

**INDIVIDUAL INCOME TAX RETURN
FORM 1040**

**SIGN &
RETURN
PACKET B**

ELECTRONIC FILING THIS OFFICE IS AN AUTHORIZED IRS ELECTRONIC FILING PROVIDER! ! ALL RETURNS WILL BE ELECTRONICALLY FILED AS MANDATED BY THE IRS AND MOST STATES.

IF YOU DO NOT WISH TO ELECTRONICALLY FILE YOUR 2025

INCOME TAX RETURN, CHECK HERE

(Per IRS regulations, if you do **NOT** want me to electronically file your return, you will be required to sign a specifically worded statement documenting your choice. In addition, I will be required to add an additional form - Form 8948 - to your return, stating that you have elected to file by paper.).

IMPORTANT TO NOTE: YOU CAN INDICATE "SAME" ON PAGES B1, AND B3 IF THE INFO IS THE SAME AS THE PRIOR TAX RETURN. Page B4 must be filled in if you have dependents.

DIRECT DEPOSIT OR ELECTRONIC PAYMENTS.FASTER REFUNDS, More Secure, Convenient!!

If you wish to have a Direct Deposit Refund, you must check with your bank for the following

Bank Name: _____

Routing Number _____

Type: Checking Savings

Account Number _____

- a. Will the bank accept a direct deposit from the Federal Government? _____
- b. Will the bank deposit a joint refund into an individual account? (If that applies to your refund) _____

Do you want to split the deposit into more than one account? YES NO (If yes, please provide info).

If you want to use any of your refund to buy U.S. Series I Savings Bonds check here to discuss. YES NO

PAID PREPARER AUTHORIZATION

IF YOU DO NOT WANT TO ALLOW THE IRS TO DISCUSS YOUR 2025 TAX RETURN WITH ME, PLEASE INITIAL HERE: _____

TO THE BEST OF MY KNOWLEDGE, THE ENCLOSED INFORMATION IS COMPLETE AND ACCURATE, AND INCLUDES ALL INCOME, DEDUCTIONS AND OTHER INFORMATION NECESSARY FOR THE PREPARATION OF THE 2025 INCOME TAX RETURNS; THIS INFORMATION HAS BEEN PROVIDED BY ME FOR WHICH I HAVE ADEQUATE CONTEMPORANEOUS RECORDS. **Feltz Associates, LLC** and Nancy M. Paparazzo, EA are not responsible for providing any of the deductions and income reported on my return(s).

(Refer to Engagement & Client Letters for important details).

SIGNED _____ DATE _____

SIGNED _____ DATE _____

TAX YEAR 2025

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Use this page to provide additional information.

KINDLY PRINT ALL INFORMATION

If you have any questions regarding the information requested, or specific Tax questions, please feel free to call our office (201-487-0311). If you are a **NEW CLIENT**, please provide copies of your prior year's Federal and State tax filings, as well as copies of Social Security Cards and **Dates of Birth**.

- The IRS and most States are asking for **Driver's License Numbers & info or State ID** to help prevent Identity Theft. This is mandatory in many states. Supply copy(ies) of **LICENSE or change to issue & expiration dates**.
- **HISTORICAL INFORMATION - YOU MUST FILL IN NAME AND ANY INFO THAT HAS CHANGED SINCE LAST YEAR** (e.g, Addresses, New Dependents, **Change in Filing Status**) Otherwise, indicate 'SAME'.
- PLEASE DO NOT FILL IN DATES OF BIRTH OR SS #'S IF YOU ARE RETURNING CLIENTS. **ONLY NEW OR CHANGED INFO SHOULD BE ENTERED. WRITE SAME, IF APPLICABLE**

NAME: _____
(taxpayer) (first) (MI) (last) (spouse) (first) (MI) (last)

FILING STATUS: Do you want to change your filing status this year? NO YES GIVE DETAILS: _____
NOTE: If you leave this blank, I will use the same filing status as used on prior year's tax return.

Social Security Number (TAXPAYER) **ONLY IF NEW** (SPOUSE) **ONLY IF NEW**
(Please attach a copy of your cards, if you have not already sent to us)

*****ARE YOU A QUALIFYING CHILD OR QUALIFYING DEPENDENT OF ANOTHER TAXPAYER?** _____

Address: _____ City: _____

State: _____ Zip: _____ - _____ County: _____ State of Residency in 2025 _____

Is this a new address? YES NO If Yes **PROVIDE DATE(s) OF MOVE(s):** _____

Real Estate Tax Actually Paid IN 2025: \$ _____ (This might **NOT** be the same as the Assessed Tax)
OR Annual Rent You Paid \$ _____ Did you share your rent with another tenant? _____

Your Email Address: _____ ours is mirjol@msn.com or hello@nancyfeltz.com

Telephone Number: (Home/Cell) _____ **(Work T/P or Spouse)** _____

OCCUPATION: (Taxpayer) _____ **(Spouse)** _____

DATE OF BIRTH: (Taxpayer) _____ **(Spouse)** _____

IF SEPERATED OR DIVORCED DURING 2025, PLEASE ENTER DATE OF DECREE: OR DATE OF LEGAL SEPARATION: _____
(PLEASE ATTACH COPY OF DECREE).

IF TAXPAYER OR SPOUSE DIED DURING 2025, PLEASE ENTER DATE OF DEATH _____ AND ATTACH A COPY OF THE DEATH CERTIFICATE.

1. Were you in a Registered Domestic Partnership, Civil Union or Same-Sex Marriage during 2025?

Circle, applicable designation.

YES NO

3. Do you want to contribute to the Presidential Election Campaign (\$3.00)?

YES NO

Do you qualify for HEAD OF HOUSEHOLD Filing Status? YES NO If YES, PROVIDE DETAILS, name of person, & relationship to you, etc.) If you are unmarried (or living apart) and maintain a household for a family member of any age, you might qualify for the lower Head of Household tax rate, provided certain qualifications are met. _____

+**IMPORTANT NOTE:** The taxpayer's child must be a qualifying child or the taxpayer's dependent as defined by the IRS. There is also a Qualifying Relative Designation which may be used for a Child of taxpayer if Qualifying Child does not apply.

DEPENDENT INFORMATION: MUST BE COMPLETED IF YOU WANT CHILD TAX OR EDUCATION CREDITS

NAME	D.O.B. only if new (or write "On File")	Soc Sec # ONLY if NEW (or "On File")	Did Dependent provide more than 50% of Own Support	Number of MONTHS IN HOME in 2025 ½ Months as well College is same as home	Is the home in the US? Yes/ No	in College in 2025?*** Yes/No	Had Income or FILED their OWN RETURN? Provide Income info or SUPPLY COPY of Return.

In order to be eligible for the Child Tax Credit, a qualifying child must be either a U.S. citizen, national, or resident of the United States. REQUIRED TO CLAIM DEDUCTION: Please Attach a Copy of Social Security Card(s), if first time on your return.

CREDITS TO INCOME (Limited, based on Adjusted Gross Income, Filing Status & Dependency)

Car Loan Interest – Must be First Purchaser for a New Vehicle for personal use. Used vehicles do NOT qualify.

Date of Purchase _____ VIN# _____

No Tax on Tips – Must be Qualifying tips. For employees, only tips reported on Form W-2, Forms 4070, or Form 4137 are eligible. For non-employees, tips must be reported on Form 1099-NEC, 1099-MISC, or 1099-K and substantiated by appropriate documentation. Tips not properly reported or documented are excluded. see irs.gov/tippedoccupation

- Amount of Tips **IF NOT** listed on a Form W-2. \$ _____

No Tax on Overtime – Only Premium Time Qualifies. Deduction of up to \$12,500 per taxpayer – Must provide Final Yearly Pay Stub or Form W-2 showing the amount of Qualifying Overtime.

STUDENT LOAN INTEREST DEDUCTION (MAXIMUM 2025 = \$2,500 SUBJECT TO INCOME LIMITATION)

- Did you pay interest in 2025 on a qualified Student Loan? (attach documents) YES NO
- Was the loan used to pay for qualified higher education expenses (including tuition, fees, room & board, and related expenses such as books and supplies) for education in a degree, certificate, or similar program leading to a recognized educational credential at most colleges, universities and certain vocational schools or other post-secondary institute? YES NO
- Did the student carry at least half the normal full-time workload for the course of study pursued? YES NO
- Did the student receive any employer-provided educational assistance benefits that are not included in Box 1 of your W-2 form(s)?
If yes, how much? \$ _____ YES NO
- Did the student have excludable U.S. Series EE Savings Bond interest? YES NO
- Was there a qualified distribution from an Education IRA? YES NO
- Were there any other scholarships, educational assistance, allowances or other payments
(not gifts, inheritances, etc.) received? If yes, list ON SEPARATE PAGE. YES NO

*****Educational Credits American Opportunity Credit.** Did you (or your dependent) pay, charge or take a loan to pay expenses in 2025 for yourself, your spouse or your dependent to enroll in or attend an eligible educational institution: (most colleges, universities and certain vocational schools or other post-secondary institute) leading to a degree, certificate, or other recognized educational credit? YES NO

1. Name of Student

VIP ***

2. Is student taking at least 1/2 of the normal full-time workload for his/her course of study for at least one academic period in 2025? YES NO

3. Has student ever been convicted of a felony for possessing or distributing a controlled substance? YES NO

* **HOW MANY YEARS OF COLLEGE (POST-SECONDARY) EDUCATION HAD THE STUDENT COMPLETED AS OF 01/01/2025?** _____ Years Completed

* **Amount of Expenses paid in 2025 (*OTHER* than those reported on Form 1098T for use with Sec 529 Distributions):**

ROOM & BOARD (not listed on Form 1098T) \$ _____

INSURANCE (not listed on Form 1098T) \$ _____

BOOKS & EQUIPMENT (not listed on Form 1098T) \$ _____

- These expenses can be paid with dependent student's earnings, loans, gifts, inheritances or personal savings.
- Room and board, insurance, transportation, etc. and books or equipment **ARE NOT** qualified expenses for the *American Opportunity (Modified Hope) Credit*.

NOTE: We MUST have a Form 1098-T as well as a PRINTOUT OF TUITION STATEMENT from the College showing all PAYMENTS MADE & DATES the payments were posted to the Student's Account.

INCOME

WAGES EARNED (FORMS W-2) PLEASE ATTACH ALL **FORMS W-2** RECEIVED FOR 2025, **PLUS the FINAL PAYSTUB for the year.**

INTEREST INCOME PLEASE ATTACH ALL **FORMS 1099** in their **ENTIRETY** which you have received for **2025** {extra work due to missing forms, etc. may result in extra billable time}.

ONLY attach a list of interest **NOT** reported on a Form 1099. **Otherwise** attach all Tax documents.

***Seller- Financed Mortgages** (See Below)

<u>Name of Payer</u>	<u>Social Security Number</u>	<u>Amount</u>
		\$
		\$

The **payer** must have used the property as a personal residence, and you must provide the payer with your Social Security Number.

EXCLUSION OF INTEREST FROM SERIES EE OR I U.S. SAVINGS BONDS ISSUED AFTER 1989 USED FOR HIGHER EDUCATION EXPENSES. (Subject to phase-outs for Modified Adjusted Gross Income.)

** CALL THIS OFFICE IF THIS APPLIES TO YOU, AND I WILL SEND YOU THE WORKSHEET.

NOTE: THE BONDS MUST BE PURCHASED IN THE NAME OF THE PARENT AND THE PARENT MUST BE AT LEAST 24 YEARS OLD WHEN THE BOND IS PURCHASED.

OFFSHORE COMPLIANCE

THE *HIRE ACT* MADE SOME CHANGES TO THE LAW WITH REGARD TO THE REPORTING REQUIREMENTS FOR OFFSHORE ASSETS AND FINANCIAL ACCOUNTS AND WITHHOLDING OF TAX ON CERTAIN PAYMENTS TO FOREIGN PERSONS. **PENALTIES FOR NON-COMPLIANCE ARE VERY STIFF.** THE U.S. TREASURY DEPT. AND THE IRS ARE RAMPING UP THEIR OVERSIGHT OF TAXPAYERS WITH FOREIGN ACCOUNTS AND ASSETS.

- ❖ AT ANY TIME DURING **2025**, DID YOU (ALONE OR WITH ANOTHER) HAVE FUNDS IN A FOREIGN ACCOUNT OR WERE YOU THE GRANTOR OF A FOREIGN TRUST OR AN INTEREST HOLDER IN A FOREIGN FINANCIAL ACCOUNT? YES NO
- ❖ DID YOU RECEIVE CERTAIN GIFTS OR BEQUESTS FROM A FOREIGN PERSON OR ENTITY? .
 - YES NO

(You **MUST** answer these questions. Provide Details, including maximum **aggregate** value in **2025**.)

FAILURE TO FILE APPROPRIATE INFORMATION FORMS CAN RESULT IN **FINES UP TO \$10,000 or MORE**. THE DEPARTMENT OF THE TREASURY IS **VERY SERIOUS** ABOUT ASSESSING THESE FINES.

TAX YEAR 2025

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INCOME (Continued)

DIVIDEND INCOME (Forms 1099)

PLEASE ATTACH ALL FORMS 1099 ETC. RECEIVED FOR 2025 IN THEIR ENTIRETY

OTHER INCOME

YES or NO

NOTE: ALL INCOME RECEIVED DURING THE YEAR MUST BE INDICATED. IF THERE IS NO CATEGORY LISTED, BE SURE TO ADD UNDER OTHER.

State and Local Income Tax Refunds

Alimony Received (See note on page B13 for new rules)

Fully Taxable Pensions, IRA Distributions (Attach W-2P or 1099R)

Other Pensions & Annuities (Attach 1099, 1099R or Documents)

(Other NON-Taxable Pensions, required info for certain benefits)

NOTE: FOR N.I VETERANS ATTACH EXEMPTION LETTER OR FORM DD214

Partnership, LLC, S Corporation, Estate or Trust Income (Attach Forms K-1)

Unemployment Compensation (Attach 1099)

* Social Security Benefits (Attach Form SSA 1099)

Director Fees and/or **Executor (Executrix) Fees (One Time) (Operator)

Property Tax Reimbursements & Rebates

Distributions from Sec 529 or HSA. You Must attach Year End Statements for Sec 529.

Municipal Bond Interest

Unreported Tip Income

Gambling, Prizes, etc. (Attach W-2G's) Gambling Losses

Other (Explain)

NOTE: If you have income in respect of a dependent, you must attach copies of the Federal Estate tax returns.

*Effective after December 31, 1993, up to 85% of Social Security benefits received during the year may be required to be included in Taxable income. This law uses a two tier system to determine how much Social Security will be taxable.

****A One Time (Inactive) Fee is not subject to Self Employment Tax. Operating as an Executor as a business is subject to S.E. Tax.**

IDENTITY THEFT: NEVER, NEVER, NEVER, RESPOND TO ANY PHONE OR EMAIL REQUESTING INFORMATION EVEN IF THEY THREATEN YOU. **NEVER, NEVER, NEVER** CLICK ON ANY EMAIL LINKS IN ANY **SUPPOSED** GOVERNMENT CORRESPONDENCE. IRS WILL NEVER ASK YOU TO DO THIS!! THEY WILL NEVER ASK YOU TO GET A PRE-PAID CARD TO PAY THEM, THEY WILL NOT THREATEN TO JAIL YOU! IF YOU GET ANY CORRESPONDENCE FROM ANY GOVERNMENT AGENCY, PLEASE **CALL ME** AT ONCE AND I WILL DEAL WITH IT ON YOUR BEHALF. IF NECESSARY, Delete texts – **IRS does NOT text.**

BUSINESS INCOME & EXPENSE SCHEDULE C**TOTAL GROSS INCOME \$****ATTACH QUARTERLY SALES TAX RETURNS.**Months in Operation **2025** _____

Name of Proprietor _____ Employer I.D. Number _____

Business Name & Address _____

Business Activity _____ Home Office? YES NO (if this is yes, & YES NO if this is no, go to C1)

Was Another Office Available to You Outside the Home?

C1 BUSINESS USE OF HOME: (required whether using actual or safe harbor method)

Total Area of Home: _____ sq. ft. Total Area Used for Business: _____ sq. ft.

Nature of Business Activity Performed in Home: _____

BUSINESS EXPENSES:

New Equipment Purchased (Attach list and Purchase documents)	\$ _____
Merchandise Purchased for Sale (Beginning and Ending Inventory, if applicable)	\$ _____
Commissions or Cost of Labor (Forms 1099 must be prepared for amounts over limit)	\$ _____
Materials & Supplies Expendable in one year	\$ _____
Advertising	\$ _____
Bad Debts - Proper procedures and paperwork required to substantiate	\$ _____
Bank Charges	\$ _____
Business Insurance (List Auto Insurance Separately on page B7)	\$ _____
Interest (only on Business Loans & Business Charge Cards)	\$ _____
Health Insurance (record entire premium) includes LTHC, subject to limitations	\$ _____
Legal & Professional Services(Forms 1099 must be prepared for amts over limit EVERY YEAR)	\$ _____
Office Supplies & Postage	\$ _____
Rent on Business Property (Forms 1099 must be prepared for amts over limit EVERY YEAR)	\$ _____
Start Up Costs of New Retirement Plan	\$ _____
Travel - Business Travel Only (Auto expenses listed on next page)	\$ _____
Business Meals & Entertainment (Limited) (records required)	\$ _____
Business Telephone & Telecommunications	\$ _____
Utility Expenses (INDICATE whether for whole house or office only)	\$ _____

(Attach a list for other expenses, if necessary)

 **USE TAX ON PURCHASES OUTSIDE YOUR HOME STATE WITH INSUFFICIENT SALES TAXES PAID \$** _____**A SEP PLAN**- CAN BE SET UP AND FUNDED BY THE DUE DATE, PLUS EXTENSIONS, FOR YOUR TAX RETURN. THE CONTRIBUTIONS YOU MAKE TO THE PLAN CAN BE DEDUCTED ON YOUR 2025 RETURN EVEN IF THEY ARE MADE IN 2025 (BY THE FILING DEADLINE, INCLUDING EXTENSIONS).**401(K) PLAN**- SELF-EMPLOYED INDIVIDUALS MAY ALSO SET UP A SELF-EMPLOYED 401(K) PLAN FOR THEMSELVES.**A SIMPLE IRA PLAN**- GENERALLY, YOU CAN SET UP A SIMPLE IRA PLAN EFFECTIVE ON ANY DATE BETWEEN JANUARY 1 AND OCTOBER 1 OF A YEAR, PROVIDED YOU DID NOT PREVIOUSLY MAINTAIN A SIMPLE IRA PLAN. The Internal Revenue Service & the States are penalizing Employers who misclassify employees as independent contractors for purposes of employment taxes. The fines can be considerable, and the taxing agencies are performing audits to identify violators. The IRS uses a 20-factor test to make the determination. The States also use a classification test.**If you require this office to prepare Forms W-2 or 1099, you must contact me prior to DUE DATE OF January 31st EACH YEAR.** This note is a reprint of the same message each year, since the Systemizer often arrives after January 31. Please mark your calendars for next year. **ANY and ALL Service Providers should give you a Form W-9 before you pay them.** Put a REMINDER on your Calendar to submit 1099 info to us by **Jan. 20th of EACH YEAR**.**!!!!!!THE IRS IS ASSESSING SERIOUS PENALTIES FOR FAILURE TO FILE REQUIRED FORMS W-2 &1099***!!!!!!**

TAX YEAR 2025

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BUSINESS INCOME & EXPENSE Schedule C(Continued)

AUTO & TRUCK EXPENSES

Note: Record your Odometer Reading on Business Vehicle as of the date you complete this form. _____ MILES DATE / / of record

The IRS REQUIRES you to keep written records of your expenses (including auto) in order for you to be able to use the ACTUAL amounts as deductions, whether you LEASE or OWN your vehicle. This log should have the total miles for the year as well as notations regarding the **business miles** that are part of the grand total. BE SURE TO RETAIN A TRAVEL LOG AND REPAIR AND SERVICE STATION RECEIPTS SHOWING THE ODOMETER READINGS DURING THE YEAR. THE IRS RELIES ON THESE TYPES OF DOCUMENTATION IN AN AUDIT.

Be sure to have the receipts for **business** PARKING and TOLLS which are deductible in all cases. The mileage method may be used instead of the actual expenses. This is subject to certain rules if the car has been previously depreciated.

REQUIRED The Standard Mileage rate is allowed for a LEASED auto if the standard mileage rate is used for the entire lease term. If you use the actual expense method, the business percentage (which is determined based upon the mileage chart below) of each lease payment is deductible as a current deduction.

TRAVEL EXPENSE	AMOUNT
AIRFARES	\$
AUTO RENTALS	\$
ENTERTAINMENT	\$
GARAGE	\$
HOTEL/MOTEL	\$
MEALS	\$
PARKING	\$
POSTAGE	\$

TRAVEL EXPENSE	AMOUNT
ROAD TOLLS	\$
TAXI, SUBWAY	\$
BUSINESS TELEPHONE	\$
TIPS	\$
OTHER	\$
	\$
	\$
	\$

AUTOMOBILE EXPENSE:

Mileage amounts **must be** filled in below to determine % of business usage regardless of whether you use actual method or rate per mile method. **REQUIRED**

TOTAL MILES DRIVEN	CAR 1	CAR 2
TOTAL MILEAGE		
BUSINESS MILEAGE IN 2025		
BUSINESS USE		
AVERAGE DAILY COMMUTING		
WRITTEN RECORDS AVAILABLE	Y N	Y N
IS ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE?	Y N	Y N
WAS VEHICLE AVAILABLE FOR OFF-DUTY HOURS?	Y N	Y N
Is AN EMPLOYER-PROVIDED VEHICLE AVAILABLE FOR PERSONAL USE?	Y N	Y N

ACTUAL AUTOMOBILE EXPENSES	CAR 1	CAR 2
PURCHASE PRICE		
GAS & OIL		
INSURANCE		
REGISTRATION & LICENSES		
LEASE AMOUNT & FEES		
LEASE TERM		
LUBRICATION		
REPAIRS		
TIRES, TIRE REPAIR		
WASH		
OTHER:		

1. When did you place your vehicle in service for business purposes? / / (date) / / (date)

2. Do you have evidence to support your deduction? YES NO

(If "Yes", is the evidence written?) YES NO

INCOME (Continued)

CAPITAL GAINS & LOSSES: (You **MUST** attach detail of Cost Basis, including all information and closing statements if applicable) **ONLY COMPLETE IF YOU DO NOT HAVE THE FORMS 1099B**

Description of Property	Date Acquired	Date Sold	Sales Price	Depreciation Taken (If Applicable)	Cost or Basis

- Securities, Real Estate, etc. - Attach Forms **1099B & 1099S** Certain types of Gains subject to 25% and 28%.
- Installment Sales (and Dividend Income) cannot offset Capital Gains.
- Short-Term Capital Gains are taxed at the Ordinary Rate of Tax.
- **Long-Term Capital Gains Rates:**

	0%	15%	20%
MFJ, QSS	\$0 - \$96,700	\$96,701 - \$600,050	Above \$600,050
HH	\$0 - \$64,750	\$64,751 - \$566,700	Above \$566,700
S	\$0 - \$48,350	\$48,351 - \$533,400	Above \$533,400
MFS	\$0 - \$48,350	\$48,351 - \$300,000	Above \$300,000
Estates & Trusts	\$0- \$3,250	\$3,251 - \$15,900	Above \$15,900

***Important Note:** Please make sure to fill in COST BASIS and DATE OF ACQUISITION of stock sold **IF NOT listed accurately on Form 1099B**. If we have to do research for this info, it **WILL create ADDITIONAL CHARGES ON YOUR BILL!!**

RENTAL INCOME — Even though REPEAL OF THE EXPANDED FORM 1099 REPORTING FOR PAYMENTS OF EXPENSES INCURRED IN A RENTAL ACTIVITY THAT IS NOT CONSIDERED A TRADE OR BUSINESS OCCURRED; Nonetheless, THERE IS SOME AMBIGUITY IN REGARDS TO THE 'BUSINESS' DEFINITION. THE IRS IS ASSESSING STIFF FINES FOR FAILURE TO SEND FORMS 1099-NEC & MISC TO REQUIRED INDIVIDUALS (eg. Plumber, repairman, etc.). CALL ME TO DISCUSS, IF THIS REFERS TO YOU. Put a **REMINDER** on your **Calendar** to submit 1099 info by **Jan. 20th of EACH YEAR**.

*****Note:** Did you rent your vacation home for less than 15 days? YES NO (if so, a tax savings might apply)

Address & Description of Property

Property A:

Property B:

Property C:

(If property purchased or sold this year, please ATTACH copies of CLOSING STATEMENTS, and REAL ESTATE TAX BILL).

	PROPERTY A	PROPERTY B	PROPERTY C
RENTAL INCOME			
OCCUPANCY BY TAXPAYER	%	%	%
EXPENSES:			
Advertising			
Auto & Travel			
***Cleaning & Maintenance	T or F	T or F	T or F
Commissions			
***Insurance	T or F	T or F	T or F
Interest	T or F	T or F	T or F
Legal & Professional			
Repairs			
Supplies	T or F	T or F	T or F
Taxes			
***Utilities	T or F	T or F	T or F
Wages			
Other	T or F	T or F	T or F
Capital Improvements	T or F	T or F	T or F

For Capital Expenditures, attach a sheet listing Date, Description and Cost & Trade-In (if any) **NOTE:** There are new rules regarding Repairs and Capital Improvements. *****Indicate if TENANT PORTION (T) or FULL HOUSE (F)**.

TAX YEAR 2025

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EXPENSES – ITEMIZED DEDUCTIONS

NOTE for ALL: IF YOU PAY MEDICAL EXPENSES, INCLUDING HOSPITALIZATION INSURANCE, FOR SOMEONE WHO WOULD QUALIFY AS A DEPENDENT IF THEIR INCOME DID NOT EXCEED THE INCOME LIMITS, AND WANT TO DEDUCT THOSE PAYMENTS ON YOUR OWN RETURN, BE SURE TO MAKE PAYMENTS DIRECTLY TO THE PROVIDER (**NOT TO THE DEPENDENT** AS REIMBURSEMENT FOR EXPENSES)!!

NOTE for NJ RETURNS: IF YOU DO **NOT** ITEMIZE DEDUCTIONS, **AND** IF YOU ALSO DO **NOT** EXPECT TO OWE **NJ** TAX, THEN YOU MAY NOT HAVE TO ITEMIZE YOUR MEDICAL EXPENSES. CONTACT ME IF YOU ARE NOT SURE, **BEFORE** YOU SPEND TIME SUMMARIZING.

This will be the case for many individuals with the new TAX CUTS and JOBS ACT changes to the Standard Deduction

LONG TERM CARE PREMIUMS **MUST** BE ENTERED SEPARATELY AS INDICATED.

MEDICAL & DENTAL (out of pocket): (NOTE: If you expect to owe NJ State Taxes, fill in EVEN IF YOU ARE NOT Itemizing deductions). NJ Limitation is 2%. IRS limitation is 7.5% 

Prescription Medicine and Drugs	\$	\$	
Doctors Including Co-Pays			
Hospital, Medical & Dental Insurance	\$	\$	Do not record Pre-Tax ins
Long Term Care Ins. (Limited by age)	Filer \$	Spouse \$	
Medicare B and D			
Dental	\$	\$	
Transportation & Lodging	\$	\$	
PPE EQUIPMENT (face masks, etc)			
Medical Mileage in 2025	Medical Travel \$	Tolls/Parking \$	
Other (Eyeglasses, Hearing Aids, Etc.):	\$	\$	
Total Before Reimbursements in 2025	\$	\$	\$
Enter 2025 Insurance Reimbursements			\$
Your Net Out of Pocket Expenses			\$

New Jersey limitation still 2% of New Jersey Gross Income.

New York follows the Federal Limitation..

NOTE: A child's tuition at specialized school was deductible as a medical expense under sec 213(a) where the child attended school primarily to receive medical care in the form of special education. The tuition is deductible for each year the child is diagnosed as having a medical condition, such as dyslexia, that handicaps that child's ability to learn (PLR 200521003).

TAXES NOTES:

- OBBBA LIMITS TOTAL Qualifying TAXES PAID TO **\$40,000**.
- You can elect to deduct state & local general sales taxes instead of state & local income taxes as an itemized deduction on Schedule A. **You cannot deduct both.** (MADE **PERMANENT** by the Consolidated Appropriations Act, 2016)

State & Local Income Tax. \$ _____

State & Local General Sales Taxes Optional Tax Table ____ or Actual taxes paid \$ _____

You must keep receipts if you use actual taxes. **Certain Sales Taxes** can be added to the Optional Tax Table: taxes on any motor vehicle (purchased or leased), aircraft, boat, off-road vehicles, home, home building materials. List any of these items separately. We will determine whether to use Sales Taxes or Income Taxes.

VERY IMPORTANT: Real Estate Taxes must be amount actually PAID IN 2025, NOT the amount assessed! The IRS is checking with municipalities to verify amounts actually paid in the tax year. Report Taxes on adjoining lots separately, **NOTE NJ Filers** are still eligible for the **FULL Deduction**, based on income limitation, of Real Estate Taxes Paid on NJ Principal Residence on the NJ Form 1040.

Real Estate Tax _____ \$ _____

_____ \$ _____

Other Taxes _____ \$ _____

_____ \$ _____

EXPENSES (Continued)**INTEREST EXPENSE:** Did you refinance your mortgage in 2025? (**Include Closing Statement**) & purpose.

MORTGAGE INTEREST IS SUBJECT TO TRACING.	Balance at 12/31/2025	Interest Paid
1. First Mortgage Paid to: _____	\$ _____	\$ _____
WHAT PORTION OF YOUR HOME MORTGAGE LOAN WAS USED TO BUY, BUILD OR YOUR QUALIFIED HOME & QUALIFIED SECOND HOME (SUBJECT TO DEBT LIMITATIONS)	% _____	
2. Second Mortgage Paid to: _____	\$ _____	\$ _____
WHAT PORTION OF YOUR SECOND MORTGAGE WAS USED TO BUY, BUILD OR IMPROVE YOUR QUALIFIED HOME & QUALIFIED SECOND HOME (SUBJECT TO NEW TAX LAW AND LIMITATIONS)	% _____	
3. Home Equity Loan Paid _____	\$ _____	\$ _____
WHAT PORTION OF YOUR HOME EQUITY LOAN WAS USED TO BUY, BUILD OR IMPROVE YOUR QUALIFIED HOME & QUALIFIED SECOND HOME (SUBJECT TO NEW TAX LAW AND LIMITATIONS)	% _____	
4. Home Mortgage Interest Paid to INDIVIDUALS:		
Name: _____	\$ _____	\$ _____
Social Security # _____	Address: _____	
5. Points Paid @ closing or refi (refinanced points subject to limitations)	\$ _____	
6. Investment Interest	\$ _____	

NOTE: Your mortgage interest deduction may be limited.

CHARITABLE GIFTS & CONTRIBUTIONS Substantiation required (See page A5 for chart & New benefit for 2026)
 Church/Temple/Mosque, etc. _____ \$ _____
Include all **VERIFIABLE CASH** (& Cash Equivalents) contributions as well as checks.

Noncash contributions (FMV). Clothing or household items must be in good used condition or better. If it is impracticable to obtain a receipt, the donor must maintain reliable written records regarding each item contributed. (Reg. par.1.170A-13(b).	Charitable Contributions: If over \$500 in non-cash charitable contributions, provide detail of contributions. New rules require that the taxpayer retain documentation for ALL cash contributions.
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Please supply a list with FMV \$ _____	Charitable Contributions: If over \$500 in non-cash charitable contributions, provide detail of contributions. New rules require that the taxpayer retain documentation for ALL cash contributions.
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Mileage for Charitable Purposes: _____ miles in 2025	Charitable Tolls & Parking \$ _____
Out-of-Pocket Expenses for Qualified Charitable Purposes	\$ _____

PLEASE ATTACH SUBSTANTIATION WHERE REQUIRED (SEE PAGE A5)

***IF YOU DONATED A CAR TO A QUALIFIED CHARITABLE ORGANIZATION, ATTACH THE FORM 1098C.**

***NOTE:** If you made a gift & received a benefit for it, attach information.

MISCELLANEOUS DEDUCTIONS subject to 2% limitation: IMPORTANT NOTE

Permanently terminated starting Jan. 1, 2026 per OBBBA. However, the Expenses for Educators will be fully deductible as an Itemized Deduction (after the \$300 deduction on Page 2 of the Form 1040). Even though the Miscellaneous Deductions are not qualifying for the Federal Income Tax Return, Certain States still use these Deductions, such as Investment Expenses, Safe deposit box, etc.

Gambling Losses - Starting 2026, Gambling losses have new Limitations under the OBBBA. The Losses are still limited to the amount of the winnings, with an additional limitation of 90% of allowable losses.

CASUALTY & THEFT LOSSES -The 2017 TCJA changes to the rules for casualty losses were made permanent by the OBBBA. Personal casualty losses (losses NOT pertaining to investments, business or rentals) are nondeductible unless they are in a federally declared disaster area.

OTHER DEDUCTIONS**RETIREMENT CONTRIBUTIONS & DISTRIBUTIONS- REQUIRE DISCUSSION****Attach only the 12/31/2025 statement for all Retirement Accounts.****A Contributions**

Individual Retirement Accounts (IRA)\$ _____ Roth \$ _____

Medical Savings Account (MSA) \$ _____ HSA \$ _____

Other Type _____ \$ _____

If you are covered by a Retirement Plan at work, and part or all of your contribution to an IRA is NOT deductible, you must file Form 8606 (two forms if spousal plan or both husband and wife have nondeductible portions) to show your basis in your IRA's. This nondeductible portion (Basis) will determine in the future (when you begin taking distributions) how much of the distribution is non-taxable. **It is, therefore, necessary for us to know the following for the Form 8606 & to maintain basis.**

Name of Trustee of I.R.A. (Bank Broker. etc.)**Value at 12/31/2025**

(a.) _____ \$ _____

(b.) _____ \$ _____

B IRA Withdrawals and Distributions received during 2025 \$ _____**C. Your total contribution to plan since inception:** \$ _____**DID YOU CONVERT ALL OR PART OF A REGULAR IRA INTO A ROTH IRA? YES NO

If YES, please supply details. _____

The \$100,000 limitation no longer exists for conversions in the tax years beginning after December 3, 2010. Careful planning and review is essential before considering a conversion. **A taxable event may occur.****EARNED INCOME CREDIT**

MAXIMUM EITC FOR LOW & MODERATE INCOME WORKING FAMILIES IS \$7,830 FOR 2025, SUBJECT TO INCOME LIMITATIONS, FAMILY SIZE, FILING STATUS, INVESTMENT INCOME, Age of Taxpayer (see NOTE below), Age of Taxpayer with respect to age of Qualifying Person, etc., etc.

For 2025: For Taxpayers with no children, eligibility age range remains at ages 25 to 65.

TRA 97 implemented a number of compliance provisions to curb abuse of the Earned Income Credit (EIC) program:

- Taxpayers who fraudulently or erroneously claim EIC will be denied EIC for a period of time;

Paid preparers are required to exercise due diligence in preparing EIC returns. Current regulations require preparers to make reasonable inquiries about taxpayer-supplied information.

IRS HAS EMPHASIZED PREPARER RESPONSIBILITY; THEREFORE, THERE WILL BE AN ADDITIONAL WORK SHEET YOU MUST COMPLETE IF YOU APPEAR TO BE ELIGIBLE FOR EIC. !!!

HAVE YOU EVER BEEN DENIED EIC BY THE IRS? NO YES If YES, please explain _____DID YOU RECEIVE FORM 8836 FROM THE INTERNAL REVENUE SERVICE? YES NO

Note: Taxpayers whose investment income exceeds **\$11,950 in 2025** cannot claim the EITC. Investment income includes taxable interest and dividends, tax-exempt interest received and accrued during the year, net income from rents and royalties not derived in the ordinary course of a trade or business, net capital gain income, and the excess aggregate passive income over aggregate passive losses.

OTHER DEDUCTIONS (Continued)**2. PAYMENT FOR ALIMONY:****NOTE: New rules apply to POST 2019 Divorce and Legal Separations:**

“Divorces and legal separations that are executed (i.e., that come into legal existence due to a court order) **after 2018**, the alimony-paying spouse won’t be able to deduct the payments, and the alimony-receiving spouse doesn’t include them in gross income or pay federal income tax on them.” However, existing decrees prior to **2018** are subject to the old reporting rules: The recipient reporting the Alimony Income and the Payer reporting the Alimony Deduction to Income. **HOWEVER, STATE TAX LAWS MAY DIFFER. RECORD ALL ALIMONY PAID.**

To whom paid _____ **DATE OF DECREE** ____ / ____ / ____S.S. # _____ \$ _____ Date must be entered above.**3. EMPLOYEE BUSINESS EXPENSES: SUSPENDED WITH THE TAX CUTS AND JOBS ACT**

IN SOME CASES, MAY STILL BE USEFUL ON STATE TAX RETURNS.

4. PAYMENTS FOR CHILD OR DEPENDENT CARE: Enhanced by OBBBA

- Number of persons who were cared for in **2025** _____

Name of Child _____ Amount for this Child \$ _____

Name of Child _____ Amount for this Child \$ _____

Note: Special rules for summer camps. **Only Day Camp is eligible for the Credit. (Not Sleep over camp)**

- Did you receive employer-provided dependent care assistance benefits? YES NO

Amount of Employer-Provided Assistance \$ _____

Care Provider's Name	Address	SS# or EIN	In Your Home	Length of Time	Amount
_____	_____	_____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	\$ _____
_____	_____	_____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	\$ _____

NOTE KIDDIE TAX – In 2025, children under age of 18 or college students under the age of 24 are subject to the Kiddie Tax on net Unearned Income more than \$2,700 (\$2,700 for 2026, no change).

AMOUNTS PAID FOR 2025 ESTIMATED TAXES INCLUDE THE **JANUARY 2026 PAYMENT MADE FOR 2025**

FEDERAL		STATE		OTHER	
DATE DUE/PAID	AMOUNT	DATE DUE/PAID	AMOUNT	DATE DUE/PAID	AMOUNT
04/15/2025/	\$ _____	04/15/2025	\$ _____	04/15/2025/	\$ _____
06/15/2025/	\$ _____	06/15/2025/	\$ _____	06/15/2025/	\$ _____
09/15/2025/	\$ _____	09/15/2025/	\$ _____	09/15/2025/	\$ _____
01/15/2026/	\$ _____	01/15/2026/	\$ _____	01/15/2026/	\$ _____

