

2025 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/27/2026

General Information

Name: Dr Karen Barber

PID 250842

AGENCY INFORMATION

Organization	Suborganization	Title
Santa Rosa County School Board	Elected Constitutional Officer	Superintendent

Net Worth

My Net Worth as of December 31, 2025 was \$ 1,317,754.55.

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 \$ 350,007.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
PRIMARY RESIDENCE	\$ 643,926.00
MNP CAPSTONE 14 ANNUITY	\$ 88,592.32
DIRECTED TRUIST IRA	\$ 34,540.34
AMERICAN FUND GROWTH PORTFOLIO	\$ 35,203.38
DROP	\$ 165,148.55

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

This section applies only to a Constitutional or elected municipal officer, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

- ☒ I certify that I have completed the required training under Section 112.3142, F.S.
- ☐ Required training under Section 112.3142, F.S., not applicable to filer 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.

Karen Barber

Digitally signed: 06/27/2026

Filed with COE: 06/27/2026

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

Your first name and middle initial KAREN	Last name BARBER	
If joint return, spouse's first name and middle initial		Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. 5272 CRYSTAL CREEK DRIVE		Apt. no.
City, town, or post office. If you have a foreign address, also complete spaces below. MILTON		State FL
		ZIP code 32571
Foreign country name	Foreign province/state/county	Foreign postal code

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:
MICHAEL W BARBER

☐ 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):

☐ 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:

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) 218,002 b Household employee wages not reported on Form(s) W-2 c Tip income not reported on line 1a (see instructions) d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) e Taxable dependent care benefits from Form 2441, line 26 f Employer-provided adoption benefits from Form 8839, line 31 g Wages from Form 8919, line 6 h Other earned income (see instructions). Enter type and amount: i Nontaxable combat pay election (see instructions) 1i z Add lines 1a through 1h 218,002	1a 218,002 1b 1c 1d 1e 1f 1g 1h 1i 1z 218,002
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. Attach Sch. B if required.	2a Tax-exempt interest 2a 3a Qualified dividends 3a 8 c Check if your child's dividends are included in 1 ☐ Line 3a 2 ☐ Line 3b 4a IRA distributions 4a c Check if (see instructions) 1 ☐ Rollover 2 ☐ QCD 3 ☐ 5a Pensions and annuities 5a c Check if (see instructions) 1 ☐ Rollover 2 ☐ PSO 3 ☐ 6a Soc. sec. ben. 6a 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 1,706 b Check if: ☐ Schedule D not required ☐ Includes child's capital gain or (loss) 8 Additional income from Schedule 1, line 10 8 4,055 9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7a, and 8. This is your total income 9 223,771 10 Adjustments to income from Schedule 1, line 26 10 55 11a Subtract line 10 from line 9. This is your adjusted gross income 11a 223,716	2b 3b 8 4b 5b 6b 7a 1,706 8 4,055 9 223,771 10 55 11a 223,716

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

Form 1040 (2025)

Form 1040 (2025) KAREN BARBER

Tax and Credits

- 11b Amount from line 11a (adjusted gross income)
- 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, \$23,625
- 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

12e 17,350

13a 536

13b

14 17,886

15 205,830

16 42,637

17

18 42,637

19

20 8

21 8

22 42,629

23 1,045

24 43,674

Payments and Refundable Credits

25 Federal income tax withheld from:

a Form(s) W-2

25a 43,896

b Form(s) 1099

25b

c Other forms (see instructions)

25c 162

d Add lines 25a through 25c

25d 44,058

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

33 Add lines 25d, 26, and 32. These are your total payments

33 44,058

Refund

34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid

34 384

35a Amount of line 34. If Form 8888 is attached, check here ☐

35a 384

b Routing num.

c Type: ☒ Checking ☐ Savings

d Account num.

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.

37

For details on how to pay, go to www.irs.gov/Payments or see instructions

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 HEATHER R. JORDAN

Phone no. 850-995-5000

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

EDUCATOR

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

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.)

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

Phone no.

Email address

Paid

Preparer's name

Preparer's signature

Date

PTIN

Check if:

Preparer

HEATHER R. JORDAN

HEATHER R. JORDAN

P01671313

☐ Self-employed

Use Only

Firm's name DURST JORDAN CPA PA

Phone no. 850-995-5000

4459-B HIGHWAY 90

Firm's address MILTON

FL 32571

Firm's EIN 45-0529207

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

Form 1040 (2025)

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

KAREN BARBER

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	4,055
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	
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:	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	4,055

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

Schedule 1 (Form 1040) 2025

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	55
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	55

SCHEDULE 2
(Form 1040)**Additional Taxes**

OMB No. 1545-0074

2025Attachment
Sequence No. **02**Department of the Treasury
Internal Revenue Service

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

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

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

KAREN BARBER**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 Alternative minimum tax. Attach Form 6251

2

3 Add lines 1z and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17

3

Part II Other Taxes**4** Self-employment tax. Attach Schedule SE. Check if any exemption from (see instructions):1 ☐ 4361 2 ☐ 4029 3 ☐

4

109

5 Social security and Medicare tax on unreported tip income. Attach Form 4137

5

6 Uncollected social security and Medicare tax on wages. Attach Form 8919

6

7 Total additional social security and Medicare tax. Add lines 5 and 6

7

8 Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required.

8

If not required, check here ☐**9** Household employment taxes. Attach Schedule H

9

10 Reserved for future use

10

11 Additional Medicare Tax. Attach Form 8959

11

871

12 Net investment income tax. Attach Form 8960

12

65

13 Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12

13

14 Interest on tax due on installment income from the sale of certain residential lots and timeshares

14

15 Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000

15

16 Recapture of low-income housing credit. Attach Form 8611

16

(continued on page 2)

KAREN BARBER

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 8866

17n

o Tax on non-effectively connected income for any part of the year you were a
nonresident alien from Form 1040-NR

17o

p Any interest from Form 8621, line 16f, relating to distributions from, and
dispositions of, stock of a section 1291 fund

17p

q Any interest from Form 8621, line 24

17q

z Any other taxes. List type and amount:

17z

18 Total additional taxes. Add lines 17a through 17z

18

19 Recapture of net EPE from Form 4255, line 1d, column (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

1,045

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 03

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

Your s

KAREN BARBER**Part I Nonrefundable Credits**

1	Foreign tax credit. Attach Form 1116 if required	1	8
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	8

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

KAREN BARBER

Schedule D (Form 1040) 2025

Part III Summary

16 Combine lines 7 and 15 and enter the result

16

1,706

- 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

18

19 If you are required to complete the **Unrecaptured Section 1250 Gain Worksheet** (see instructions), enter the amount, if any, from line 18 of that worksheet

19

20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952?

- ☒ **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)

21

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.

Schedule D (Form 1040) 2025

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

Social Security number

KAREN BARBER

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 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).

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

(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.	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.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
					(f) Code(s) from instructions	(g) Amount of adjustment	
1 LONG TERM COVERED	VARIOUS	VARIOUS	75	60			15
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)			75	60		0	15

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.

SCHEDULE SE
(Form 1040)Department of the Treasury
Internal Revenue Service**Self-Employment Tax**

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

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

OMB No. 1545-0074

2025Attachment
Sequence No. **17**

Name of person with self-employment income (as shown on Form 1040, 1040-SR, 1040-SS, or 1040-NR)

KAREN BARBER

Social security number of
with self-employment i**Part I Self-Employment Tax****Note:** If your only income subject to self-employment tax is church employee income, see instructions for how to report your income and the definition of church employee income.

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

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

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

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

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

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

- 3**
- Combine lines 1a, 1b, and 2

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

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

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

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

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

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

- 6**
- Add lines 4c and 5b

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

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

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

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

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

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

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

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

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

- 13**
- Deduction for one-half of self-employment tax.

Multiply line 12 by 50% (0.50). Enter here and on Schedule 1 (Form 1040), line 15

1a	
1b	
2	4,055
3	4,055
4a	3,745
4b	
4c	3,745
5a	
5b	0
6	3,745
7	176,100
8a	176,100
8b	
8c	
8d	
9	
10	
11	109
12	109
13	55

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

Schedule SE (Form 1040) 2025

Part II Optional Methods To Figure Net Earnings (see instructions)

Farm Optional Method. You may use this method only if (a) your gross farm income¹ wasn't more than \$10,860, or (b) your net farm profits² were less than \$7,840.

14 Maximum income for optional methods

14

15 Enter the smaller of: two-thirds ($\frac{2}{3}$) of gross farm income¹ (not less than zero) or \$7,240. Also, include this amount on line 4b above

15

Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits³ were less than \$7,840 and also less than 72.189% of your gross nonfarm income,⁴ and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years. Caution: You may use this method no more than five times.

16 Subtract line 15 from line 14

16

17 Enter the smaller of: two-thirds ($\frac{2}{3}$) of gross nonfarm income⁴ (not less than zero) or the amount on line 16. Also, include this amount on line 4b above

17

¹ From Sch. F, line 9; and Sch. K-1 (Form 1065), box 14, code B.

³ From Sch. C, line 31; and Sch. K-1 (Form 1065), box 14, code A.

² From Sch. F, line 34; and Sch. K-1 (Form 1065), box 14, code A — minus the amount you would have entered on line 1b had you not used the optional method.

⁴ From Sch. C, line 7; and Sch. K-1 (Form 1065), box 14, code C.

Form **1116****Foreign Tax Credit**

(Individual, Estate, or Trust)

OMB No. 1545-0074

2025Attachment
Sequence No. **19**Department of the Treasury
Internal Revenue ServiceAttach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.
Go to www.irs.gov/Form1116 for instructions and the latest information.

Name

Identifying number as shown on page 1 of your tax return

KAREN BARBERUse a separate Form 1116 for each category of income listed below. See *Categories of Income* in each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below. Check only one box on

- a ☐ Section 951A category income c ☒ Passive category income e ☐ Section 901(j) income g ☐ Lump-sum distributions
 b ☐ Foreign branch category income d ☐ General category income f ☐ Certain income re-sourced by treaty

h Resident of (name of country) **US UNITED STATES**

Note: If you paid taxes to only one foreign country or U.S. territory, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. territory, use a separate column and line for each country or territory.

Part I Taxable Income or Loss From Sources Outside the United States (for category checked above)

I Enter the name of the foreign country or U.S. territory	Foreign Country or U.S. Territory			Total (Add cols. A, B, and C.)
	A	B	C	
1a Gross income from sources within country shown above and of the type checked above (see instructions):				
DIVIDENDS & INTEREST	689			689
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions ☐				
Deductions and losses (Caution: See instructions):				
2 Expenses definitely related to the income on line 1a (attach statement)				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions)	17,350			
b Other ded. (attach stmt.)	17,350			
c Add lines 3a and 3b	1,699			
d Gross foreign source income (see instructions)	223,966			
e Gross income from all sources (see instructions)	0.0076			
f Divide line 3d by line 3e (see instructions)	132			
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5	132			132
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2				557

Part II Foreign Taxes Paid or Accrued (see instructions)

Country	Credit is claimed for taxes (you must check one) (j) ☒ Paid (k) ☐ Accrued	Foreign taxes paid or accrued										
		In foreign currency				In U.S. dollars						
		Taxes withheld at source on:			(p) Other foreign taxes paid or accrued	Taxes withheld at source on:			(t) Other foreign taxes paid or accrued	(u) Total foreign taxes paid or accrued (add cols. (q) through (t))		
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties		(o) Interest	(q) Dividends	(r) Rents and royalties			(s) Interest	
A		1099 TAX						8				8
B												
C												
8 Add lines A through C, column (u). Enter the total here and on line 9, page 2											8	8

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2025)

KAREN BARBER

Form 1116 (2025)

2

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	8
10	Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) ☐ (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10	
11	Add lines 9 and 10	11	8
12	Reduction in foreign taxes (see instructions)	12	
13	Taxes reclassified under high tax kickout (see instructions)	13	
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14	8
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions	15	557
16	Adjustments to line 15 (see instructions)	16	
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, skip line 18 and enter -0- on line 19.)	17	557
18	Individuals: Enter the sum of (i) Form 1040, 1040-SR, or 1040-NR, line 11b, minus Form 1040, 1040-SR, or 1040-NR, line 14, and (ii) Schedule 1-A (Form 1040), line 37. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18	204,811
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19	0.0027
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 1z. Estates and trusts: See instructions Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 9978, Partner's Additional Reporting Year Tax, see instructions.	20	42,637
21	Multiply line 20 by line 19 (maximum amount of credit)	21	116
22	Increase in limitation (section 960(c)) (see instructions)	22	
23	Add lines 21 and 22	23	116
24	Enter the smaller of line 14 or line 23. Enter here and on the appropriate line of Part IV. See instructions	24	8

Part IV Summary of Separate Credits From Parts III (Enter amounts from Part III, line 24, for each applicable category of income. Don't include taxes paid to sanctioned countries.) See instructions.

25	Credit for taxes on section 951A category income	25	
26	Credit for taxes on foreign branch category income	26	
27	Credit for taxes on passive category income	27	8
28	Credit for taxes on general category income	28	
29	Credit for taxes on section 901(j) income	29	
30	Credit for taxes on certain income re-sourced by treaty	30	
31	Credit for taxes on lump-sum distributions	31	
32	Add lines 25 through 31	32	8
33	Enter the smaller of line 20 or line 32	33	8
34	Reduction of credit for international boycott operations. See instructions for line 12	34	
35	Subtract line 34 from line 33. This is your foreign tax credit. Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a	35	8

Form 1116 (2025)

Form

8995-A**Qualified Business Income Deduction**

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service

Attach to your tax return.

Go to www.irs.gov/Form8995A for instructions and the latest information.**2025**Attachment
Sequence No. **55A**

Name(s) shown on return

KAREN BARBER

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

Use this form if your taxable income, before your qualified business income deduction, is above \$197,300 (\$394,600 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

Part I Trade, Business, or Aggregation Information

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

1	(a) Trade, business, or aggregation name	(b) Check if specified service	(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if patron
A	BARBER EDUCATIONAL TRANSFORMATION	☒	☐		
B		☐	☐		☐
C		☐	☐		☐

Part II Determine Your Adjusted Qualified Business Income

	A	B	C
2 Qualified business income from the trade, business, or aggregation. See instructions	2 3,275		
3 Multiply line 2 by 20% (0.20). If your taxable income is \$197,300 or less (\$394,600 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13	3 655		
4 Allocable share of W-2 wages from the trade, business, or aggregation	4 0		
5 Multiply line 4 by 50% (0.50)	5 0		
6 Multiply line 4 by 25% (0.25)	6 0		
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property	7 0		
8 Multiply line 7 by 2.5% (0.025)	8 0		
9 Add lines 6 and 8	9 0		
10 Enter the greater of line 5 or line 9	10 0		
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10	11 0		
12 Phased-in reduction. Enter the amount from line 26, if any	12 536		
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	13 536		
14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any. See instructions	14		
15 Qualified business income component. Subtract line 14 from line 13	15 536		
16 Total qualified business income component. Add all amounts reported on line 15	16 536		

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

Form **8995-A** (2025)

KAREN BARBER

Form 8995-A (2025)

Part III Phased-in Reduction

Complete Part III only if your taxable income is more than \$197,300 but not \$247,300 (\$394,600 and \$494,600 if married filing jointly) and line 10 is less than line 3. Otherwise, skip Part III.

	A	B	C
17 Enter the amounts from line 3	17 655		
18 Enter the amounts from line 10	18		
19 Subtract line 18 from line 17	19 655		
20 Taxable income before qualified business income deduction	20 206,366		
21 Threshold. Enter \$197,300 (\$394,600 if married filing jointly)	21 197,300		
22 Subtract line 21 from line 20	22 9,066		
23 Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	23 50,000		
24 Phase-in percentage. Divide line 22 by line 23	24 18.1320 %		
25 Total phase-in reduction. Multiply line 19 by line 24	25 119		
26 Qualified business income after phase-in reduction. Subtract line 25 from line 17. Enter this amount here and on line 12, for the corresponding trade or business	26 536		

Part IV Determine Your Qualified Business Income Deduction

27 Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16	27 536	
28 Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions	28	
29 Qualified REIT dividends and PTP (loss) carryforward from prior years	29	
30 Total qualified REIT dividends and PTP income. Combine lines 28 and 29. If less than zero, enter -0-	30 0	
31 REIT and PTP component. Multiply line 30 by 20% (0.20)	31	
32 Qualified business income deduction before the income limitation. Add lines 27 and 31	32 536	
33 Taxable income before qualified business income deduction	33 206,366	
34 Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	34 1,714	
35 Subtract line 34 from line 33. If zero or less, enter -0-	35 204,652	
36 Income limitation. Multiply line 35 by 20% (0.20)	36 40,930	
37 Qualified business income deduction before the domestic production activities deduction (DPAD) under section 199A(g). Enter the smaller of line 32 or line 36	37 536	
38 DPAD under section 199A(g) allocated from an agricultural or horticultural cooperative. Don't enter more than line 33 minus line 37	38	
39 Total qualified business income deduction. Add lines 37 and 38	39 536	
40 Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-	40	

Form 8995-A (2025)

SCHEDULE A
(Form 8995-A)Department of the Treasury
Internal Revenue Service**Specified Service Trades or Businesses**

Attach to Form 8995-A.

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

OMB No. 1545-0074

2025Attachment
Sequence No. **55B**

Name(s) shown on return

KAREN BARBER

Complete Schedule A only if your trade or business is a specified service trade or business (see instructions) and your taxable income is more than \$197,300 but not \$247,300 (\$394,600 and \$494,600 if married filing jointly). If your taxable income isn't more than \$197,300 (\$394,600 if married filing jointly) and you're not a patron of an agricultural or horticultural cooperative, don't file this form; instead, file Form 8995, Qualified Business Income Deduction Simplified Computation. Otherwise, complete Schedule D (Form 8995-A) before beginning Schedule A. If your taxable income is more than \$247,300 (\$494,600 if married filing jointly), your specified service trade or business doesn't qualify for the deduction. If you have more than three trades or businesses, attach as many Schedules A as needed. See instructions.

Part I Other Than Publicly Traded Partnerships (PTP)

See instructions before completing Parts I and II.

	A	B	C
1a Trade or business name			
b Taxpayer identification number			
2 Qualified business income or (loss) from the trade or business	2	4,000	
3 Allocable share of W-2 wages from the trade or business	3		
4 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property	4		
5 Taxable income before qualified business income deduction	5	206,366	
6 Threshold. Enter \$197,300 (\$394,600 if married filing jointly)	6	197,300	
7 Subtract line 6 from line 5	7	9,066	
8 Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	8	50,000	
9 Divide line 7 by line 8	9	18.1320	
10 Applicable percentage. Subtract line 9 from 100%	10	81.8680 %	
11 Applicable percentage of qualified business income or (loss). Multiply line 2 by line 10. Enter this amount on Schedule C (Form 8995-A) or on Form 8995-A, line 2, for the corresponding trade or business, as appropriate	11	3,275	
12 Applicable percentage of W-2 wages. Multiply line 3 by line 10. Enter this amount on Form 8995-A, line 4, for the corresponding trade or business, as appropriate	12		
13 Applicable percentage of the UBIA of qualified property. Multiply line 4 by line 10. Enter this amount on Form 8995-A, line 7, for the corresponding trade or business, as appropriate	13		

Part II Publicly Traded Partnership

	A	B	C
14 Trade or business name	14		
15 Taxpayer identification number	15		
16 Qualified PTP income or (loss)	16		
17 Total PTP specified service trade or business (SSTB) income or (loss). Combine all amounts on line 16	17		
18 Taxable income before qualified business income deduction	18		
19 Threshold. Enter \$197,300 (\$394,600 if married filing jointly)	19		
20 Subtract line 19 from line 18	20		
21 Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly)	21		
22 Divide line 20 by line 21	22		
23 Applicable percentage. Subtract line 22 from 100%	23		%
24 Applicable percentage of qualified PTP income or (loss). Multiply line 17 by line 23. Include this amount on Form 8995-A, line 28	24		

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

Schedule A (Form 8995-A) 2025

Form **8959**Department of the Treasury
Internal Revenue Service**Additional Medicare Tax**

If any line does not apply to you, leave it blank. See separate instructions.

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

Go to www.irs.gov/Form8959 for instructions and the latest information.

OMB No. 1545-0074

2025Attachment
Sequence No. **71**

Name(s) shown on return

KAREN BARBER**Part I Additional Medicare Tax on Medicare Wages**

1	Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5	1	218,002	
2	Unreported tips from Form 4137, line 6	2		
3	Wages from Form 8919, line 6	3		
4	Add lines 1 through 3	4	218,002	
5	Enter the following amount for your filing status:			
	Married filing jointly		\$250,000	
	Married filing separately		\$125,000	
	Single, Head of household, or Qualifying surviving spouse		\$200,000	
5		5	125,000	
6	Subtract line 5 from line 4. If zero or less, enter -0-	6		93,002
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II	7		837

Part II Additional Medicare Tax on Self-Employment Income

8	Self-employment income from Schedule SE (Form 1040), Part I, line 6. If you had a loss, enter -0-	8	3,745	
9	Enter the following amount for your filing status:			
	Married filing jointly		\$250,000	
	Married filing separately		\$125,000	
	Single, Head of household, or Qualifying surviving spouse		\$200,000	
9		9	125,000	
10	Enter the amount from line 4	10	218,002	
11	Subtract line 10 from line 9. If zero or less, enter -0-	11	0	
12	Subtract line 11 from line 8. If zero or less, enter -0-	12		3,745
13	Additional Medicare Tax on self-employment income. Multiply line 12 by 0.9% (0.009). Enter here and go to Part III	13		34

Part III Additional Medicare Tax on Railroad Retirement Tax Act (RRTA) Compensation

14	Railroad retirement (RRTA) compensation and tips from Form(s) W-2, box 14 (see instructions)	14		
15	Enter the following amount for your filing status:			
	Married filing jointly		\$250,000	
	Married filing separately		\$125,000	
	Single, Head of household, or Qualifying surviving spouse		\$200,000	
15		15	125,000	
16	Subtract line 15 from line 14. If zero or less, enter -0-	16		0
17	Additional Medicare Tax on railroad retirement (RRTA) compensation. Multiply line 16 by 0.9% (0.009). Enter here and go to Part IV	17		

Part IV Total Additional Medicare Tax

18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-SS filers, see instructions), and go to Part V	18		871
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Part V Withholding Reconciliation

19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6	19	3,323	
20	Enter the amount from line 1	20	218,002	
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	3,161	
22	Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages	22		162
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions)	23		
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-SS filers, see instructions)	24		162

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

Form **8959** (2025)

Form **8960**Department of the Treasury
Internal Revenue Service**Net Investment Income Tax—
Individuals, Estates, and Trusts**

Attach to your tax return.

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

OMB No. 1545-2227

2025Attachment
Sequence No. **72**

Name(s) shown on your tax return

KAREN BARBER**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	
2	Ordinary dividends (see instructions)		2	8
3	Annuities (see instructions)		3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a 4,055		
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b -4,055		
c	Combine lines 4a and 4b		4c	
5a	Net gain or loss from disposition of property (see instructions)	5a 1,706		
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b		
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c		
d	Combine lines 5a through 5c		5d	1,706
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	1,714

Part II Investment Expenses Allocable to Investment Income and Modifications

9a	Investment interest expenses (see instructions)	9a		
b	State, local, and foreign income tax (see instructions)	9b		
c	Miscellaneous investment expenses (see instructions)	9c		
d	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	1,714
13	Modified adjusted gross income (see instructions)	13 223,716		
14	Threshold based on filing status (see instructions)	14 125,000		
15	Subtract line 14 from line 13. If zero or less, enter -0-	15 98,716		
16	Enter the smaller of line 12 or line 15		16	1,714
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	65
18a	Net investment income (line 12 above)	18a		
b	Deductions for distributions of net investment income and charitable deductions (see instructions)	18b		
c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c		
19a	Adjusted gross income (see instructions)	19a		
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b		
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c		
20	Enter the smaller of line 18c or line 19c		20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and include on your tax return (see instructions)		21	

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

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