

2025 Form 6 - Full and Public Disclosure of Financial Interests

2025 JUN -2 PM 12:18

General Information

DIVISION OF ELECTIONS
TALLAHASSEE, FL

Name: Mr Douglas Alan Barrow

Organization

Suborganization

Title

N/A

CANDIDATE FOR

Position

Agency Name

Position sought or held

State Representative

Florida Senate

District 94 House or Representative

Net Worth

My Net Worth as of December 31, 2025 was \$ 2,133,250.00.

2025 Form 6 - Full and Public Disclosure of Financial Interests

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 \$ 65,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
13635 Mallard Way, West Palm Beach Fl 33418	\$ 1,612,470.00
Zeblin Rd Ellijay GA Parcel 3067x010	\$ 8,700.00
Zeblin Rd Ellijay GA Parcel 3038I022	\$ 8,700.00
Myna DR Ellijay GA 30540 Parcel 3038I023	\$ 8,700.00
3944 Atrium Drive Orl FL 32822	\$ 151,923.00
3677 Atrium Drive Orl FL 32822	\$ 163,075.00
417 Montego Bay Ct, St Augustine FL 32080	\$ 589,378.00
MML IRA	\$ 127,246.00
Mass Mut 1	\$ 29,069.00
Mass Mut 2	\$ 37,712.00
Sum 529 Plans	\$ 5,500.00
Guideline	\$ 138,944.00
Crypto	\$ 59,947.00
Pontoon Loan	\$ 18,500.00
Bank Accounts Chase Bank	\$ 185,014.00
Bank Accounts Suntrust Bank	\$ 5,500.00

2025 Form 6 - Full and Public Disclosure of Financial Interests**Liabilities**

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
United Wholesale	UWM, PO Box 650530 Dallas TX 75265	\$ 788,938.00
Lakeview Mtg	Mr Cooper, PO Box 650783	\$ 39,299.00
NewRez	75 Beattie Place, Suite LL202 Greenville SC 29601	\$ 19,981.00
Yamaha Boat Loan	PO Box 740003 Atlanta GA 30374	\$ 104,505.00
TD Auto Finance Car Loan	PO Box 9223 Farmington Hills MI 48333	\$ 20,202.00
Bank of America Car Loan	BOA, NA PO Box 17237 Wilmington DE 19886	\$ 59,400.00
Santandar Car Loan	PO Box 660633, Dallas TX 75266	\$ 51,730.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

2025 Form 6 - Full and Public Disclosure of Financial Interests

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

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.

Douglas Alan Barrow

Digitally signed: 05/31/2026

For Qualifying
purposes Only

Form **8879**

(Rev. January 2021)

Department of the Treasury
Internal Revenue Service**IRS e-file Signature Authorization**

▶ ERO must obtain and retain completed Form 8879.

▶ Go to www.irs.gov/Form8879 for the latest information.

RECEIVED

OMB No. 1545-0074

Submission Identification Number (SID) ▶ [REDACTED]

2026 JUN -2 PM 12:18

Taxpayer's name

DOUG BARROW

Social security number

[REDACTED]

Spouse's name

ELIZABETH BARROW

Spouse's social security number

[REDACTED]

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	590,049
2	Total tax	2	91,258
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	92,133
4	Amount you want refunded to you	4	875
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

- ☒ I authorize **DICKENS WEALTH MANAGEMENT, LLC** to enter or generate my PIN [REDACTED] as my signature on the income tax return (original or amended) I am now authorizing. ERO firm name 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 ▶ **04/07/26**

Spouse's PIN: check one box only

- ☒ I authorize **DICKENS WEALTH MANAGEMENT, LLC** to enter or generate my PIN [REDACTED] as my signature on the income tax return (original or amended) I am now authorizing. ERO firm name 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 ▶ **04/07/26****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.

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 authorized 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 ▶

Date ▶

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

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

Form **8879** (Rev. 01-2021)

Form	1040	Department of the Treasury—Internal Revenue Service	2025	OMB No. 1545-0074	IRS Use Only—Do not write or staple in this space.
U.S. Individual Income Tax Return					
For the year Jan. 1—Dec. 31, 2025, or other tax year beginning 2025, ending 20 See separate instructions.					
Filed pursuant to section 301.9100-2		Combat zone		Deceased Spouse	
Other					
Your first name and middle initial DOUG		Last name BARROW		Your social security number	
If joint return, spouse's first name and middle initial ELIZABETH		Last name BARROW		Spouse's social security number	
Home address (number and street). If you have a P.O. box, see instructions. 13635 MALLARD WAY				Apt. no.	
City, town, or post office. If you have a foreign address, also complete spaces below. WEST PALM BEACH				State FL ZIP code 33418	
Foreign country name		Foreign province/state/county		Foreign postal code	
Filing Status		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.			
☒ Single		☐ Head of household (HOH)			
☒ Married filing jointly (even if only one had income)		☐ Qualifying surviving spouse (QSS)			
☐ 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		Dependent 1 Dependent 2 Dependent 3 Dependent 4			
(see instructions)		(1) First name (2) Last name (3) SSN (4) Relationship (5) Check if lived with you more than half of 2025 (6) Check if (7) Credits			
If more than four dependents, see instructions and check here ☐					
Income		1a Total amount from Form(s) W-2, box 1 (see instructions) 1b Household employee wages not reported on Form(s) W-2 1c Tip income not reported on line 1a (see instructions) 1d Medicaid waiver payments not reported on Form(s) W-2 (see instructions) 1e Taxable dependent care benefits from Form 2441, line 26 1f Employer-provided adoption benefits from Form 8839, line 31 1g Wages from Form 8919, line 6 1h Other earned income (see instructions). Enter type and amount: 1i Nontaxable combat pay election (see instructions) 1z Add lines 1a through 1h			
Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a Form W-2, see instructions.		1a 163,716 1b 1c 1d 1e 1f 1g 1h 1i 1z 163,716			
Attach Sch. B if required.		2a Tax-exempt interest 2a 2b Taxable interest 2b 2c Check if your child's dividends are included in 1 Line 3a 2 Line 3b 2c 2d Qualified dividends 2d 2e Ordinary dividends 2e 2f IRA distributions 2f 2g Taxable amount 2g 2h Check if (see instructions) 1 Rollover 2 QCD 3 2h 2i Pensions and annuities 2i 2j Taxable amount 2j 2k Check if (see instructions) 1 Rollover 2 PSO 3 2k 2l Soc. sec. ben. 2l 2m Taxable amount 2m 2n If you elect to use the lump-sum election method, check here (see instructions) 2n 2o If you are married filing separately and lived apart from your spouse the entire year (see inst.), check here 2o 2p Capital gain or (loss). Attach Schedule D if required 2p 2q Check if: ☐ Schedule D not required ☐ Includes child's capital gain or (loss) 2q 2r Additional income from Schedule 1, line 10 2r 2s Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7a, and 8. This is your total income 2s 2t Adjustments to income from Schedule 1, line 26 2t 2u Subtract line 2t from line 2s. This is your adjusted gross income 2u			
		7a 7,671 8 419,044 9 590,431 10 382 11a 590,049			
For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.					
Form 1040 (2025)					

Tax and Credits

11b Amount from line 11a (adjusted gross income) 11b - 590,049

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

Payments and Refundable Credits

25 Federal income tax withheld from:

a Form(s) W-2

b Form(s) 1099

c Other forms (see instructions)

d Add lines 25a through 25c

26 2025 estimated tax payments and amount applied from 2024 return

If you made estimated tax payments with your former spouse in 2024,

enter their SSN (see instructions):

27a Earned income credit (EIC)

b Clergy filing Schedule SE (see instructions)

c If you do not want to claim the EIC, check here

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

29 American opportunity credit from Form 8863, line 4

30 Refundable adoption credit from Form 8839, line 13

31 Amount from Schedule 3, line 15

32 Add lines 27a, 28, 29, 30, and 31. These are your total other payments and refundable credits

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

Refund

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

35a Amount of line 34 you want refunded to you. If Form 8888 is attached, check here

b Routing number

c Type: ☒ Checking ☐ Savings

d Account number

Direct deposit? See instructions.

36 Amount of line 34 you want applied to your 2026 estimated tax

Amount You Owe

37 Subtract line 33 from line 24. This is the amount you owe.

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

38 Estimated tax penalty (see instructions)

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions.

☐ Yes. Complete below.☐ No

Designee's name

Phone no.

Personal identification number (PIN)

Sign Here

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

Your signature

Date

Your occupation

ASSET MANAGER

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

FINANCIAL PROFESSIONAL

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

MARK S DICKENS

04/10/26

P01394418

☐ Self-employed

Use Only

Firm's name DICKENS WEALTH MANAGEMENT, LLC

Phone no. 813-980-6180

PO BOX 1185

Firm's address WINDERMERE

FL 34786

Firm's EIN 81-3158053

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

DOUG & ELIZABETH BARROW

Your social security number

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	28,535
3	Business income or (loss). Attach Schedule C		4	
4	Other gains or (losses). Check if any from Form(s): ☐ 4797 ☐ 4684		5	388,236
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		6	
6	Farm income or (loss). Attach Schedule F		7	
7	Unemployment compensation. If you repaid a 2025 overpayment (see instructions), check here ☐ and enter amount repaid:			
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(f) 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: COINBASE	8z	2,273	
9	Total other income. Add lines 8a through 8z		9	2,273
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	419,044

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	382
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 8l from the rental of personal property engaged in for profit	24b	
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c	
d	Reforestation amortization and expenses	24d	
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e	
f	Contributions to section 501(c)(18)(D) pension plans	24f	
g	Contributions by certain chaplains to section 403(b) plans	24g	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h	
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i	
j	Housing deduction from Form 2555	24j	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k	
z	Other adjustments. List type and amount:	24z	
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	26	382

SCHEDULE 2
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Taxes

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

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

OMB No. 1545-0074

2025

Attachment
Sequence No. **02**

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

DOUG & ELIZABETH BARROW

Your social security number

Part I Tax

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

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE. Check if any exemption from (see instructions): 1 ☐ 4361 2 ☐ 4029 3 ☐	4	764
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	5	
6	Uncollected social security and Medicare tax on wages. Attach Form 8919	6	
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. If not required, check here ☐	8	
9	Household employment taxes. Attach Schedule H	9	
10	Reserved for future use	10	
11	Additional Medicare Tax. Attach Form 8959	11	
12	Net investment income tax. Attach Form 8960	12	291
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)

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****1,055**

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

2025

Attachment
Sequence No. **03**

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

DOUG & ELIZABETH BARROW

Your social security number

[REDACTED]

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	
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	8,403
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	8,403
8	Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20	8	8,403

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

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

2025

Attachment
Sequence No. **07**

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

DOUG & ELIZABETH BARROW

Your social security number

Medical

**and
Dental
Expenses**

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

- 1 Medical and dental expenses (see instructions) 1
- 2 Enter amount from Form 1040 or 1040-SR, line 11b 2 **590,049**
- 3 Multiply line 2 by 7.5% (0.075) 3 **44,254**
- 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- 4

**Taxes You
Paid**

- 5 State and local taxes (SALT).
- a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box ☒ 5a **2,174**
- b State and local real estate taxes (see instructions) 5b **17,960**
- c State and local personal property taxes 5c
- d Add lines 5a through 5c 5d **20,134**
- e Enter the smaller of line 5d or \$40,000 (\$20,000 if married filing separately). If Form 1040 or 1040-SR, line 11b is more than \$500,000 (\$250,000 if married filing separately), or if you completed Form 2555, Form 4563, or excluded income from Puerto Rico, see instructions 5e **12,985**
- 6 Other taxes. List type and amount: 6
- 7 Add lines 5e and 6 7 **12,985**

**Interest
You Paid**

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

- 8 Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box ☐
- a Home mortgage interest and points reported to you on Form 1098. See instructions if limited 8a **29,287**
- 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 the person's name, identifying no., and address 8b
- c Points not reported to you on Form 1098. See instructions for special rules 8c
- d Reserved for future use 8d
- e Add lines 8a through 8c 8e **29,287**
- 9 Investment interest. Attach Form 4952 if required. See instructions 9
- 10 Add lines 8e and 9 10 **29,287**

**Gifts to
Charity**

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

- 11 Gifts by cash or check. If you made any gift of \$250 or more, see instructions 11 **13,480**
- 12 Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500 12 **500**
- 13 Carryover from prior year 13
- 14 Add lines 11 through 13 14 **13,980**

**Casualty and
Theft Losses**

- 15 Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions 15

**Other
Itemized
Deductions**

- 16 Other—from list in Instructions. List type and amount: 16

Total

**Itemized
Deductions**

- 17 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12e 17 **56,252**
- 18 If you elect to itemize deductions even though they are less than your standard deduction, check this box ☐ 18

For Paperwork Reduction Act Notice, see the Instructions for Form 1040.

Schedule A (Form 1040) 2025

Form 1040	State and Local Tax (SALT) Limitation Worksheet	2025
Name DOUG & ELIZABETH BARROW		Taxpayer Identification Number

2025 Schedule A Itemized Deductions - State and Local Taxes Limitation

1. Enter the Adjusted Gross Income (AGI) from Form 1040, 1040-SR or 1040-NR Line 11b	1.	590,049
2. Additions to Adjusted Gross Income		
Excluded Puerto Rico Income	0	
Foreign Earned Income and/or Housing Exclusion from Form 2555, line 45	0	
Housing Deduction from Form 2555, line 50	0	
Excluded American Samoa Income from Form 4563, line 15	0	
Total Additions to Adjusted Gross Income	2.	0
3. Add Lines 1 and 2 (Total Modified AGI)	3.	590,049
4. Enter \$500,000 (\$250,000 if married filing separately (MFS))	4.	500,000
5. Subtract Line 4 from Line 3 (leave blank if less than zero)	5.	90,049
6. Enter \$40,000	6.	40,000
7. Multiply Line 5 by 30% (0.30)	7.	27,015
8. Subtract Line 7 from Line 6 (leave blank if less than zero)	8.	12,985
9. Enter the larger of Line 8 or \$10,000	9.	12,985
10. State and local tax deduction - Smaller of Line 9 (half the amount of Line 9, if MFS) or Schedule A line 5d (1040-NR Schedule A Line 1a)	10.	12,985

Client Copy

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service

Profit or Loss From Business

(Sole Proprietorship)

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

OMB No. 1545-0074

2025

Attachment
Sequence No. **09**

Name of proprietor

DOUG BARROW

Social security number (SSN)

[REDACTED]

A Principal business or profession, including product or service (see instructions)

HOTEL MANAGEMENT

B Enter code from instructions

812990

C Business name. If no separate business name, leave blank.

HERITAGE PARK CONSULTING LLC

D Employer ID number (EIN) (see instr.)

92-3726364

E Business address (including suite or room no.)

13635 MALLARD WAY

City, town or post office, state, and ZIP code

WEST PALM BEACH

FL 33418

F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) _____

G Did you "materially participate" in the operation of this business during 2025? If "No," see instructions for limit on losses

☒ Yes ☐ No

H If you started or acquired this business during 2025, check here

☐ Yes ☒ No

I Did you make any payments in 2025 that would require you to file Form(s) 1099? See instructions

☐ Yes ☒ No

J If "Yes," did you or will you file required Form(s) 1099?

☐ Yes ☒ No

Part I Income

1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked ☐

1 **37,682**

2 Returns and allowances

2

3 Subtract line 2 from line 1

3 **37,682**

4 Cost of goods sold (from line 42)

4 **9,147**

5 Gross profit. Subtract line 4 from line 3

5 **28,535**

6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)

6

7 Gross income. Add lines 5 and 6

7 **28,535**

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

8 Advertising

8

18 Office expense (see instructions)

18

9 Car and truck expenses
(see instructions)

9

19 Pension and profit-sharing plans

19

10 Commissions and fees

10

20 Rent or lease (see instructions):

20a

11 Contract labor (see instructions)

11

20a Vehicles, machinery, and equipment

20a

12 Depletion

12

20b Other business property

20b

13 Depreciation and section 179
expense deduction (not
included in Part III) (see
instructions)

13

21 Repairs and maintenance

21

14 Employee benefit programs
(other than on line 19)

14

22 Supplies (not included in Part III)

22

15 Insurance (other than health)

15

23 Taxes and licenses

23

16 Int. (see instr.):

16a

24 Travel and meals:

24a

a Mortgage (paid to banks, etc.)

16a

a Travel

24a

b Other

16b

b Deductible meals (see
instructions)

24b

17 Legal and professional services

17

25 Utilities

25

28 Total expenses before expenses for business use of home. Add lines 8 through 27b

28 **0**

29 Tentative profit or (loss). Subtract line 28 from line 7

29 **28,535**

30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions.

Simplified method filers only: Enter the total square footage of (a) your home: _____

and (b) the part of your home used for business: _____. Use the Simplified

Method Worksheet in the instructions to figure the amount to enter on line 30

30

31 Net profit or (loss). Subtract line 30 from line 29.

• If a profit, enter on both **Schedule 1 (Form 1040), line 3**, and on **Schedule SE, line 2**. (If you checked the box on line 1, see instructions.) Estates and trusts, enter on **Form 1041, line 3**.

• If a loss, you must go to line 32.

31 **28,535**

32 If you have a loss, check the box that describes your investment in this activity. See instructions.

• If you checked 32a, enter the loss on both **Schedule 1 (Form 1040), line 3**, and on **Schedule SE, line 2**. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on **Form 1041, line 3**.

• If you checked 32b, you must attach Form 6198. Your loss may be limited.

32a ☐ All investment is at risk.
32b ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule C (Form 1040) 2025

Part III Cost of Goods Sold (see instructions)

33	Method(s) used to value closing inventory:	a ☐ Cost	b ☐ Lower of cost or market	c ☐ Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation ☐ Yes ☐ No			
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	0	
36	Purchases less cost of items withdrawn for personal use	36	9,147	
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40	9,147	
41	Inventory at end of year	41	0	
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42	9,147	

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month/day/year)			
44	Of the total number of miles you drove your vehicle during 2025, enter the number of miles you used your vehicle for:			
	a Business	b Commuting (see instructions)	c Other	
45	Was your vehicle available for personal use during off-duty hours?			☐ Yes ☐ No
46	Do you (or your spouse) have another vehicle available for personal use?			☐ Yes ☐ No
47a	Do you have evidence to support your deduction?			☐ Yes ☐ No
	b If "Yes," is the evidence written?			☐ Yes ☐ No

Part V Other Expenses. List below business expenses not included on lines 8-27a, or line 30.

48	Total other expenses. Enter here and on line 27b	48	
----	--	----	--

SCHEDULE D
(Form 1040)

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

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

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

OMB No. 1545-0074

2025

Attachment
Sequence No. 12

Name(s) shown on return

DOUG & ELIZABETH BARROW

Your social security number

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

☐ Yes ☒ No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B or Form 1099-DA for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A or Box G checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B or Box H checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C or Box I checked	62,975	56,227	0	7,748
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824			4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions			6	
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back			7	7,748

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

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B or Form 1099-DA for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D or Box J checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E or Box K checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F or Box L checked	297	374	0	-77
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824			11	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			12	
13 Capital gain distributions. See the instructions			13	
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions			14	
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on the back			15	-77

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

Schedule D (Form 1040) 2025

Part III Summary**16** Combine lines 7 and 15 and enter the result**16****7,671**

- 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.

Department of the Treasury
Internal Revenue Service

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Go to www.irs.gov/Form8949 for instructions and the latest information.

Name(s) shown on return

Social security number or taxpayer identification number

DOUG & ELIZABETH BARROW

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

Part I

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-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 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, C, G, H, or I below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-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.

- ☐ (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- ☐ (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- ☐ (C) Short-term transactions, other than digital asset transactions, not reported to you on Form 1099-B or Form 1099-DA
- ☐ (G) Short-term transactions reported on Form(s) 1099-DA showing basis was reported to the IRS (see Note above)
- ☐ (H) Short-term transactions reported on Form(s) 1099-DA showing basis was not reported to the IRS
- ☒ (I) Short-term digital asset transactions not reported to you on Form 1099-DA or Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the note below and see Code A 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	
	COINBASE CRYPTO	VARIOUS	VARIOUS	62,975	55,227			7,748
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 1b (if Box A or Box G above is checked), line 2 (if Box B or Box H above is checked), or line 3 (if Box C or Box I above is checked).				62,975	55,227		0	7,748

Note: If you checked Box A or Box G 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.

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

Form **8949** (2025)

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

Social security number or taxpayer identification number

DOUG & ELIZABETH BARROW

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

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

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

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

- ☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- ☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- ☐ (F) Long-term transactions, other than digital asset transactions, not reported to you on Form 1099-B or Form 1099-DA
- ☐ (J) Long-term transactions reported on Form(s) 1099-DA showing basis was reported to the IRS (see Note above)
- ☐ (K) Long-term transactions reported on Form(s) 1099-DA showing basis was not reported to the IRS
- ☒ (L) Long-term digital asset transactions not reported to you on Form 1099-DA or Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (g) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
	COINBASE CRYPTO	VARIOUS	VARIOUS	219	266			-47
	COINBASE CRYPTO	VARIOUS	VARIOUS	78	108			-30

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 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

DOUG & ELIZABETH BARROW

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	3944 ATRIUM DRIVE, ORLANDO, FL 32822
B	3677 ATRIUM DRIVE, ORLANDO, FL 32822
C	417 MONTEGO BAY CT, SAINT AUGUSTINE, FL 32080

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 1		A 365		
B 1		B 365		
C 1		C 365		

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) |

		Properties:		
		B	C	
Income:				
3 Rents received	3	13,602	13,800	34,094
4 Royalties received	4			
Expenses:				
5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7	1,820		1,350
8 Commissions	8			6,819
9 Insurance	9	1,645	1,496	
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see instructions)	12	703		15,181
13 Other interest	13			
14 Repairs	14			4,653
15 Supplies	15			
16 Taxes	16	2,535	2,775	6,554
17 Utilities	17	2,228		
18 Depreciation expense or depletion	18	3,637	2,776	11,646
19 Other (list) SEE STATEMENT 1,2,3	19	6,460	5,512	6,960
20 Total expenses. Add lines 5 through 19	20	19,028	12,559	53,163
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21	-5,426	1,241	-19,069
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	5,426		19,069

23a Total of all amounts reported on line 3 for all rental properties	23a	61,496
b Total of all amounts reported on line 4 for all royalty properties	23b	
c Total of all amounts reported on line 12 for all properties	23c	15,884
d Total of all amounts reported on line 18 for all properties	23d	18,059
e Total of all amounts reported on line 20 for all properties	23e	84,750

24 Income. Add positive amounts shown on line 21. Do not include any losses	24	1,241
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	24,495
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	26	-23,254

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2025

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

Your social security number

DOUG & ELIZABETH BARROW**Caution:** The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.**Part II Income or Loss From Partnerships and S Corporations**

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

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

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
A	HERITAGE PARK INVESTMENTS LLC	P		85-3780634		
B	HERITAGE PARK HOSPITALITY GROUP LLC	S		81-5258224	X	
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				
B				411,490
C				
D				
29a Totals				411,490
b Totals				
30 Add columns (h) and (k) of line 29a			30	411,490
31 Add columns (g), (i), and (j) of line 29b			31	0
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31			32	411,490

Part III Income or Loss From Estates and Trusts

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

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A			
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

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b

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

39

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5	41	388,236
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	-23,254

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

2025

Attachment
Sequence No. **17**

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

Social security number of person
with self-employment income

DOUG BARROW

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. Except 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, stop here and go to line 11

- b** Unreported tips subject to social security tax from Form 4131, 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

3

4a

4b

4c

5b

6

7

8a

8b

8c

8d

9

10

11

12

13

382

28,535

28,535

26,352

26,352

0

26,352

176,100

176,100

764

764

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**7,240**

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.

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Department of the Treasury
Internal Revenue ServiceGo to www.irs.gov/Form3800 for instructions and the latest information.
You must include all pages of Form 3800 with your return.

Name(s) shown on return

Identifying number

DOUG & ELIZABETH BARROW

A Corporate Alternative Minimum Tax (CAMT) and Base Erosion Anti-Abuse Tax (BEAT). Are you both (a) an "applicable corporation" within the meaning of section 59(k)(1) for the CAMT, and (b) an "applicable taxpayer" within the meaning of section 59A(e) for the BEAT? See instructions

☐ Yes ☐ No
☐ Yes ☐ No

B (i) Did you make an entry in Part III, column (f)?

(ii) If "Yes," enter the number of transfer election statements attached to your return

Part I Credits Not Allowed Against Tentative Minimum Tax (TMT)

Complete applicable portions of Parts III and IV before Parts I and II. See instructions.

1	Credits not subject to the passive activity limit from Part III, line 2: combine column (e) with non-passive amounts from column (f)	1	8,403
2	Credits subject to the passive activity limit. Combine Part III, line 2, column (d), and passive amounts included in line 2, column (f); and Part IV, line 6, column (d)	2	
3	Enter the portion of line 2 allowed for 2025	3	
4	Enter the portion of Part IV, line 6, column (f), that is from carryforwards to 2025 Check this box if the carryforward was changed or revised from the original reported amount ☐	4	
5	Enter the portion of Part IV, line 6, column (f), that is from carrybacks from 2026	5	
6	Add lines 1, 3, 4, and 5	6	8,403

Part II Figuring Credit Allowed After Limitations**Section A—Figuring Credit Allowed After Section 38(c)(1) Limitation Based on Amount of Tax**

7	Regular tax before credits: • Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, line 16; and Schedule 2 (Form 1040), line 1z. • Corporations. Enter the amount from Form 1120, Schedule J, line 2 (excluding the base erosion minimum tax entered on line 1f); or the applicable line of your return. • Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a, 1b, and 1d, plus any Form 8978 amount included on line 1e; or the amount from the applicable line of your return.	7	98,606
8	Alternative minimum tax: • Individuals. Enter the amount from Form 6251, line 11. • Corporations. Enter the amount from Form 4626, Part II, line 13. • Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54.	8	
9	Add lines 7 and 8	9	98,606
10a	Foreign tax credit	10a	
b	Certain allowable credits (see instructions)	10b	
c	Add lines 10a and 10b	10c	
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	98,606
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-	12	98,606
13	Enter 25% (0.25) of the excess, if any, of line 12 (line 11 for corporations) over \$25,000. See instructions	13	18,402
14	Tentative minimum tax: • Individuals. Enter the amount from Form 6251, line 9. • Corporations. Enter -0-. • Estates and trusts. Enter the amount from Schedule I (Form 1041), line 52.	14	86,914
15	Enter the greater of line 13 or line 14	15	86,914
16	Subtract line 15 from line 11. If zero or less, enter -0-	16	11,692
17	Enter the smaller of line 6 or line 16. This is the amount of your credit allowed after the limitation of section 38(c)(1) C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or reorganization.	17	8,403

For Paperwork Reduction Act Notice, see separate instructions.

Form 3800 (2025)

Part II Figuring Credit Allowed After Limitations (continued)**Section B—Figuring Section 38(c)(2) Empowerment Zone and Renewal Community Employment Credit Allowed**

Note: If you are not required to report any amounts on line 22 or line 24 below, skip lines 18 through 25 and enter -0- on line 26.

18	Multiply line 14 by 75% (0.75). See instructions	18	
19	Enter the greater of line 13 or line 18	19	
20	Subtract line 19 from line 11. If zero or less, enter -0-	20	
21	Subtract line 17 from line 20. If zero or less, enter -0-	21	
22	Combine the amounts from Part III, line 3, column (e), with the amount from Part IV, line 3, column (f)	22	
23	Passive activity credit from Part III, line 3, column (d), plus the amount from Part IV, line 3, column (d)	23	
24	Enter the applicable passive activity credit allowed for 2025. See instructions	24	
25	Add lines 22 and 24	25	
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0

Section C—Figuring the Specified Credit Amount Allowed Under Section 38(c)(4)

27	Subtract line 13 from line 11. If zero or less, enter -0-	27	80,204
28	Add lines 17 and 26	28	8,403
29	Subtract line 28 from line 27. If zero or less, enter -0-	29	71,801
30	Enter the general business credit from line 5 of Part III: combine column (d) with non-passive amounts in column (f). See instructions	30	
31	Reserved	31	
32	Passive activity credits from line 5 of Part III: combine column (d) with passive amounts in column (f). Also include passive specified credit carryovers from Part IV, line 5, column (d). See instructions	32	
33	Enter the applicable passive activity credits allowed for 2025. See instructions	33	
34	Carryforward of business credit to 2025. If completing Part IV and carrying forward a business credit(s), see instructions	34	
	Check this box if the carryforward was changed or revised from the original reported amount ☐		
35	Carryback of business credit from 2026. If completing Part IV and carrying back a business credit(s), see instructions	35	
36	Add lines 30, 33, 34, and 35	36	
37	Enter the smaller of line 29 or line 36. This is the amount allowed for specified credits	37	

Section D—Credits Allowed After Limitations

38	Credit allowed for the current year. Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36; see instructions) as indicated below or on the applicable line of your return.	38	8,403
	- Individuals. Schedule 3 (Form 1040), line 6a. - Corporations. Form 1120, Schedule J, line 5c. - Estates and trusts. Form 1041, Schedule G, line 2b.		

Part III

Current Year General Business Credits (GBCs) (see instructions). If there is more than one number applicable for column (b) or (c) for a line in Part III, enter the number of such items in column (a), complete Part V, and see instructions for what to report on that line in Part III.

	(a) No. of items	(b) Elective payment or transfer registration number	(c) Pass-through or transferor credit entity EIN	(d) Credits subject to the passive activity limit, before application of the limit	(e) Credits not subject to the passive activity limits	(f) Credit transfer election amount (enter amounts transferred out as a negative amount)	(g) Combine columns (e) and (f) with the credit from column (d) allowed after the passive activity limit	(h) Gross elective payment election (EPE) amount	(i) Amount of column (g) applied against tax in Part II	(j) Net EPE amount. Enter the smaller of column (h) or column (g) minus column (i)
1a Form 3468, Part II										
b Form 7207										
c Form 6765										
d Form 3468, Part III										
e Form 8828										
f Form 8835, Part II										
g Form 7210										
h Form 8820										
i Form 8874										
j Form 8081, Part I			81-5258224							
k Form 8882					8,403		8,403		8,403	
l Form 8864 (deceased)										
m Form 8866										
n Form 8905										
o Form 3468, Part IV										
p Form 8908										
q Form 7216, Part II										
r Reserved										
s Form 8911, Part I										
t Form 8830										
u Form 7213, Part II										
v Form 3468, Part V										
w Form 8932										
x Form 8933										
y Form 8936, Part II										
z Reserved										
aa Form 8936, Part V										
bb Form 8904										
cc Form 7213, Part I										
dd Form 8881, Part II										
ee Form 8881, Part III										
ff Form 8964 (SAF)										
gg Form 7211, Part II										
hh Reserved										
ii Reserved										
zz Other credits					8,403		8,403		8,403	
2 Add lines 1a-1zz					8,403		8,403		8,403	

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Part III **Current Year General Business Credits (GBCs)** (see instructions). If there is more than one number applicable for column (b) or (c) for a line in Part III, enter the number of such items in column (a), complete Part V, and see instructions for what to report on that line in Part III. (continued)

	(a) No. of items	(b) Elective payment or transfer registration number	(c) Pass-through or transferor credit entity EIN	(d) Credits subject to the passive activity limit, before application of the limit	(e) Credits not subject to the passive activity limits	(f) Credit transfer election amount (enter amounts transferred out as a negative amount)	(g) Combine columns (e) and (f) with the credit from column (d) allowed after the passive activity limit	(h) Gross elective payment election (EPE) amount	(i) Amount of column (g) applied against tax in Part II	(j) Net EPE amount. Enter the smaller of column (h) or column (g) minus column (i)
3	Form 8844									
4	Specified credits:									
a	Form 3468, Part VI									
b	Form 5884									
c	Form 8478									
d	Form 8588									
e	Form 8833, Part II									
f	Form 8846									
g	Form 8800									
h	Form 8941									
i	Form 6785 (ESB)									
j	Form 8994									
k	Form 3468, Part VI									
l	Reserved									
m	Reserved									
n	Other specified									
o	credits									
5	Add lines 4a-4r									
6	Add lines 2, 3, and 5				8,403		8,403		8,403	

Form 3800 (2025)

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Part IV Carryovers of General Business Credits (GBCs) (see instructions)

Carryover

	(a) No. of items	(b) Originating tax year	(c) Pass-through entity EIN	Subject to the passive activity limits		(f) Not subject to passive activity limits	(g) Amount of columns (e) and (f) applied against tax in Part II	(h) Amount of columns (e) and (f) recaptured or otherwise adjusted	(i) Carryforward to 2026. Subtract the sum of columns (g) and (h) from the sum of columns (e) and (f)
				(d) Before the passive activity limitations	(e) After the passive activity limitations				
1a Form 3468, Part II									
b Form 7207									
c Form 6765									
d Form 3468, Part III									
e Form 8826									
f Form 8835, Part II									
g Form 7210									
h Form 8820									
i Form 8874									
j Form 8881, Part I									
k Form 8882									
l Form 8864									
m Form 8896									
n Form 8906									
o Form 3468, Part IV									
p Form 8908									
q Form 7218, Part II									
r Reserved									
s Form 8911									
t Form 8830									
u Form 7213, Part II									
v Form 3468, Part V									
w Form 8932									
x Form 8933									
y Form 8936, Part II									
z Reserved									
aa Form 8936, Part V									
bb Form 8904									
cc Form 7213, Part I									
dd Form 8881, Part II									
ee Form 8881, Part III									
ff Form 8864									
gg Form 7211, Part II									
hh Reserved									
ii Reserved									
jj Reserved									
zz Other									

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Part IV Carryovers of General Business Credits (GBCs) (see instructions) (continued)**Carryover**

Credits carried over to tax year 2025

Note: Credits on lines 2a through 2x are expired. Only carryforwards are allowed.

	(a) No. of items	(b) Originating tax year	(c) Pass-through entity EIN	Subject to the passive activity limits		(f) Not subject to passive activity limits	(g) Amount of columns (e) and (f) applied against tax in Part II	(h) Amount of columns (e) and (f) recaptured or otherwise adjusted	(i) Carryforward to 2026. Subtract the sum of columns (g) and (h) from the sum of columns (e) and (f)
				(d) Before the passive activity limitations	(e) After the passive activity limitations				
2a Form 5894-A									
b Form 8586 (pre-2008)									
c Form 8845									
d Form 8907									
e Form 8909									
f Form 8923									
g Form 8834									
h Form 8931									
i Form 1085-B									
j Form 5894 (pre-2007)									
k Form 6478 (pre-2005)									
l Form 8846 (pre-2007)									
m Form 8900 (pre-2008)									
n Trans-Alaska pipeline liability									
o Form 5894-A, Section A									
p Form 5894-A, Section B									
q Form 5894-A, Section A									
r Form 5894-A, Section B									
s Form 5894-B									
t Form 8847									
u Form 8851									
v Form 8894									
w Form 8942									
x Form 8910									
y Reserved									
z Reserved									
zz Other credits (see instr.)									
3 Form 8844									

Form 3800 (2025)

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Part IV Carryovers of General Business Credits (GBCs) (see instructions) (continued)

Carryover

Credits carried over to
tax year 2025

	(a) No. of items	(b) Originating tax year	(c) Pass-through entity EIN	Subject to the passive activity limits		(f) Not subject to passive activity limits	(g) Amount of columns (e) and (f) applied against tax in Part II	(h) Amount of columns (e) and (f) recaptured or otherwise adjusted	(i) Carryforward to 2026. Subtract the sum of columns (g) and (h) from the sum of columns (e) and (f)
				(d) Before the passive activity limitations	(e) After the passive activity limitations				
4 Specified credits:									
a Form 3468, Part VI									
b Form 5884									
c Form 6478									
d Form 8586 (post-2007)									
e Form 8835									
f Form 8846									
g Form 8900									
h Form 8941									
i Form 8765 ESB credit									
j Form 8994									
k Form 3468, Part VII (post-2007)									
l Reserved									
m Reserved									
n ESBC (see instr.)									
o Other specified credits									
p Add lines 4a-4z									
q Add lines 1a through 2z									
r Add lines 3, 5, and 6									

Form 3800 (2025)

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Department of the Treasury
Internal Revenue Service

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

Go to www.irs.gov/Form6251 for instructions and the latest information.

2025

Attachment
Sequence No. 32

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

DOUG & ELIZABETH BARROW

Your social security number

Part I Alternative Minimum Taxable Income (See instructions for how to complete each line.)

1a	Subtract Schedule 1-A (Form 1040), line 37, from Form 1040, 1040-SR, or 1040-NR, line 14	1a	138,550
b	Subtract line 1a from Form 1040, 1040-SR, or 1040-NR, line 11b (if less than zero, enter as a negative amount)	1b	451,499
2a	If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040 or 1040-SR, line 12e	2a	12,985
b	Tax refund from Schedule 1 (Form 1040), line 1 or line 8z	2b	
c	Investment interest expense (difference between regular tax and AMT)	2c	
d	Depletion (difference between regular tax and AMT)	2d	
e	Net operating loss deduction from Schedule 1 (Form 1040), line 8a. Enter as a positive amount	2e	
f	Alternative tax net operating loss deduction	2f	
g	Interest from specified private activity bonds exempt from the regular tax	2g	
h	Qualified small business stock, see instructions	2h	
i	Exercise of incentive stock options (excess of AMT income over regular tax income)	2i	
j	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	2j	
k	Disposition of property (difference between AMT and regular tax gain or loss)	2k	
l	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	2l	
m	Passive activities (difference between AMT and regular tax income or loss)	2m	0
n	Loss limitations (difference between AMT and regular tax income or loss)	2n	0
o	Circulation costs (difference between regular tax and AMT)	2o	
p	Long-term contracts (difference between AMT and regular tax income)	2p	
q	Mining costs (difference between regular tax and AMT)	2q	
r	Research and experimental costs (difference between regular tax and AMT)	2r	
s	Income from certain installment sales before January 1, 1987	2s	
t	Intangible drilling costs preference	2t	
3	Other adjustments, including income-based related adjustments	3	
4	Alternative minimum taxable income. Combine lines 1b through 3. If married filing separately and line 4 is more than \$900,350, see instructions.)	4	464,484

Part II Alternative Minimum Tax (AMT)

5	Exemption.		
	IF your filing status is... AND line 4 is not over... THEN enter on line 5...		
	Single or head of household \$ 626,350 \$ 88,100		
	Married filing jointly or qualifying surviving spouse 1,252,700 137,000		
	Married filing separately 626,350 68,500		
	If line 4 is over the amount shown above for your filing status, see instructions.	5	137,000
6	Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9, and 11, and go to line 10	6	327,484
7	• If you are filing Form 2555, see instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here. • All others: If line 6 is \$239,100 or less (\$119,550 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$4,782 (\$2,391 if married filing separately) from the result.	7	86,914
8	Alternative minimum tax foreign tax credit (see instructions)	8	
9	Tentative minimum tax. Subtract line 8 from line 7	9	86,914
10	Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 1z. Subtract from the result Schedule 3 (Form 1040), line 1 and any negative amount reported on Form 8978, line 14 (treated as a positive number). If zero or less, enter -0-. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line. See instructions	10	98,606
11	AMT. Subtract line 10 from line 9. If zero or less, enter -0-. Enter here and on Schedule 2 (Form 1040), line 2	11	0

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

Qualified Business Income Deduction

OMB No. 1545-0074

2025

Attachment
Sequence No. 55ADepartment of the Treasury
Internal Revenue Service

Attach to your tax return.

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

Name(s) shown on return

DOUG & ELIZABETH BARROW

Your taxpayer identification number

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

Use this form if your taxable income, before your qualified business income deduction, is above \$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	CONSULTING	☐	☐	81-5258224	☐
B	HERITAGE PARK CONSULTING LLC	☐	☐	92-3726364	☐
C		☐	☐		☐

Part II Determine Your Adjusted Qualified Business Income

	A	B	C
2 Qualified business income from the trade, business, or aggregation. See instructions	2 412,490	28,153	
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 82,298	5,631	
4 Allocable share of W-2 wages from the trade, business, or aggregation	4 1,192,754	0	
5 Multiply line 4 by 50% (0.50)	5 596,377	0	
6 Multiply line 4 by 25% (0.25)	6 298,189	0	
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property	7 286,641	0	
8 Multiply line 7 by 2.5% (0.025)	8 7,166	0	
9 Add lines 6 and 8	9 305,355	0	
10 Enter the greater of line 5 or line 9	10 596,377	0	
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10	11 82,298	0	
12 Phased-in reduction. Enter the amount from line 26, if any	12		
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12	13 82,298	0	
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 82,298	0	
16 Total qualified business income component. Add all amounts reported on line 15	16 82,298		

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

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

Part IV Determine Your Qualified Business Income Deduction

27 Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16	27	82,298	
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		82,298
33 Taxable income before qualified business income deduction	33	533,797	
34 Enter your net capital gain, if any, increased by any qualified dividends (see instructions)	34		
35 Subtract line 34 from line 33. If zero or less, enter -0-	35		533,797
36 Income limitation. Multiply line 35 by 20% (0.20)	36		106,759
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		82,298
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		82,298
40 Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-	40		

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

Attach to your tax return.

OMB No. 1545-2227

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

Name(s) shown on your tax return

Your social security number or EIN

DOUG & ELIZABETH BARROW**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	
3	Annuities (see instructions)		3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a	416,771	
4b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b	-416,771	
c	Combine lines 4a and 4b		4c	
5a	Net gain or loss from disposition of property (see instructions)	5a	7,671	
5b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b		
5c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c		
d	Combine lines 5a through 5c		5d	7,671
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	7,671

Part II Investment Expenses Allocable to Investment Income and Modifications

9a	Investment interest expenses (see instructions)	9a		
9b	State, local, and foreign income tax (see instructions)	9b		
9c	Miscellaneous investment expenses (see instructions)	9c		
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	7,671
13	Modified adjusted gross income (see instructions)	13	590,049	
14	Threshold based on filing status (see instructions)	14	250,000	
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	340,049	
16	Enter the smaller of line 12 or line 15		16	7,671
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	291
18a	Net investment income (line 12 above)	18a		
18b	Deductions for distributions of net investment income and charitable deductions (see instructions)	18b		
18c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c		
19a	Adjusted gross income (see instructions)	19a		
19b	Highest tax bracket for estates and trusts for the year (see instructions)	19b		
19c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c		
20	Enter the smaller of line 18c or line 19c		20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and include on your tax return (see instructions)		21	

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

Form **8960** (2025)

**S Corporation Shareholder Stock and
Debt Basis Limitations**

OMB No. 1545-2302

Attach to your tax return.

Go to www.irs.gov/Form7203 for instructions and the latest information.Attachment
Sequence No. **203**

Name of shareholder

DOUG BARROW

Identifying number

A Name of S corporation

HERITAGE PARK HOSPITALITY GROUP LLC

B Employer identification number

81-5258224

C Stock block (see instructions):

D Check applicable box(es) to indicate how stock was acquired:

(1) ☐ Original shareholder (2) ☐ Purchased (3) ☐ Inherited (4) ☐ Gifted (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	69,164
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	411,490
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		
l	Recapture of business credits		
m	Other items that increase stock basis	3m	150,000
4	Add lines 3a through 3m	4	561,490
5	Stock basis before distributions. Add lines 1, 2, and 4	5	630,654
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	559,360
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	71,294
8a	Nondeductible expenses	8a	17,462
b	Depletion for oil and gas	8b	
c	Business credits (sections 50(c)(1) and (5))	8c	
9	Add lines 8a through 8c	9	17,462
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	53,832
11	Allowable loss and deduction items. Enter the amount from line 47, column (c)	11	
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	
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	53,832

Part II Shareholder Debt Basis**Section A—Amount of Debt (If more than three debts, see instructions.)**

Description	(a) Debt 1	(b) Debt 2	(c) Debt 3	(d) Total
	☐ Formal note ☐ Open account	☐ Formal note ☐ Open account	☐ Formal note ☐ Open account	
16 Loan balance at the beginning of the corporation's tax year				
17 Additional loans (see instructions)				
18 Loan balance before repayment. Add lines 16 and 17				
19 Principal portion of debt repayment (this line doesn't include interest)				
20 Loan balance at the end of the corporation's tax year. Subtract lines 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 amount (column (a)) from the previous year	(c) Allowable loss from stock basis	(d) Allowable loss from debt basis	(e) Carryover amounts
35 Ordinary business loss					
36 Net rental real estate loss					
37 Other net rental loss					
38 Net capital loss					
39 Net section 1231 loss					
40 Other loss					
41 Section 179 deductions					
42 Charitable contributions					
43 Investment interest expense					
44 Section 59(e)(2) expenditures					
45 Other deductions					
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					

DAA

Part V

Total. Enter on Part I, lines 2a, 2b, and 2c

Part VI

Total

Part VII

Total

Part VIII

Total

Form **8582****AMT VERSION**
Passive Activity Loss Limitations

See separate instructions.

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

Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

2025Attachment
Sequence No. **858**Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Identifying number

DOUG & ELIZABETH BARROW**Part I 2025 Passive Activity Loss**

Caution: Complete Parts IV and V before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation, see *Special Allowance for Rental Real Estate Activities* in the instructions.)

1a Activities with net income (enter the amount from Part IV, column (a))	1a	
b Activities with net loss (enter the amount from Part IV, column (b))	1b	
c Prior years' unallowed losses (enter the amount from Part IV, column (c))	1c	7,379
d Combine lines 1a, 1b, and 1c	1d	-7,379

All Other Passive Activities

2a Activities with net income (enter the amount from Part V, column (a))	2a	
b Activities with net loss (enter the amount from Part V, column (b))	2b	
c Prior years' unallowed losses (enter the amount from Part V, column (c))	2c	
d Combine lines 2a, 2b, and 2c	2d	

3 Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used	3	-7,379
--	----------	---------------

If line 3 is a loss and:

- Line 1d is a loss, go to Part II.
- Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II. Instead, go to line 10.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See instructions for an example.

4 Enter the smaller of the loss on line 1d or the loss on line 3	4	7,379
5 Enter \$150,000. If married filing separately, see instructions	5	150,000
6 Enter modified adjusted gross income, but not less than zero. See instructions. Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0- on line 9. Otherwise, go to line 7.	6	614,926
7 Subtract line 6 from line 5	7	
8 Multiply line 7 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions	8	
9 Enter the smaller of line 4 or line 8. If line 3 includes any CRD, see instructions	9	0

Part III Total Losses Allowed

10 Add the income, if any, on lines 1a and 2a and enter the total	10	
11 Total losses allowed from all passive activities for 2025. Add lines 9 and 10. See instructions to find out how to report the losses on your tax return	11	0

Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions.

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
417 MONTEGO BAY CT			7,379		7,379
Total. Enter on Part I, lines 1a, 1b, and 1c			7,379		

For Paperwork Reduction Act Notice, see instructions.

Form **8582** (2025) Created 5/8/25

DAA

[REDACTED]

Form 8582 (2025)

Page 2

Part V

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 2a)	(b) Net loss (line 2b)	(c) Unallowed loss (line 2c)	(d) Gain	(e) Loss
Total. Enter on Part I, lines 2a, 2b, and 2c					

Part VI

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a).
Total			1.00		

Part VI

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
417 MONTEGO BAY CT	SCH E1	7,379	1.0000	7,379
Total		7,379	1.00	7,379

Part VI

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
417 MONTEGO BAY CT	SCH E1	7,379	7,379	
Total		7,379	7,379	

Filing Status: ☐ 1 Single ☒ 2 Married filing jointly ☐ 3 Married filing separately ☐ 4 Head of household* ☐ 5 Qualifying widow(er)*
MFS spouse name: _____ *Qualifying person that is a child but not a dependent:

Taxpayer first name and initial: **DOUG** Last name: **BARROW** Taxpayer social security number: _____

If a joint return, spouse's first name and initial: **ELIZABETH** Last name: **BARROW** Spouse's social security number: _____

Home address (number and street). If you have a P.O. box, see instructions. **13635 MALLARD WAY** Apt. no. _____ Presidential Election Campaign
Taxpayer ☐ Spouse ☐

City, town or post office, state, and ZIP code. **WEST PALM BEACH FL 33418**

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

At anytime during 2025, did you receive, sell, send, exchange, or otherwise acquire financial interest in any digital assets? ☒ Yes ☐ No

6a ☒ Taxpayer. If someone can claim you as a dependent, do not check box 6a
b ☒ Spouse
Boxes checked on 6a and 6b: **2**
Children on 6c who lived with you: **3**
Children on 6c who did not live with you: _____
Dependents on 6c not entered above: _____
Total. Add lines above: **5**

6c Dependents:

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) ☒ if qualifies for Child tax credit	Other dependents	If more than four dependents, ☐ here
_____	_____	_____	SON	☒		
_____	_____	_____	DAUGHTER	☒		
_____	_____	_____	SON	☒		

Income
(Schedule 1)

7 Wages, salaries, tips, etc. Attach Form(s) W-2: **163,716**
8a Taxable interest. Attach Schedule B if required: _____
b Tax-exempt interest. Do not include on line 8a: _____
8b _____
9a Ordinary dividends. Attach Schedule B if required: _____
b Qualified dividends: _____
9b _____
10 Taxable refunds, credits, or offsets of state and local income taxes: _____
11 Alimony received: _____
12 Business income or (loss). Attach Schedule C or E: **28,535**
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐: **7,671**
14 Other gains or (losses). Attach Form 4797: _____
15a IRA distributions: _____
15b Taxable amount: _____
16a Pensions and annuities: _____
16b Taxable amount: _____
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E: **388,236**
18 Farm income or (loss). Attach Schedule F: _____
19 Unemployment compensation: _____
20a Social security benefits: _____
20b Taxable amount: _____
21 Other income. List type and amount: **COINBASE** **2,273**
22 Combine the amounts in the far right column for lines 7 through 21. This is your total income: **590,431**

Adjusted
Gross
Income
(Schedule 1)

23 Educator expenses: _____
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ: _____
25 Health savings account deduction. Attach Form 8889: _____
26 Moving expenses. Attach Form 3903: _____
27 Deductible part of self-employment tax. Attach Schedule SE: **382**
28 Self-employed SEP, SIMPLE, and qualified plans: _____
29 Self-employed health insurance deduction: _____
30 Penalty on early withdrawal of savings: _____
31a Alimony paid b Recipient's SSN: _____
31a _____
32 IRA deduction: _____
33 Student loan interest deduction: _____
34 Reserved for future use: _____
35 Reserved for future use: _____
36 Add lines 23 through 35: **382**
37 Subtract line 36 from line 22. This is your adjusted gross income: **590,049**

Form 1040

Tax Return Reconciliation Worksheet, Page 2

2025

Name DOUG & ELIZABETH BARROW

Tp TIN

38 590,049

Tax and Credits

(Schedules 2, 3)

38 Amount from line 37 (adjusted gross income)

39a Check ☐ You were born before January 2, 1961, ☐ Blind. ☐ Total boxes checked ☐ 39aif: ☐ Spouse was born before January 2, 1961, ☐ Blind.b If your spouse itemizes on a separate return or you were a dual-status alien, check here ☐ 39b

Standard Deduction for—

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:
Single or Married filing separately, \$15,750
Married filing jointly or Qualifying widow(er), \$31,500
Head of household, \$23,625

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin)

a

41 Subtract line 40 and 40b from line 38

42 Qualified business income deduction (see instructions) Sch 1-A

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-

44 Tax (see instr.). Check if any from: a ☐ Form(s) 8814 b ☐ Form 4972 c ☐

45 Alternative minimum tax (see instructions). Attach Form 6251

46 Additions to tax (Excess advance premium tax credit repayment and clean vehicle repayment)

47 Add lines 44, 45, and 46

48 Foreign tax credit. Attach Form 1116 if required

49 Credit for child and dependent care expenses. Attach Form 2441

50 Education credits from Form 8863, line 19

51 Retirement savings contributions credit. Attach Form 8880

52 Child tax credit/credit for other dependents

53 Residential energy credits. Attach Form 5695

54 Other credits from Form: a ☒ 3800 b ☐ 8801 c ☐ 3800

55 Add lines 48 through 54. These are your total credits

56 Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-

Other Taxes

(Schedule 2)

57 Self-employment tax. Attach Schedule SE

58 Unreported social security and Medicare tax from Form: a ☐ 4137 b ☐ 8919

59 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required

60a Household employment taxes from Schedule H

b Reserved for future use

61 Taxes from: a ☐ Form 8959 b ☒ Form 8960 c ☐ Instructions. Enter code(s) FORM 8960

62 Section 965 net tax liability installment from Form 965-A

63 Add lines 56 through 61. This is your total tax

64 Federal income tax withheld from:

a Form(s) W-2

b Form(s) 1099

c Other forms

65 2025 estimated tax payments and amount applied from 2024 return

Payments

(Schedule 3)

66 Earned income credit (EIC)

67 Additional child tax credit. Attach Schedule 8812

68 American opportunity credit from Form 8863, line 8

69 Recovery rebate credit

70 Net premium tax credit. Attach Form 8962

71 Amount paid with request for extension to file

72 Excess social security and tier 1 RRTA tax withheld

73 Credit for federal tax on fuels. Attach Form 4136

74 Other payments and refundable credits

75 Total pymts. Add lines 64 - 74.

Refund

76 If line 75 is more than line 63, subtract line 63 from line 75. This is the amount you overpaid

77a Amount of line 76 you want refunded to you. If Form 8888 is attached, check here ☐b Routing number ☐ c Type: ☒ Checking ☐ Savingsd Account number ☐

78 Amount of line 76 you want applied to your 2026 estimated tax

Amount You Owe

79 Amount you owe. Subtract line 75 from line 63. For details on how to pay, see instructions

80 Estimated tax penalty (see instructions)

Int/Pen

Date filed

Int

Fail to file

Fail to pay

Total

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

Personal identification no. (PIN)

Phone no.

Other Info

Taxpayer Daytime phone number

Taxpayer: Occupation

Spouse: Occupation

☐ Taxpayer☐ Spouse

Email address

ASSET MANAGER

FINANCIAL PROFESSIONAL

IRS Identity Protection PIN

IRS Identity Protection PIN

Federal Statements

3944 Atrium Dr

Statement 1 - Schedule E. Line 19 - Other Expenses

Description	Gross Amount	Business Use Percentage	Net Amount
HOA DUES	\$ 5,402		\$ 5,402
AIR BNB FEES	650		650
AIR BNB FEES	408		408
TOTAL	\$ 6,460		\$ 6,460

3677 Atrium Drive

Statement 2 - Schedule E. Line 19 - Other Expenses

Description	Gross Amount	Business Use Percentage	Net Amount
HOA DUES	\$ 5,512		\$ 5,512
TOTAL	\$ 5,512		\$ 5,512

417 Montego Bay Ct

Statement 3 - Schedule E. Line 19 - Other Expenses

Description	Gross Amount	Business Use Percentage	Net Amount
HOA DUES	\$ 6,960		\$ 6,960
CABLE/INTERNET			
PROCESS FEE			
TOTAL	\$ 6,960		\$ 6,960