	Total expenses. Add lines 5 through 19	20	105	
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6190	21	(105)	
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	(105)	

23a	Total of all amounts reported on line 3 for all rental properties	23a	0
b	Total of all amounts reported on line 4 for all royalty properties	23b	0
c	Total of all amounts reported on line 12 for all properties	23c	0
d	Total of all amounts reported on line 18 for all properties	23d	0
e	Total of all amounts reported on line 20 for all properties	23e	105

24 **Income.** Add positive amounts shown on line 21. **Do not** include any losses **24** **0**

25 **Losses.** Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here . . . **25** **(105)**

26 **Total rental real estate and royalty income or (loss).** Combine lines 24 and 25. Enter the result
here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on
Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 . . **26** **(105)**

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

Your social security number

CHRISTINE D EDWARDS

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

	(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	EDWARDS LAW PLLC	S	☐		☒	☐
B			☐		☐	☐
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	(k) Nonpassive income from Schedule K-1
A			18,469		
B					
C					
D					
29a Totals					
b Totals			18,469		
30 Add columns (h) and (k) of line 29a				30	
31 Add columns (g), (i), and (j) of line 29b				31	(18,469)
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31				32	(18,469)

Part III Income or Loss From Estates and Trusts

	(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				
B				
34a Totals				
b Totals				
35 Add columns (d) and (f) of line 34a				35
36 Add columns (c) and (e) of line 34b				36
37 Total estate and trust income or (loss). Combine lines 35 and 36				37

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

	(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
38					
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	(18,574)
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		

IRS e-file Signature Authorization

OMB No. 1545-0074

2025

- ERO must obtain and retain completed Form 8879.
► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID) ►

Taxpayer's name

CHRISTINE D EDWARDS

Spouse's name

Social security number

Spouse's social security number

Part I Tax Return Information - Tax Year Ending December 31, 2025 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income	1	163,817
2	Total tax	2	22,476
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	32,954
4	Amount you want refunded to you	4	10,478
5	Amount you owe	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

Refund will be deposited to: [REDACTED]

☒ I authorize **BRITTANY BENNETT CPA PA** to enter or generate my PIN [REDACTED] as my signature on the income tax return (original or amended) I am now authorizing. Enter five digits, but don't enter all zeros

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ► _____ Date ► _____

Spouse's PIN: check one box only

☐ I authorize _____ to enter or generate my PIN [REDACTED] as my signature on the income tax return (original or amended) I am now authorizing. Enter five digits, but don't enter all zeros

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ► _____ Date ► _____

Practitioner PIN Method Returns Only - continue below

Part III Certification and Authentication - Practitioner PIN Method Only

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. [REDACTED]

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorizing to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► **BRITTANY BENNETT** Date ► **02-19-2026**

ERO Must Retain This Form - See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

1040

Overflow Statement

(This page is not filed with the return. It is for your records only.)

2025 Page 1

Name(s) as shown on return

CHRISTINE D EDWARDS

Tax Identification Number

SCHEDULE A - LINE 11 - GIFTS TO CHARITY

DESCRIPTION

EDWARDS LAW PLLC

AMOUNT

\$ 584

TOTAL:

\$ 584

Client Copy

Student Loan Interest Deduction Worksheet
Schedule 1, Line 21

(This page is not filed with the return. It is for your records only.)

2025

Name(s) as shown on return

Tax ID Number

CHRISTINE D EDWARDS

Before you begin:

- If the instructions for Schedule 1, line 24z, have you enter a write-in adjustment on line 24z, figure that write-in before completing this worksheet (see the instructions for Schedule 1, line 24z).
- Be sure you have read the **Exception** in the instructions for this line to see if you can use this worksheet instead of Pub. 970 to figure your deduction.

1. Enter the total interest you paid in 2025 on qualified student loans (see the instructions for line 21). **Don't** enter more than \$2,500 1. 2,500
2. Enter the amount from Form 1040 or 1040-SR, line 9 2. 163,817
3. Enter the total of the amounts from Schedule 1, lines 11 through 20, and 23 and 25 ... 3. _____
4. Subtract line 3 from line 2 4. 163,817
5. Enter the amount shown below for your filing status.
 - + Single, head of household, or qualifying surviving spouse - \$85,000
 - + Married filing jointly - \$170,000..... 5. 85,000
6. Is the amount on line 4 more than the amount on line 5?
☐ **No.** Skip lines 6 and 7, enter -0- on line 8, and go to line 9.
☒ **Yes.** Subtract line 5 from line 4 6. 78,817
7. Divide line 6 by \$15,000 (\$30,000 if married filing jointly). Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or more, enter 1.000 7. 1.000
8. Multiply line 1 by line 7 8. 2,500
9. **Student loan interest deduction.** Subtract line 8 from line 1. Enter the result here and on Schedule 1, line 21. **Don't** include this amount in figuring any other deduction on your return (such as on Schedule A, C, E, etc.) ... 9. 0

Computation of Regular Tax

(This page is not filed with the return. It is for your records only.)

2025

Name(s) as shown on return

Tax ID Number

CHRISTINE D EDWARDS

STATEMENT FOR LINE 16 OF FORM 1040

TAX RATE SCHEDULE FOR SINGLE FILING STATUS

IF TAXABLE INCOME IS

OVER	BUT NOT OVER	PAY	PLUS	% ON EXCESS	OF THE AMOUNT OVER
0	11,925	0.00		10%	0
11,925	48,475	1,192.50		12%	11,925
48,475	103,350	5,578.50		22%	48,475
103,350	197,300	17,651.50		24%	103,350
197,300	250,525	40,199.50		32%	197,300
250,525	626,350	57,231.50		35%	250,525
626,350		188,769.75		37%	626,350

$$\$17,651.00 + ((\$123,456.00 - \$103,350.00) \times 24.0\%) = \$22,476$$

TAX FROM TAX RATE SCHEDULE \$ 22,476

\$ 22,476 TAX COMPUTED USING ONLY AVAILABLE METHOD

**Qualified Business Income Deduction
Simplified Computation**

OMB No. 1545-0074

2025Department of the Treasury
Internal Revenue ServiceAttach to your tax return.
Go to www.irs.gov/Form8995 for instructions and the latest information.Attachment
Sequence No. **55**

Name(s) shown on return

Your taxpayer identification number

CHRISTINE D EDWARDS

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

Use this form if your taxable income, before your qualified business income deduction, is at or below \$197,300 (\$394,600 if married filing jointly), and you aren't a patron of an agricultural or horticultural cooperative.

1	(a) Trade, business, or aggregation name	(b) Taxpayer identification number	(c) Qualified business income or (loss)
i	K1S: EDWARDS LAW PLLC		(18,469)
ii			
iii			
iv			
v			
2	Total qualified business income or (loss). Combine lines 1i through 1v, column (c)		2 (18,469)
3	Qualified business net (loss) carryforward from the prior year		3 (41,430)
4	Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0-		4 0
5	Qualified business income component. Multiply line 4 by 20% (0.20)		5 0
6	Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions)		6 0
7	Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year		7 ()
8	Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0-		8 0
9	REIT and PTP component. Multiply line 8 by 20% (0.20)		9 0
10	Qualified business income deduction before the income limitation. Add lines 5 and 9		10 0
11	Taxable income before qualified business income deduction (see instructions)		11 123,456
12	Enter your net capital gain, if any, increased by any qualified dividends (see instructions)		12 0
13	Subtract line 12 from line 11. If zero or less, enter -0-		13 123,456
14	Income limitation. Multiply line 13 by 20% (0.20)		14 24,691
15	Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions)		15 0
16	Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0-		16 (59,899)
17	Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0-		17 (0)

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

Form **8995** (2025) Created 9/12/25

EEA

Line 11 Enter your taxable income figured before any QBI deduction, computed as follows:

Form 1040 or 1040-SR, line 11a,	163,817
minus Form 1040 or 1040-SR, Schedule 1-A, Line 38,	0
minus Form 1040 or 1040-SR, line 12e,	40,361
Taxable income figured before any QBI deduction.....	123,456

QBI Explanation Worksheet

Form 1040

(This page is not filed with the return. It is for your records only.)

2025

Name(s) as shown on return

Tax ID Number

CHRISTINE D EDWARDS

Name of business activity

KIS: EDWARDS LAW PLLC

	As reported	As allowed on 1040 after limitations
1. Ordinary business income (loss)	(18,469)	(18,469)
2. Rental income (loss)		
3. Royalty income (loss)		
4. Section 1231 gain (loss)		
5. Other income (loss)		
6. Section 179 deduction		
7. Other deductions	105	
8. Deduction for half of SE tax		
9. Self-employed health insurance deduction		
10. Self-employed pension deduction		
11. QBI amount carried to Form 8995 / 8995-A		(18,469)
12. W-2 wages carried to Form 8995 / 8995-A		
13. UBI of qualified property carried to Form 8995 / 8995-A		18,010
14. Section 199A REIT dividends		
15. 199(A)(g) deduction		
16. QBI allocable to cooperative payments		
17. W-2 wages allocable to cooperative payments		

The income amount from line 11 will show on one of the following lines, depending on circumstances:

- ☒ Form 8995, line 1
- ☐ Form 8995-A, line 2
- ☐ Form 8995-A, Schedule A, line 2
- ☐ Form 8995-A, Schedule A, line 16
- ☐ Form 8995-A, Schedule B, line 3
- ☐ Form 8995-A, Schedule C, line 1

Note: The Tax Cuts and Jobs Act and the related proposed regulations state that losses or deductions that were disallowed, suspended, limited, or carried over from taxable years ending before January 1, 2018 (including under sections 465, 469, 704(d), and 1366(d)), are not taken into account in a later taxable year for purposes of computing QBI.

Carryover Worksheet
List of items that will carryover to the 2026 tax return

(This page is not filed with the return. It is for your records only.)

2025

Name(s) as shown on return

Tax ID Number

CHRISTINE D EDWARDS

Itemized Deductions

Carryover Amount

Contributions subject to 100% of AGI limitations	.....	_____
Contributions subject to 60% of AGI limitations	.....	_____
Contributions subject to 30% of AGI limitations (50% capital gains appreciated property)	.....	_____
Contributions subject to 30% of AGI limitations	.....	_____
Contributions subject to 20% of AGI limitations (30% capital gains appreciated property)	.....	_____
Taxable state and local refunds to Schedule 1 (Form 1040) line 1	.....	_____
State/local taxes paid in 2026 to flow to the Schedule A	.....	_____
State donations and contributions carryover	.....	_____
State overpayment applied to next year	.....	_____

Expenses

Office in home operating expenses	.....	_____
Office in home excess casualty losses and depreciation	.....	_____
Disallowed investment interest expense	 AMT _____ Reg. Tax _____	_____
Section 179 expense	.....	_____
Operating expenses, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use	.....	_____
Excess depreciation, from Form WK_E, Sch E - Rental limitation on deductions when used for personal use	.....	_____

Losses

Short-term capital loss	 AMT _____ Reg. Tax _____	_____
Long-term capital loss	 AMT _____ Reg. Tax _____	_____
Net operating loss	 AMT _____ Reg. Tax _____	_____
Excess business loss from Form 461 (becomes part of NOL next year)	 AMT _____ Reg. Tax _____	_____
Qualified REIT and PTP loss carryover	.....	_____
QBI loss carryover	.....	59,899
Nonrecaptured net section 1231 losses from WK_1231C	 AMT _____ Reg. Tax _____	_____

Credits

Mortgage interest credit	.....	_____
Credit for prior year minimum tax	.....	_____
Foreign Tax credit	 AMT _____ Reg. Tax _____	_____
District of Columbia first time home owner's credit	.....	_____
Residential clean energy credit	.....	_____

Other

Preparer Fee	.....	_____
Overpayment applied to next year's estimates	.....	_____
Estimated Tax Payment 1	_____	Estimated Tax Payment 2 _____
Estimated Tax Payment 3	_____	Estimated Tax Payment 4 _____
Federal tax liability for 2210 calculation	.....	22,476
State tax liability for state 2210 calculation	.....	_____
IRA basis	 Taxpayer _____ Spouse _____	_____
Disaster distributions taxable in 2026	 Taxpayer _____ Spouse _____	_____
Disaster distributions taxable in 2027	 Taxpayer _____ Spouse _____	_____
Excess repayments from 8915-F	 Taxpayer _____ Spouse _____	_____

Passive Activity

At Risk Limitations

TAX RETURN COMPARISON
2023 / 2024 / 2025

2025

(This page is not filed with the return. It is for your records only.)

Name(s) as shown on return CHRISTINE D EDWARDS	Identifying number [REDACTED]			
	2023	2024	2025	Difference 2024-2025
Filing Status	Single	Single	Single	
Number of Dependents				
Income				
Wages, salaries, tips, etc.	136,896	66,554	182,391	115,837
Taxable interest and dividends				
Taxable state and local refunds				
Alimony				
Business income (loss)				
Gains (losses)				
Pensions and IRA distributions				
Rent and royalty income (loss)			(105)	(105)
Part, S-corps, trusts income (loss)	313,262	(21,745)	(18,469)	3,276
Farm income (loss)				
Unemployment compensation				
Total SS benefits received				
Taxable SS benefits				
Other income (loss)				
Total Income	450,158	44,809	163,817	119,008
Adjusted Gross Income				
Half of self-employment tax				
IRA deduction				
Other adjustments		2,500		(2,500)
Total Adjusted Gross Income	450,158	42,309	163,817	121,508
Deductions				
Medical deductions				
State and local taxes		808	7,911	7,103
Interest		2,510	31,366	28,856
Contributions		2,303	1,084	(1,219)
Other deductions				
Total itemized deductions		5,621	40,361	34,740
Standard deduction	13,850	14,600	15,750	1,150
Total deductions claimed	13,850	14,600	40,361	25,761
Qualified Business Income Deduction				
Other Deductions from Schedule 1A				
Tax and Credits				
Taxable Income	436,308	27,709	123,456	95,747
Tax	124,602	3,095	22,476	19,381
Credits				
Self-employment tax				
Other taxes				
Total Tax	124,602	3,095	22,476	19,381
Payments				
Withholdings	24,276	8,145	32,954	24,809
Estimated tax payments				
Earned income credit				
Other payments and credits				
Estimated tax penalty	1,135			
Overpayment		5,050	10,478	5,428
Overpayment applied				
Refund		5,050	10,478	5,428
Balance Due	101,461			
Marginal tax rate	35.00	12.00	24.00	12.00
Effective tax rate	28.56	11.17	18.21	7.04

Account Transaction Summary**2025**

Name(s) as shown on return

CHRISTINE D EDWARDS

Tax ID Number

Account #1

Financial Institution

Routing Transit Number

Account Number

Account Type

checking

Federal Main Form

Federal Deposit

10,478

Net Deposit**10,478**

PLEASE VERIFY BANK INFORMATION

1. Bank Name
2. Bank Routing Transit Number
3. Bank Account Number
4. Bank Account Type

This information is used to deposit your refund or to pay any amount due. If you have provided incorrect information, or you have closed the account, you are responsible.

I have reviewed the above information and certify that this information is correct and authorize **BRITTANY BENNETT CPA PA** to use this account.

Your Signature

Date

Spouse's Signature (If Married Filing Jointly)

Date

S Corporation Shareholder Stock and Debt Basis Limitations

OMB No. 1545-2302

Attachment
Sequence No. **203**

Attach to your tax return.
Go to www.irs.gov/Form7203 for instructions and the latest information.

Name of shareholder CHRISTINE D EDWARDS	Identifying number
A Name of S corporation EDWARDS LAW PLLC	B Employer identification number

C Stock block (see instructions): _____

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

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

Part I Shareholder Stock Basis			
1	Stock basis at the beginning of the corporation's tax year	1	71,779
2	Basis from any capital contributions made or additional stock acquired during the tax year	2	
3a	Ordinary business income (enter losses in Part III)	3a	
b	Net rental real estate income (enter losses in Part III)	3b	
c	Other net rental income (enter losses in Part III)	3c	
d	Interest income	3d	
e	Ordinary dividends	3e	
f	Royalties	3f	
g	Net capital gains (enter losses in Part III)	3g	
h	Net section 1231 gain (enter losses in Part III)	3h	
i	Other income (enter losses in Part III)	3i	
j	Excess depletion adjustment	3j	
k	Tax-exempt income	3k	
l	Recapture of business credits	3l	
m	Other items that increase stock basis	3m	
4	Add lines 3a through 3m	4	
5	Stock basis before distributions. Add lines 1, 2, and 4	5	71,779
6	Distributions (excluding dividend distributions) Note: If line 6 is larger than line 5, subtract line 5 from line 6 and report the result as a capital gain on Form 8949 and Schedule D. See instructions.	6	50,544
7	Stock basis after distributions. Subtract line 6 from line 5. If the result is zero or less, enter -0-, skip lines 8 through 14, and enter -0- on line 15	7	21,235
8a	Nondeductible expenses	8a	684
b	Depletion for oil and gas	8b	
c	Business credits (sections 50(c)(1) and (5))	8c	
9	Add lines 8a through 8c	9	684
10	Stock basis before loss and deduction items. Subtract line 9 from line 7. If the result is zero or less, enter -0-, skip lines 11 through 14, and enter -0- on line 15	10	20,551
11	Allowable loss and deduction items. Enter the amount from line 47, column (c)	11	19,158
12	Debt basis restoration (see net increase in instructions for line 23)	12	
13	Other items that decrease stock basis	13	
14	Add lines 11, 12, and 13	14	19,158
15	Stock basis at the end of the corporation's tax year. Subtract line 14 from line 10. If the result is zero or less, enter -0-	15	1,393

Part II Shareholder Debt Basis				
Section A—Amount of Debt (If more than three debts, see instructions.)				
Description	(a) Debt 1 ☐ Formal note ☐ Open account	(b) Debt 2 ☐ Formal note ☐ Open account	(c) Debt 3 ☐ Formal note ☐ Open account	(d) Total
16 Loan balance at the beginning of the corporation's tax year				
17 Additional loans (see instructions)				
18 Loan balance before repayment. Combine lines 16 and 17				
19 Principal portion of debt repayment (this line doesn't include interest)				
20 Loan balance at the end of the corporation's tax year. Subtract line 19 from line 18				

Part II Shareholder Debt Basis (continued)**Section B - Adjustments to Debt Basis**

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

Section C - Gain on Loan Repayment

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

Part III Shareholder Allowable Loss and Deduction Items

Description	(a) Current year losses and deductions	(b) Carryover amounts (column (e)) from the previous year	(c) Allowable loss from stock basis	(d) Allowable loss from debt basis	(e) Carryover amounts
35 Ordinary business loss	18,469		18,469		
36 Net rental real estate loss					
37 Other net rental loss					
38 Net capital loss					
39 Net section 1231 loss					
40 Other loss					
41 Section 179 deductions					
42 Charitable contributions	584		584		
43 Investment interest expense					
44 Section 59(e)(2) expenditures					
45 Other deductions	105		105		
46 Foreign taxes paid or accrued					
47 Total loss. Add lines 35 through 46 for each column. Enter the total loss in column (c) on line 11 and enter the total loss in column (d) on line 30	19,158		19,158		0