

For the year Jan. 1 - Dec. 31, 2025, or other tax year beginning

ending

See separate instructions.

Filed pursuant to section 301.9100-2

Combat zone

Deceased

Spouse

Other

Your first name and middle initial

Last name

Your social security number

MARGARET J.

TROWE

If joint return, spouse's first name and middle initial

Last name

Spouse's social security number

ELLEN M.

BRICKLEY

Home address (number and street). If you have a P.O. box, see instructions.

Apt. no.

Check here if your main home, and your spouse's if filing a joint return, was in the U.S. if more than half of 2025.

City, town, or post office. If you have a foreign address, also complete spaces below.

State ZIP code

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

Foreign country name

Foreign province/state/county

Foreign postal code

You Spouse

Filing Status

Single

Head of household (HOH)

Check only one box.

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

(a) Yes (b) And in the U.S.

(a) Yes (b) And in the U.S.

(a) Yes (b) And in the U.S.

(a) Yes (b) And in the U.S.

(6) Check if Full-time student

Permanently and totally disabled

Full-time student

Permanently and totally disabled

Full-time student

Permanently and totally disabled

Full-time student

Permanently and totally disabled

(7) Credits Child tax credit

Credit for other dependents

Child tax credit

Credit for other dependents

Child tax credit

Credit for other dependents

Child tax credit

Credit for other dependents

Check if your filing status is MFS or HOH and you lived apart from your spouse for the last 6 months of 2025, or you are legally separated according to your state law under a written separation agreement or a decree of separate maintenance and you did not live in the same household as your spouse at the end of 2025.

Income

1a Total amount from Form(s) W-2, box 1 (see instructions)

STMT 1

1a 62,757.

b Household employee wages not reported on Form(s) W-2

1b

c Tip income not reported on line 1a (see instructions)

1c

d Medicaid waiver payments not reported on Form(s) W-2 (see instructions)

1d

e Taxable dependent care benefits from Form 2441, line 26

1e

f Employer-provided adoption benefits from Form 8839, line 31

1f

g Wages from Form 8919, line 6

1g

h Other earned income (see instructions). Enter type and amount:

1h

i Nontaxable combat pay election (see instructions)

1i

z Add lines 1a through 1h

1z 62,757.

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

If you did not get a Form W-2, see instructions.

Attach Sch. B if required.

2a Tax-exempt interest

2a

b Taxable interest

2b 19,024.

3a Qualified dividends

3a

16,869.

b Ordinary dividends

3b 35,771.

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

2 Line 3b

4a IRA distributions

4a

b Taxable amount

4b

c Check if (see instructions) 1 Rollover

2 QCD 3

5a Pensions and annuities

5a

b Taxable amount

5b

c Check if (see instructions) 1 Rollover

2 PSO 3

6a Social security benefits

6a

53,173.

b Taxable amount

6b 45,197.

c If you elect to use the lump-sum election method, check here (see instructions)

d If you are married filing separately & lived apart from your spouse the entire year (see inst.), check here

7a Capital gain or (loss). Attach Schedule D if required

7a

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

8 Additional income from Schedule 1, line 10

8 2,493.

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

9 165,242.

10 Adjustments to income from Schedule 1, line 26

10

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

11a 165,242.

Tax and Credits

11b Amount from line 11a (adjusted gross income) 11b 165,242.

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 inst.

e Standard deduction or itemized deductions (from Schedule A) 12e 34,700

13a Qualified business income deduction from Form 8995 or Form 8995-A 13a 155.
 b Additional deductions from Schedule 1-A, line 38 13b 11,092.

14 Add lines 12e, 13a, and 13b 14 45,947.
 15 Subtract line 14 from line 11b. If zero or less, enter -0-. This is your **taxable income** 15 119,295.
 16 Tax (see instructions). Check if any from Form(s): 1 8814 2 4972 3 16 14,892.
 17 Amount from Schedule 2, line 3 17
 18 Add lines 16 and 17 18 14,892.
 19 Child tax credit or credit for other dependents from Schedule 8812 19
 20 Amount from Schedule 3, line 8 20 485.
 21 Add lines 19 and 20 21 485.
 22 Subtract line 21 from line 18. If zero or less, enter -0- 22 14,407.
 23 Other taxes, including self-employment tax, from Schedule 2, line 21 23
 24 Add lines 22 and 23. This is your **total tax** 24 14,407.

Payments and Refundable Credits

25 Federal income tax withheld from:
 a Form(s) W-2 SEE STATEMENT 5 25a 3,809.
 b Form(s) 1099 SEE STATEMENT 7 25b 130.
 c Other forms (see instructions) 25c
 d Add lines 25a through 25c 25d 3,939.

26 2025 estimated tax payments and amount applied from 2024 return STATEMENT 6 26 440.

If you have a qualifying child, you may need to attach Sch. EIC.

27a Earned income credit (EIC) 27a
 b Clergy filing Schedule SE (see instructions)
 c If you do not want to claim the EIC, check here

28 Additional child tax credit (ACTC) from Schedule 8812. If you do not want to claim the ACTC, check here 28
 29 American opportunity credit from Form 8863, line 8 29
 30 Refundable adoption credit from Form 8839, line 13 30
 31 Amount from Schedule 3, line 15 31

32 Add lines 27a, 28, 29, 30, and 31. These are your **total other payments and refundable credits** ... 32
 33 Add lines 25d, 26, and 32. These are your **total payments** 33 4,379.

Refund

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

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

Amount You Owe

37 Subtract line 33 from line 24. This is the **amount you owe**.
 For details on how to pay, go to www.irs.gov/Payments or see instructions 37 10,028.

38 Estimated tax penalty (see instructions) 38

Third Party Designee

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

Designee's name **ROBERT ARNOLD** Phone no. **212-557-3900** Personal Identification number (PIN) **39000**

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 _____
 Spouse's signature. If a joint return, **both** must sign. _____ Date _____ Spouse's occupation _____

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

Phone no. _____ Email address _____

Paid Preparer Use Only

Preparer's name **MICHELE ROSENBERG** Preparer's signature **MICHELE ROSENBERG** Date **04/02/26** PTIN **P01346138** Check if: Self-employed

Firm's name **CORNICK, GARBER & SANDLER, LLP** Phone no. **(212) 557-3900**
555 MADISON AVENUE 16TH FL Firm's EIN **13-2620561**
NEW YORK, NY 10022

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. 1546-0074

2025
Attachment
Sequence No. **01**

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

Your social security number

MARGARET J. TROWE & ELLEN M. BRICKLEY

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

| | | STMT 8 | STMT 9 | 1 | |
|----|--|--------|--------|----|--------|
| 1 | Taxable refunds, credits, or offsets of state and local income taxes | | | 1 | 1,184. |
| 2a | Alimony received | | | 2a | |
| b | Date of original divorce or separation agreement (see instructions) | | | | |
| 3 | Business income or (loss). Attach Schedule C | | | 3 | |
| 4 | Other gains or (losses). Check if any from Form(s): <input type="checkbox"/> 4797 <input type="checkbox"/> 4684 | | | 4 | |
| 5 | Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E | | | 5 | 0. |
| 6 | Farm income or (loss). Attach Schedule F | | | 6 | |
| 7 | Unemployment compensation. If you repaid a 2025 overpayment (see instructions), check here <input type="checkbox"/> and enter amount repaid: | | | 7 | 1,309. |
| 8 | Other income: | | | | |
| a | Net operating loss | 8a | () | | |
| b | Gambling | 8b | | | |
| c | Cancellation of debt | 8c | | | |
| d | Foreign earned income exclusion from Form 2555 | 8d | () | | |
| e | Income from Form 8853 | 8e | | | |
| f | Income from Form 8889 | 8f | | | |
| g | Alaska Permanent Fund dividends | 8g | | | |
| h | Jury duty pay | 8h | | | |
| i | Prizes and awards | 8i | | | |
| j | Activity not engaged in for profit income | 8j | | | |
| k | Stock options | 8k | | | |
| l | Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property | 8l | | | |
| m | Olympic and Paralympic medals and USOC prize money (see instructions) | 8m | | | |
| n | Section 951(a) inclusion (see instructions) | 8n | | | |
| o | Section 951A(a) inclusion (see instructions) | 8o | | | |
| p | Section 461(l) excess business loss adjustment | 8p | | | |
| q | Taxable distributions from an ABLE account (see instructions) | 8q | | | |
| r | Scholarship and fellowship grants not reported on Form W-2 | 8r | | | |
| s | Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d | 8s | () | | |
| t | Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan | 8t | | | |
| u | Wages earned while incarcerated | 8u | | | |
| v | Digital assets received as ordinary income not reported elsewhere. See instructions | 8v | | | |
| z | Other income. List type and amount: | 8z | | | |
| 9 | Total other income. Add lines 8a through 8z | | | 9 | |
| 10 | Combine lines 1 through 7 and 9. This is your additional income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8 | | | 10 | 2,493. |

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

Schedule 1 (Form 1040) 2025 Created 7/25/25

Part II Adjustments to Income

| | | | | |
|-----|--|-----|-----|--|
| 11 | Educator expenses | | 11 | |
| 12 | Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 | | 12 | |
| 13 | Health savings account deduction. Attach Form 8889 | | 13 | |
| 14 | Moving expenses for members of the Armed Forces. Attach Form 3903. If claiming only storage fees (see instructions), check here <input type="checkbox"/> | | 14 | |
| 15 | Deductible part of self-employment tax. Attach Schedule SE | | 15 | |
| 16 | Self-employed SEP, SIMPLE, and qualified plans | | 16 | |
| 17 | Self-employed health insurance deduction | | 17 | |
| 18 | Penalty on early withdrawal of savings | | 18 | |
| 19a | Alimony paid | | 19a | |
| b | Recipient's SSN | | | |
| c | Date of original divorce or separation agreement (see instructions): | | | |
| 20 | IRA deduction. If you are married filing separately and lived apart from your spouse for the entire year (see instructions), check here <input type="checkbox"/> | | 20 | |
| 21 | Student loan interest deduction | | 21 | |
| 22 | Reserved for future use | | 22 | |
| 23 | Archer MSA deduction | | 23 | |
| 24 | Other adjustments: | | | |
| a | Jury duty pay (see instructions) | 24a | | |
| b | Deductible expenses related to income reported on line 8i from the rental of personal property engaged in for profit | 24b | | |
| c | Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m | 24c | | |
| d | Reforestation amortization and expenses | 24d | | |
| e | Repayment of supplemental unemployment benefits under the Trade Act of 1974 | 24e | | |
| f | Contributions to section 501(c)(18)(D) pension plans | 24f | | |
| g | Contributions by certain chaplains to section 403(b) plans | 24g | | |
| h | Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) | 24h | | |
| i | Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations | 24i | | |
| j | Housing deduction from Form 2555 | 24j | | |
| k | Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) | 24k | | |
| z | Other adjustments. List type and amount: | 24z | | |
| | | | | |
| 25 | Total other adjustments. Add lines 24a through 24z | | 25 | |
| 26 | Add lines 11 through 23 and 25. These are your adjustments to income. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10 | | 26 | |

SCHEDULE 1-A
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Deductions

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. **1A**

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

Your social security number

MARGARET J. TROWE & ELLEN M. BRICKLEY

Part I Modified Adjusted Gross Income (MAGI) Amount

| | | | | |
|-----------|--|-----------|----------|----------|
| 1 | Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11b | | 1 | 165,242. |
| 2a | Enter any income from Puerto Rico that you excluded | 2a | | |
| b | Enter the amount from Form 2555, line 45 | 2b | | |
| c | Enter the amount from Form 2555, line 50 | 2c | | |
| d | Enter the amount from Form 4563, line 15 | 2d | | |
| e | Add lines 2a, 2b, 2c, and 2d | 2e | | |
| 3 | Add lines 1 and 2e | 3 | | 165,242. |

Part II No Tax on Tips

Caution: Fill out Part II only if you received qualified tips. These tips must have been received in an occupation listed at IRS.gov/TippedOccupations. You and/or your spouse who received qualified tips must have a valid social security number to claim the deduction. If married, you must file jointly to claim this deduction. See instructions.

| | | | | |
|-----------|--|-----------|--|--|
| 4 | Qualified tips received as an employee. If you received tips as an employee with respect to employment with more than one employer, enter -0- on lines 4a and 4b and see the instructions to determine the amount to enter on line 4c. If you received tips as an employee in more than one occupation, see the instructions. | | | |
| a | Enter qualified tips included on Form W-2, box 7, but see the instructions if Form W-2, box 5 is more than \$176,100 or you received tips that are not subject to social security and Medicare taxes | 4a | | |
| b | Qualified tips included on Form 4137, line 1, row A, column (c). If Form 4137 is not filed, enter -0- | 4b | | |
| c | If you only received qualified tips as an employee with respect to employment with one employer, enter the larger of line 4a or line 4b. Otherwise, see the instructions to determine the amount to enter on line 4c. If you received tips as an employee in more than one occupation, see the instructions | 4c | | |
| 5 | Qualified tips received in the course of a trade or business. Qualified tip amount included in Form 1099-NEC, box 1; Form 1099-MISC, box 3; or Form 1099-K, box 1a. Do not enter more than the net profit from the trade or business. If you received qualified tips in the course of more than one trade or business or in more than one occupation, see instructions | 5 | | |
| 6 | Add lines 4c and 5 | 6 | | |
| 7 | Enter the smaller of the amount on line 6 or \$25,000 | 7 | | |
| 8 | Enter the amount from line 3 | 8 | | |
| 9 | Enter \$150,000 (\$300,000 if married filing jointly) | 9 | | |
| 10 | Subtract line 9 from line 8. If zero or less, enter the amount from line 7 on line 13 | 10 | | |
| 11 | Divide line 10 by \$1,000. If the resulting number isn't a whole number, decrease the result to the next lower whole number. (For example, decrease 1.5 to 1, and decrease 0.05 to 0.) | 11 | | |
| 12 | Multiply line 11 by \$100 | 12 | | |
| 13 | Qualified tips deduction. Subtract line 12 from line 7. If zero or less, enter -0- | 13 | | |

Part III No Tax on Overtime

Caution: Fill out Part III only if you received qualified overtime compensation. You and/or your spouse who received the qualified overtime compensation must have a valid social security number to claim this deduction. If married, you must file jointly to claim this deduction. See instructions.

| | | | | |
|------------|--|------------|-----------|--|
| 14a | Qualified overtime compensation included in Form W-2, box 1. If you received qualified overtime compensation not reported on Form W-2, box 1, see instructions | 14a | 922. | |
| b | Qualified overtime compensation included in Form 1099-NEC, box 1 or Form 1099-MISC, box 3 (see instructions) | 14b | | |
| c | Add lines 14a and 14b | 14c | 922. | |
| 15 | Enter the smaller of the amount on line 14c or \$12,500 (\$25,000 if married filing jointly) | 15 | 922. | |
| 16 | Enter the amount from line 3 | 16 | 165,242. | |
| 17 | Enter \$150,000 (\$300,000 if married filing jointly) | 17 | 300,000. | |
| 18 | Subtract line 17 from line 16. If zero or less, enter the amount from line 15 on line 21 | 18 | -134,758. | |
| 19 | Divide line 18 by \$1,000. If the resulting number isn't a whole number, decrease the result to the next lower whole number. (For example, decrease 1.5 to 1, and decrease 0.05 to 0.) | 19 | | |
| 20 | Multiply line 19 by \$100 | 20 | | |
| 21 | Qualified overtime compensation deduction. Subtract line 20 from line 15. If zero or less, enter -0- | 21 | 922. | |

Part IV No Tax on Car Loan Interest

Caution: Fill out Part IV only if you, or your spouse if married filing jointly, paid or accrued qualified passenger vehicle loan interest (QPVL). Column (iii) is the total QPVL paid in 2025 less the amounts reported in column (i). See instructions.

22 Applicable passenger vehicle (see instructions). If more than two VINs, see instructions.

| | (i) Vehicle identification number (VIN) | Interest for this loan: | |
|----|---|--|--------------------|
| | | (ii) Deducted on Schedule C, Schedule E, or Schedule F | (iii) Schedule 1-A |
| a | | | |
| b | | | |
| 23 | Add lines 22a and 22b, column (ii) | 23 | |
| 24 | Enter the smaller of the amount on line 23 or \$10,000 | 24 | |
| 25 | Enter the amount from line 3 | 25 | |
| 26 | Enter \$100,000 (\$200,000 if married filing jointly) | 26 | |
| 27 | Subtract line 26 from line 25. If zero or less, enter the amount from line 24 on line 30 | 27 | |
| 28 | Divide line 27 by \$1,000. If the resulting number isn't a whole number, increase the result to the next higher whole number. (For example, increase 1.5 to 2, and increase 0.05 to 1.) | 28 | |
| 29 | Multiply line 28 by \$200 | 29 | |
| 30 | Qualified passenger vehicle loan interest deduction. Subtract line 29 from line 24. If zero or less, enter -0- | 30 | |

Part V Enhanced Deduction for Seniors

Caution: You and/or your spouse must have a valid social security number. If married, you must file jointly to claim this deduction. See instructions.

| | | | |
|-----|--|-----|----------|
| 31 | Enter the amount from line 3 | 31 | 165,242. |
| 32 | Enter \$75,000 (\$150,000 if married filing jointly) | 32 | 150,000. |
| 33 | Subtract line 32 from line 31. If zero or less, enter \$6,000 on line 35 | 33 | 15,242. |
| 34 | Multiply line 33 by 6% (0.06) | 34 | 915. |
| 35 | Subtract line 34 from \$6,000. If zero or less, enter -0- | 35 | 5,085. |
| 36a | If you have a valid social security number (see instructions) and were born before January 2, 1961, enter the amount from line 35 | 36a | 5,085. |
| b | If you are married filing jointly, your spouse has a valid social security number (see instructions), and your spouse was born before January 2, 1961, enter the amount from line 35 | 36b | 5,085. |
| 37 | Enhanced deduction for seniors. Add lines 36a and 36b | 37 | 10,170. |

Part VI Total Additional Deductions

| | | | |
|----|--|----|---------|
| 38 | Add lines 13, 21, 30, and 37. Enter here and on Form 1040 or 1040-SR, line 13b, or on Form 1040-NR, line 13c | 38 | 11,092. |
|----|--|----|---------|

Qualified Overtime Compensation From More Than One Employer Worksheet - *Keep for Your Records*

| 1 | | (a) Name of employer | (b) Qualified overtime reported on Form W-2, box 1 |
|---|---|---|--|
| | A | GHIRARDELLI CHOCOLATE COMPANY | 917. |
| | B | PYRAMID DOWNTOWN BERKELEY | |
| | C | MANAGEMENT LP | 5. |
| | D | | |
| | E | | |
| 2 | | Add lines the amounts from 1A through 1E, column (b), and enter this amount on Schedule 1-A, line 14a | 922. |

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

Your social security number

MARGARET J. TROWE & ELLEN M. BRICKLEY

Part I Nonrefundable Credits

| | | | |
|----|---|----|------|
| 1 | Foreign tax credit. Attach Form 1116 if required | 1 | 485. |
| 2 | Credit for child and dependent care expenses from Form 2441, line 11. Attach Form 2441 | 2 | |
| 3 | Education credits from Form 8863, line 19 | 3 | |
| 4 | Retirement savings contributions credit. Attach Form 8880 | 4 | |
| 5a | Residential clean energy credit from Form 5695, line 15 | 5a | |
| b | Energy efficient home improvement credit from Form 5695, line 32 | 5b | |
| 6 | Other nonrefundable credits: | | |
| a | General business credit. Attach Form 3800 | 6a | |
| b | Credit for prior year minimum tax. Attach Form 8801 | 6b | |
| c | Adoption credit. Attach Form 8839 | 6c | |
| d | Credit for the elderly or disabled. Attach Schedule R | 6d | |
| e | Reserved for future use | 6e | |
| f | Clean vehicle credit. Attach Form 8936 | 6f | |
| g | Mortgage interest credit. Attach Form 8396 | 6g | |
| h | District of Columbia first-time homebuyer credit. Attach Form 8859 | 6h | |
| i | Qualified electric vehicle credit. Attach Form 8834 | 6i | |
| j | Alternative fuel vehicle refueling property credit. Attach Form 8911 | 6j | |
| k | Credit to holders of tax credit bonds. Attach Form 8912 | 6k | |
| l | Amount on Form 8978, line 14. See instructions | 6l | |
| m | Credit for previously owned clean vehicles. Attach Form 8936 | 6m | |
| z | Other nonrefundable credits. List type and amount: | 6z | |
| 7 | Total other nonrefundable credits. Add lines 6a through 6z | 7 | |
| 8 | Add lines 1 through 4, 5a, 5b, and 7. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 20 | 8 | 485. |

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 Created 11/17/25

Interest and Dividend Summary

Name: MARGARET J. TROWE & ELLEN M. BRICKLEY

FEIN/SSN:

| Payer | Interest | Interest on U.S. Savings Bonds | Tax-Exempt Interest | Private Activity Interest | Market Discount | Original Issue Discount (OID) | Ordinary Dividends | Qualified Dividends |
|--|----------|--------------------------------|---------------------|---------------------------|-----------------|-------------------------------|--------------------|---------------------|
| A JPMORGAN CHASE BANK N.A. | 1. | | | | | | | |
| B JPMORGAN CHASE BANK N.A. | 478. | | | | | | | |
| C DEPARTMENT OF THE TREASURY | | 825. | | | | | | |
| D FROM K-1 - JEROME TROWE G.S.T. TRUST | 16,456. | | | | | | 35,771. | 16,869. |
| E FROM K-1 - JEROME TROWE G.S.T. TRUST | | 1,264. | | | | | | |
| F | | | | | | | | |
| G | | | | | | | | |
| H | | | | | | | | |
| I | | | | | | | | |
| J | | | | | | | | |
| K | | | | | | | | |
| Totals | 16,935. | 2,089. | | | | | 35,771. | 16,869. |

| Capital Gain Distributions | Unrecaptured Section 1250 Gain | Section 1202 Gain | Collectibles | Section 199A Dividends | Investment Expenses | Federal Tax Withheld | State Tax Withheld | Foreign Tax Paid |
|----------------------------|--------------------------------|-------------------|--------------|------------------------|---------------------|----------------------|--------------------|------------------|
| A | | | | | | | | |
| B | | | | | | | | |
| C | | | | | | | | |
| D | | | | 773. | | | | |
| E | | | | | | | | |
| F | | | | | | | | |
| G | | | | | | | | |
| H | | | | | | | | |
| I | | | | | | | | |
| J | | | | | | | | |
| K | | | | | | | | |
| Totals | | | | 773. | | | | |

Qualified Dividends and Capital Gain Tax Worksheet - Line 16

Keep for Your Records

| | |
|---|--------------|
| Name(s) shown on return MARGARET J. TROWE & ELLEN M. BRICKLEY | Your SSN |
|---|--------------|

Before you begin:

- ✓ See the earlier instructions for line 16 to see if you can use this worksheet to figure your tax.
- ✓ Before completing this worksheet, complete Form 1040 or 1040-SR through line 15.
- ✓ If you don't have to file Schedule D and you received capital gain distributions, be sure you checked the box on Form 1040 or 1040-SR, line 7b.

| | |
|---|---|
| <p>1. Enter the amount from Form 1040 or 1040-SR, line 15. However, if you are filing Form 2555 (relating to foreign earned income), enter the amount from line 3 of the Foreign Earned Income Tax Worksheet 1. <u>119,295.</u></p> <p>2. Enter the amount from Form 1040 or 1040-SR, line 3a* 2. <u>16,869.</u></p> <p>3. Are you filing Schedule D?*</p> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> Yes. Enter the smaller of line 15 or line 16 of Schedule D. If either line 15 or line 16 is blank or a loss, enter -0-. </div> <div style="margin-right: 10px;">} 3. <u>0.</u></div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="margin-right: 10px;"> <input checked="" type="checkbox"/> No. Enter the amount from Form 1040 or 1040-SR, line 7a. </div> </div> <p>4. Add lines 2 and 3 4. <u>16,869.</u></p> <p>5. Subtract line 4 from line 1. If zero or less, enter -0- 5. <u>102,426.</u></p> <p>6. Enter:</p> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> \$48,350 if single or married filing separately, \$96,700 if married filing jointly or qualifying surviving spouse, \$64,750 if head of household. </div> <div style="margin-right: 10px;">} 6. <u>96,700.</u></div> </div> <p>7. Enter the smaller of line 1 or line 6 7. <u>96,700.</u></p> <p>8. Enter the smaller of line 5 or line 7 8. <u>96,700.</u></p> <p>9. Subtract line 8 from line 7. This amount is taxed at 0% 9. <u>0.</u></p> <p>10. Enter the smaller of line 1 or line 4 10. <u>16,869.</u></p> <p>11. Enter the amount from line 9 11. <u>0.</u></p> <p>12. Subtract line 11 from line 10 12. <u>16,869.</u></p> <p>13. Enter:</p> <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> \$533,400 if single, \$300,000 if married filing separately, \$600,050 if married filing jointly or qualifying surviving spouse, \$566,700 if head of household. </div> <div style="margin-right: 10px;">} 13. <u>600,050.</u></div> </div> <p>14. Enter the smaller of line 1 or line 13 14. <u>119,295.</u></p> <p>15. Add lines 5 and 9 15. <u>102,426.</u></p> <p>16. Subtract line 15 from line 14. If zero or less, enter -0- 16. <u>16,869.</u></p> <p>17. Enter the smaller of line 12 or line 16 17. <u>16,869.</u></p> <p>18. Multiply line 17 by 15% (0.15) 18. <u>2,530.</u></p> <p>19. Add lines 9 and 17 19. <u>16,869.</u></p> <p>20. Subtract line 19 from line 10 20. <u>0.</u></p> <p>21. Multiply line 20 by 20% (0.20) 21. <u>0.</u></p> <p>22. Figure the tax on the amount on line 5. If the amount on line 5 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 5 is \$100,000 or more, use the Tax Computation Worksheet 22. <u>12,362.</u></p> <p>23. Add lines 18, 21, and 22 23. <u>14,892.</u></p> <p>24. Figure the tax on the amount on line 1. If the amount on line 1 is less than \$100,000, use the Tax Table to figure the tax. If the amount on line 1 is \$100,000 or more, use the Tax Computation Worksheet 24. <u>16,073.</u></p> <p>25. Tax on all taxable income. Enter the smaller of line 23 or line 24. Also include this amount on the entry space on Form 1040 or 1040-SR, line 16. If you are filing Form 2555, don't enter this amount on the entry space on Form 1040 or 1040-SR, line 16. Instead, enter it on line 4 of the Foreign Earned Income Tax Worksheet 25. <u>14,892.</u></p> | <p>1. <u>119,295.</u></p> <p>2. <u>16,869.</u></p> <p>3. <u>0.</u></p> <p>4. <u>16,869.</u></p> <p>5. <u>102,426.</u></p> <p>6. <u>96,700.</u></p> <p>7. <u>96,700.</u></p> <p>8. <u>96,700.</u></p> <p>9. <u>0.</u></p> <p>10. <u>16,869.</u></p> <p>11. <u>0.</u></p> <p>12. <u>16,869.</u></p> <p>13. <u>600,050.</u></p> <p>14. <u>119,295.</u></p> <p>15. <u>102,426.</u></p> <p>16. <u>16,869.</u></p> <p>17. <u>16,869.</u></p> <p>18. <u>2,530.</u></p> <p>19. <u>16,869.</u></p> <p>20. <u>0.</u></p> <p>21. <u>0.</u></p> <p>22. <u>12,362.</u></p> <p>23. <u>14,892.</u></p> <p>24. <u>16,073.</u></p> <p>25. <u>14,892.</u></p> |
|---|---|

* If you are filing Form 2555, see the footnote in the Foreign Earned Income Tax Worksheet before completing this line.

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

Your social security number

MARGARET J. TROWE & ELLEN M. BRICKLEY

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

Table with 6 columns: (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. Rows A, B, C, D.

Table with 5 columns: (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. Rows A, B, C, D.

29a Totals
b Totals

30 Add columns (h) and (k) of line 29a

31 Add columns (g), (i), and (j) of line 29b

32 Total partnership and S corporation income or (loss). Combine lines 30 and 31

Part III Income or Loss From Estates and Trusts

Table with 2 columns: (a) Name, (b) Employer identification number. Rows A, B.

Table with 4 columns: (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. Rows A, B.

34a Totals
b Totals

35 Add columns (d) and (f) of line 34a

36 Add columns (c) and (e) of line 34b

37 Total estate and trust income or (loss). Combine lines 35 and 36

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

Table with 5 columns: (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

Part V Summary

40 Net farm rental income or (loss) from Form 4835. Also, complete line 42 below

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

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.

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

INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2025

SCHEDULE E

Name MARGARET J. TROME

SSN/EIN

Passthrough JEROME TROME CHILDREN'S TRUST F/B/O MARGARET TROME - MARG

ID

TAXPAYER

ESTATE OR TRUST

OTHER PASSIVE

SCHEDULE E, PAGE 2


| | K-1 Input | Prior Year Unallowed Basis Loss | Disallowed Due to Basis Limitation | Prior Year Unallowed At-Risk Loss | Disallowed Due to At-Risk | Prior Year Passive Loss | Disallowed Passive Loss | Tax Return |
|--|-----------|---------------------------------|------------------------------------|-----------------------------------|---------------------------|-------------------------|-------------------------|------------|
| Ordinary business income (loss) | | | | | | | | |
| Rental real estate income (loss) | | | | | | | | |
| Other net rental income (loss) | | | | | | | | |
| Intangible drilling costs/dry hole costs | | | | | | | | |
| Self-charged passive interest expense | | | | | | | | |
| Guaranteed payments | | | | | | | | |
| Section 179 and carryover | | | | | | | | |
| Disallowed section 179 expense | | | | | | | | |
| Excess farm loss | | | | | | | | |
| Net income (loss) | | | | | | | | |
| First passive other | | | | | | | | |
| Second passive other | | | | | | | | |
| Cost depletion | | | | | | | | |
| Percentage depletion | | | | | | | | |
| Depletion carryover | | | | | | | | |
| Disallowed due to 65% limitation | | | | | | | | |
| Unreimbursed expenses (nonpassive) | | | | | | | | |
| Nonpassive other | | | | | | | | |
| Total Schedule E (page 2) | | | | | | | | |
| FORM 4797 | | | | | | | | |
| Section 1231 gain (loss) | | | | | | | | |
| Section 179 recapture on disposition | | | | | | | | |
| SCHEDULE D | | | | | | | | |
| Net short-term cap. gain (loss) | | | | | | | | |
| Net long-term cap. gain (loss) | | | | | | | | |
| Section 1256 contracts & straddles | | | | | | | | |
| FORM 4962 | | | | | | | | |
| Investment interest expense - Sch. A | | | | | | | | |
| Other net investment income | | | | | | | | |
| ITEMIZED DEDUCTIONS | | | | | | | | |
| Charitable contributions | | | | | | | | |
| Deductions related to portfolio income | | | | | | | | |
| Other | | | | | | | | |

INCOME FROM PASSTHROUGH STATEMENT, PAGE 2

2025

SCHEDULE E

Name MARGARET J. TROWE

Passthrough JEROME TROWE TROWE CHILDREN'S TRUST F/B/O MARGARET TROWE - MARG ID 

SSN/EIN 

ESTATE OR TRUST TAXPAYER

| OTHER PASSIVE | K-1 Input | Prior Year Unallowed Basis Loss | Disallowed Due to Basis Limitation | Prior Year Unallowed At-Risk Loss | Disallowed Due to At-Risk | Prior Year Passive Loss | Disallowed Passive Loss | Tax Return |
|--|-----------|---------------------------------|------------------------------------|-----------------------------------|---------------------------|-------------------------|-------------------------|------------|
| INTEREST AND DIVIDENDS | | | | | | | | |
| Interest income | | | | | | | | |
| Interest from U.S. bonds | | | | | | | | |
| Ordinary dividends | | | | | | | | |
| Qualified dividends | | | | | | | | |
| Tax-exempt interest income | | | | | | | | |
| FORM 6251 | | | | | | | | |
| Depreciation adjustment after 12/31/86 | | | | | | | | |
| Adjusted gain or loss | | | | | | | | |
| Beneficiary's AMT adjustment | | | | | | | | |
| Depletion (other than oil) | | | | | | | | |
| Other | | | | | | | | |
| MISCELLANEOUS | | | | | | | | |
| Self-employment earnings (loss)/Wages | | | | | | | | |
| Gross farming & fishing inc | | | | | | | | |
| Royalties | | | | | | | | |
| Royalty expenses/depletion | | | | | | | | |
| Undistributed capital gains credit | | | | | | | | |
| Backup withholding | | | | | | | | |
| Credit for estimated tax | | | | | | | | |
| Cancellation of debt | | | | | | | | |
| Medical insurance - 1040 | | | | | | | | |
| Dependent care benefits | | | | | | | | |
| Retirement plans | | | | | | | | |
| Passthrough adjustment to Form 1040 | | | | | | | | |
| Penalty on early withdrawal of savings | | | | | | | | |
| NOL | | | | | | | | |
| Other taxes/recapture of credits | | | | | | | | |
| Credits | | | | | | | | |
| Casualty and theft loss | | | | | | | | |
| FORM 8995 | | | | | | | | |
| Qualified business income | | | | | | | | |
| Qualified service income | | | | | | | | |
| Section 199A W-2 wages | | | | | | | | |
| Section 199A unadjusted basis | | | | | | | | |

INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2025

SCHEDULE E

Name MARGARET J. TROME

SSN/EIN

Passthrough JEROME TROME G.S.T. TRUST - HOWARD GOSS, LAURA & LARRY BO

TAXPAYER

ESTATE OR TRUST

OTHER PASSIVE

SCHEDULE E, PAGE 2

| | K-1 Input | Prior Year Unallowed Basis Loss | Disallowed Due to Basis Limitation | Prior Year Unallowed At-Risk Loss | Disallowed Due to At-Risk | Prior Year Passive Loss | Disallowed Passive Loss | Tax Return |
|--|-----------|---------------------------------|------------------------------------|-----------------------------------|---------------------------|-------------------------|-------------------------|------------|
| Ordinary business income (loss) | | | | | | | | |
| Rental real estate income (loss) | | | | | | | | |
| Other net rental income (loss) | | | | | | | | |
| Intangible drilling costs/dry hole costs | | | | | | | | |
| Self-charged passive interest expense | | | | | | | | |
| Guaranteed payments | | | | | | | | |
| Section 179 and carryover | | | | | | | | |
| Disallowed section 179 expense | | | | | | | | |
| Excess farm loss | | | | | | | | |
| Net income (loss) | | | | | | | | |
| First passive other | | | | | | | | |
| Second passive other | | | | | | | | |
| Cost depletion | | | | | | | | |
| Percentage depletion | | | | | | | | |
| Depletion carryover | | | | | | | | |
| Disallowed due to 65% limitation | | | | | | | | |
| Unreimbursed expenses (nonpassive) | | | | | | | | |
| Nonpassive other | | | | | | | | |
| Total Schedule E (page 2) | | | | | | | | |
| FORM 4797 | | | | | | | | |
| Section 1231 gain (loss) | | | | | | | | |
| Section 179 recapture on disposition | | | | | | | | |
| SCHEDULE D | | | | | | | | |
| Net short-term cap. gain (loss) | | | | | | | | |
| Net long-term cap. gain (loss) | | | | | | | | |
| Section 1256 contracts & straddles | | | | | | | | |
| FORM 4952 | | | | | | | | |
| Investment interest expense - Sch. A | | | | | | | | |
| Other net investment income | | | | | | | | |
| ITEMIZED DEDUCTIONS | | | | | | | | |
| Charitable contributions | | | | | | | | |
| Deductions related to portfolio income | | | | | | | | |
| Other | | | | | | | | |

INCOME FROM PASSTHROUGH STATEMENT, PAGE 2

2025

SCHEDULE E

Name MARGARET J. TROMB

SSN/EIN [REDACTED]

Passthrough JEROME TROMB G.S.T. TRUST - HOWARD GOSS, LAURA & LARRY BO

TAXPAYER [REDACTED]

ESTATE OR TRUST

OTHER PASSIVE

| INTEREST AND DIVIDENDS | K-1 Input | Prior Year Unallowed Basis Loss | Disallowed Due to Basis Limitation | Prior Year Unallowed At-Risk Loss | Disallowed Due to At-Risk | Prior Year Passive Loss | Disallowed Passive Loss | Tax Return |
|--|-----------|---------------------------------|------------------------------------|-----------------------------------|---------------------------|-------------------------|-------------------------|------------|
| Interest income | 16,456. | | | | | | | 16,456. |
| Interest from U.S. bonds | 1,264. | | | | | | | 1,264. |
| Ordinary dividends | 35,771. | | | | | | | 35,771. |
| Qualified dividends | 16,869. | | | | | | | 16,869. |
| Tax-exempt interest income | | | | | | | | |
| FORM 6251 | | | | | | | | |
| Depreciation adjustment after 12/31/86 | | | | | | | | |
| Adjusted gain or loss | | | | | | | | |
| Beneficiary's AMT adjustment | | | | | | | | |
| Depletion (other than oil) | | | | | | | | |
| Other | | | | | | | | |
| MISCELLANEOUS | | | | | | | | |
| Self-employment earnings (loss)/Wages | | | | | | | | |
| Gross farming & fishing inc | | | | | | | | |
| Royalties | | | | | | | | |
| Royalty expenses/depletion | | | | | | | | |
| Undistributed capital gains credit | | | | | | | | |
| Backup withholding | | | | | | | | |
| Credit for estimated tax | | | | | | | | |
| Cancellation of debt | | | | | | | | |
| Medical insurance - 1040 | | | | | | | | |
| Dependent care benefits | | | | | | | | |
| Retirement plans | | | | | | | | |
| Passthrough adjustment to Form 1040 | | | | | | | | |
| Penalty on early withdrawal of savings | | | | | | | | |
| NOL | | | | | | | | |
| Other taxes/recapture of credits | | | | | | | | |
| Credits | | | | | | | | |
| Casualty and theft loss | | | | | | | | |
| FORM 8995 | | | | | | | | |
| Qualified business income | | | | | | | | |
| Qualified service income | | | | | | | | |
| Section 199A W-2 wages | | | | | | | | |
| Section 199A unadjusted basis | | | | | | | | |

Schedule E
 MARGARET J. TROWE & ELLEN M. BRICKLEY
 PASSTHROUGH RECAP - BASIC INFORMATION
 2025

| TY | Entity No. | Act No. | Name | 1/1/6 | 2/2/7 | 3/3/8 | * | * | 5/4/1 | * | 6a/5a/2a | 6b/5b/2b | 7/6/* | 8/7/3 | 9a/8a/4a |
|--------|------------|---------|----------------------------------|------------------------|--------------------------------|----------------------------|---------------------------|--------------------------------------|----------|---------------------------|-----------|---------------------|-----------|--------------------------------|-----------------------------------|
| T | J | E | | Ordinary Income (Loss) | Rental Real Estate Inc. (Loss) | Other Rental Income (Loss) | Passive Activity Loss C/O | AMT-Exempt Passive Activity Loss C/O | Interest | US Treasury Bond Interest | Dividends | Qualified Dividends | Royalties | Short-Term Capital Gain (Loss) | Net Long-Term Capital Gain (Loss) |
| 1 | 1 | 1 | TJEROME TROWE CHILDREN'S TRUST F | | | | | | 16,456. | 1,264. | 35,771. | 16,869. | | | |
| 2 | 2 | 2 | TJEROME TROWE G.S.P. TRUST | | | | | | 16,456. | 1,264. | 35,771. | 16,869. | | | |
| Totals | | | | | | | | | 16,456. | 1,264. | 35,771. | 16,869. | | | |

| Line Reference (1065/1205/1041) | 4/*/* | 10/9/* | * | 11/10/* | 13/12* | 12/11/* | 13/12* | 13/12/* | */* | 20/17/14 | 13/*/* | * | 14/*/* | 17/15/12 | */*/12 | */*/12 | |
|---------------------------------|---------|--------------------------------|--------------------------|--------------------------------|--------------|------------------------------|---------------------|------------------|--------------------------------------|--------------------------------------|-------------------|-----------------------------|-------------------------------------|-----------------|------------------------------------|------------------------|-----------------|
| Entity No. | Act No. | Guaranteed Payments to Partner | Section 1231 Gain (Loss) | Ordinary Gain (Loss) Form 4797 | Other Income | Charitable Contributions 50% | Section 179 Expense | Other Deductions | Investment Int. Expense (Schedule A) | Investment Int. Expense (Schedule E) | Investment Income | SE Health Insurance Premium | Wages for More Than 2% Shareholders | Net SE Earnings | AMT Depreciation Post-196 Property | Minimum Tax Adjustment | Exclusion Items |
| 2 | 2 | | | | | | | | | | 53,491. | | | | | | |
| Totals | | | | | | | | | | | 53,491. | | | | | | |

Component of: Schedule E-1 (1065/1205/1041) Form 4797, Line 2
 Schedule E-1 (1065/1205/1041) Form 4797, Line 10
 Schedule E-1 (1065/1205/1041) Form 4562, Line 6
 Schedule E-1 (1065/1205/1041) Form 4952, Line 4a
 Schedule E-1 (1065/1205/1041) Form 1040, Line 17
 Schedule E-1 (1065/1205/1041) Form 1040, Line 1
 Schedule E-1 (1065/1205/1041) Form 8811, Line 2
 Schedule E-1 (1065/1205/1041) Form 8811, Line 2i
 Schedule E-1 (1065/1205/1041) Form 8811, Line 2j

Schedule E **MARGARET J. TROWE & ELLEN M. BRICKLEY** **PASSTHROUGH RECAP - QUALIFIED BUSINESS INCOME DEDUCTION** **2025**

| Schedule K-1 | | Line Reference (1065/1205/1045) | | | | | | | | | | | | | | |
|----------------|---------|----------------------------------|--------------------------------|---------------------------------|----------------------------|-----------------------|---------------------------|-------------------|--------------------|--------------------------------|------------------------------------|-----------------------------------|--------------------|---------------------------|-------------------------|------------------------------|
| Entity No. | Act No. | 20/17/14 Ordinary Income or Loss | 20/17/14 Rental Income or Loss | 20/17/14 Royalty Income or Loss | 20/17/14 Section 1231 Loss | 20/17/14 Other Income | 20/17/14 Other Deductions | 20/17/14 Reserved | 20/17/14 Depletion | 20/17/14 Depletion Adjustments | 20/17/14 Sec 59(e)(2) Expenditures | 20/17/14 Sec 59(e)(2) Adjustments | 20/17/14 W-2 Wages | 20/17/14 Unadjusted Basis | 20/17/14 REIT Dividends | 20/17/14 PTP Income Override |
| | 2 | | | | | | | | | | | | | | 773. | |
| Totals | | Form 8995 | Form 8995 | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A |
| Components of: | | | | | | | | | | | | | | | | |

| Schedule K-1 | | Line Reference (1065/1205/1045) | | | | | | | | | | | | | |
|----------------|---------|--|---|------------------------------------|---------------------------------|--------------------------------|--------------------------------------|--------------------------------|---|--|---|-------------------------------------|---|-------------------------------|--|
| Entity No. | Act No. | 20/17/14 Qualified Business Inc Override | 20/17/14 Qualified Service Inc Override | 20/17/14 Patron Reduction Override | 20/17/14 Ordinary Gain Override | 20/17/14 OBI from Cooperatives | 20/17/14 W-2 Wages from Cooperatives | 20/17/14 Section 179 Deduction | 20/17/14 Section 179 Deduction Adjustment | 20/17/14 SE Health Insurance Deduction | 20/17/14 SE Health Insurance Deduction Adj. | 20/17/14 Retirement Plan Deductions | 20/17/14 Retirement Plan Deduction Adj. | 20/17/14 Net Earnings from SE | 20/17/14 Net Earnings from SE Adjustment |
| Totals | | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995-A | Form 8995/ 8995-A | Form 8995-A | Form 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A | Form 8995/ 8995-A |
| Components of: | | | | | | | | | | | | | | | |

Form **1116**

Department of the Treasury
Internal Revenue Service

Foreign Tax Credit

(Individual, Estate, or Trust)

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0074

2025

Attachment
Sequence No. **19**

Name **MARGARET J. TROWE & ELLEN M. BRICKLEY**

Identifying number as shown on page 1 of your tax return

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

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

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

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

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

| | Foreign Country or U.S. Territory | | | Total (Add cols. A, B, and C.) |
|---|-----------------------------------|---|---|-----------------------------------|
| | A | B | C | |
| 1 Enter the name of the foreign country or U.S. territory | OTHER COUNTRIES | | | |
| 1a Gross income from sources within country shown above and of the type checked above: | | | | 1a |
| b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions <input type="checkbox"/> | | | | |
| Deductions and losses (Caution: See instructions.): | | | | |
| 2 Expenses definitely related to the income on line 1a (attach statement) | | | | |
| 3 Pro rata share of other deductions not definitely related: | | | | |
| a Certain itemized deductions or standard deduction (see instructions) | 34,700. | | | |
| b Other deductions (attach statement) | 34,700. | | | |
| c Add lines 3a and 3b | | | | |
| d Gross foreign source income | | | | |
| e Gross income from all sources | 117,278. | | | |
| f Divide line 3d by line 3e | .000000000 | | | |
| g Multiply line 3c by line 3f | | | | |
| 4 Pro rata share of interest expense: | | | | |
| a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) | | | | |
| b Other interest expense | | | | |
| 5 Losses from foreign sources | | | | |
| 6 Add lines 2, 3g, 4a, 4b, and 5 | | | | 6 |
| 7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 | | | | 7 |

Part II Foreign Taxes Paid or Accrued

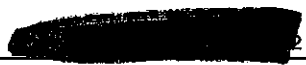
| Country | Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued | Foreign taxes paid or accrued | | | | | | | | |
|--------------------------|--|-------------------------------|--------------|--|---------------|---|------------------------------|--|--|---|
| | | In foreign currency | | | | In U.S. dollars | | | | |
| | | Taxes withheld at source on: | | | | (p) Other foreign taxes paid or accrued | Taxes withheld at source on: | | | (t) Other foreign taxes paid or accrued |
| (l) Date paid or accrued | (m) Dividends | (n) Rents and royalties | (o) Interest | | (q) Dividends | (r) Rents and royalties | (s) Interest | | | |
| A | | | | | | | | | | |
| B | | | | | | | | | | |
| C | | | | | | | | | | |

B Add lines A through C, column (u). Enter the total here and on line 9, page 2 **8**

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2025) Created 9/16/25

LHA 511501 01-07-26



Part III Figuring the Credit

| | | | |
|----|---|----|---------|
| 9 | Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I | 9 | |
| 10 | Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) STATEMENT 10 <input type="checkbox"/> (if your income was section 951A category income (box a above Part I), leave line 10 blank.) | 10 | 3,290. |
| 11 | Add lines 9 and 10 | 11 | 3,290. |
| 12 | Reduction in foreign taxes | 12 | |
| 13 | Taxes reclassified under high tax kickout | 13 | |
| 14 | Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit | 14 | 3,290. |
| 15 | Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions | 15 | |
| 16 | Adjustments to line 15 | 16 | |
| 17 | Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, skip line 18 and enter -0- on line 19.) | 17 | |
| 18 | Individuals: Enter the sum of (i) Form 1040, 1040-SR, or 1040-NR, line 11b, minus Form 1040, 1040-SR, or 1040-NR, line 14, and (ii) Schedule 1-A (Form 1040), line 37. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions. | 18 | |
| 19 | Divide line 17 by line 18. If line 17 is more than line 18, enter "1" | 19 | .00000 |
| 20 | Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 1z. Estates and trusts: See instructions Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions. | 20 | 14,892. |
| 21 | Multiply line 20 by line 19 (maximum amount of credit) | 21 | |
| 22 | Increase in limitation (section 960(c)) (see instructions) | 22 | |
| 23 | Add lines 21 and 22 | 23 | |
| 24 | Enter the smaller of line 14 or line 23. Enter here and on the appropriate line of Part IV. See instructions | 24 | 0. |

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

| | | | |
|----|--|----|------|
| 25 | Credit for taxes on section 951A category income | 25 | |
| 26 | Credit for taxes on foreign branch category income | 26 | |
| 27 | Credit for taxes on passive category income | 27 | |
| 28 | Credit for taxes on general category income | 28 | 485. |
| 29 | Credit for taxes on section 901(j) income | 29 | |
| 30 | Credit for taxes on certain income re-sourced by treaty | 30 | |
| 31 | Credit for taxes on lump-sum distributions | 31 | |
| 32 | Add lines 25 through 31 | 32 | 485. |
| 33 | Enter the smaller of line 20 or line 32 | 33 | 485. |
| 34 | Reduction of credit for international boycott operations | 34 | |
| 35 | Subtract line 34 from line 33. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a | 35 | 485. |

SCHEDULE B
(Form 1116)

(Rev. December 2022)
Department of the Treasury
Internal Revenue Service

Foreign Tax Carryover Reconciliation Schedule
For calendar year 2025, or other tax year beginning _____, and ending _____
See separate instructions. Attach to Form 1116.

Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0121

Identifying number as shown on page 1 of your tax return

Name MARGARET J. TROME & ELLEN M. BRICKLEY

Use a separate Schedule B (Form 1116) for each applicable category of income listed below. See instructions. Check only one box on each schedule. Check the box for the same separate category code as that shown on the Form 1116 to which this Schedule B is attached.

- a** Reserved for future use
- b** Foreign branch category income
- c** Passive category income
- d** General category income
- e** Section 901(j) income
- f** Certain income re-sourced by treaty
- g** Lump-sum distributions
- h** If box e is checked, enter the country code for the sanctioned country. See instructions
- i** If box f is checked, enter the country code for the treaty country. See instructions

| | (i) 10th Preceding Tax Year | (ii) 9th Preceding Tax Year | (iii) 8th Preceding Tax Year | (iv) 7th Preceding Tax Year | (v) 6th Preceding Tax Year | (vi) 5th Preceding Tax Year | (vii) Subtotal (add columns (i) through (vi)) |
|---|-----------------------------------|-----------------------------------|------------------------------------|-----------------------------------|----------------------------------|-----------------------------------|--|
| 1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions)) | 1,625. | 1,665. | | | | | 3,290. |
| 2 Adjustments to line 1 (enter description - see instructions): | | | | | | | |
| a Carryback adjustment (see instructions) | | | | | | | |
| b Adjustments for section 905(c) redeterminations (see instructions) | | | | | | | |
| c | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| f | | | | | | | |
| g | | | | | | | |
| 3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2) | 1,625. | 1,665. | | | | | 3,290. |
| 4 Foreign tax carryover used in current tax year (enter as a negative number) | | | | | | | |
| 5 Foreign tax carryover expired unused in current tax year (enter as a negative number) | | | | | | | |
| 6 Foreign tax carryover generated in current tax year | | | | | | | |
| 7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number) | | | | | | | |
| 8 Foreign tax carryover to the following tax year. Combine lines 3 through 7. | -0- | 1,665. | | | | | 1,665. |

For Paperwork Reduction Act Notice, see the separate instructions.

| Foreign Tax Carryover Reconciliation | | (viii) Subtotal from page 1 (enter the amounts from column (vii) on page 1) | (ix) 4th Preceding Tax Year | (x) 3rd Preceding Tax Year | (xi) 2nd Preceding Tax Year | (xii) 1st Preceding Tax Year | (xiii) Current Tax Year | (xiv) Totals (add columns (viii) through (xiii)) |
|--------------------------------------|--|--|-----------------------------------|----------------------------------|-----------------------------------|------------------------------------|-------------------------------|---|
| 1 | Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions)) | 3,290. | | | | | | 3,290. |
| 2 | Adjustments to line 1 (enter description - see instructions): | | | | | | | |
| a | Carryback adjustment (see instructions) | | | | | | | |
| b | Adjustments for section 905(c) redeterminations (see instructions) | | | | | | | |
| c | | | | | | | | |
| d | | | | | | | | |
| e | | | | | | | | |
| f | | | | | | | | |
| g | | | | | | | | |
| 3 | Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1116, Part III, line 10. | 3,290. | | | | | | 3,290. |
| 4 | Foreign tax carryover used in current tax year (enter as a negative number) | | | | | | | |
| 5 | Foreign tax carryover expired unused in current tax year (enter as a negative number) | -1,625. | | | | | | -1,625. |
| 6 | Foreign tax carryover generated in current tax year | | | | | | | |
| 7 | Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number) | | | | | | | |
| 8 | Foreign tax carryover to the following tax year. Combine lines 3 through 7. | 1,665. | | | | | | 1,665. |

Schedule B (Form 1116) (Rev. 12-2022)

Form **1116**

Department of the Treasury
Internal Revenue Service

Foreign Tax Credit

(Individual, Estate, or Trust)

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0074

2025

Attachment
Sequence No. **19**

Name

MARGARET J. TROWE & ELLEN M. BRICKLEY

Identifying number as shown on page 1 of your tax return

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

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

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

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

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

| i Enter the name of the foreign country or U.S. territory | Foreign Country or U.S. Territory | | | Total (Add cols. A, B, and C.) |
|--|-----------------------------------|---|---|-----------------------------------|
| | A | B | C | |
| OTHER COUNTRIES | | | | |
| 1a Gross income from sources within country shown above and of the type checked above: | 5,527. | | | 1a 5,527. |
| b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions <input type="checkbox"/> | | | | |
| Deductions and losses (Caution: See instructions.): | | | | |
| 2 Expenses definitely related to the income on line 1a (attach statement) | | | | |
| 3 Pro rata share of other deductions not definitely related: | | | | |
| a Certain itemized deductions or standard deduction (see instructions) | 34,700. | | | |
| b Other deductions (attach statement) | 34,700. | | | |
| c Add lines 3a and 3b | 5,527. | | | |
| d Gross foreign source income | 117,278. | | | |
| e Gross income from all sources | .047127338 | | | |
| f Divide line 3d by line 3e | 1,635. | | | |
| g Multiply line 3c by line 3f | | | | |
| 4 Pro rata share of interest expense: | | | | |
| a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) | | | | |
| b Other interest expense | | | | |
| 5 Losses from foreign sources | | | | |
| 6 Add lines 2, 3g, 4a, 4b, and 5 | 1,635. | | | 6 1,635. |
| 7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 | | | | 7 3,892. |

Part II Foreign Taxes Paid or Accrued

| Country | Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued | Foreign taxes paid or accrued | | | | | | | | | |
|--|--|-------------------------------|---------------|-------------------------|------------------------------|---|---------------|---|---|------|------|
| | | In foreign currency | | | In U.S. dollars | | | | | | |
| | | Taxes withheld at source on: | | | Taxes withheld at source on: | | | (t) Other foreign taxes paid or accrued | (u) Total foreign taxes paid or accrued (add cols. (q) through (t)) | | |
| | | (l) Date paid or accrued | (m) Dividends | (n) Rents and royalties | (o) Interest | (p) Other foreign taxes paid or accrued | (q) Dividends | (r) Rents and royalties | (s) Interest | | |
| A | | | | | | | | | | 735. | 735. |
| B | | | | | | | | | | | |
| C | | | | | | | | | | | |
| B Add lines A through C, column (u). Enter the total here and on line 9, page 2 | | | | | | | | | | 8 | 735. |

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2025) Created 9/16/25

LHA 511601 01-07-26

Part III Figuring the Credit

| | | | | |
|----|---|----|----------|---------|
| 9 | Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I | 9 | 735. | |
| 10 | Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) STATEMENT 12 <input type="checkbox"/> (If your income was section 951A category income (box a above Part I), leave line 10 blank.) | 10 | 512. | |
| 11 | Add lines 9 and 10 | 11 | 1,247. | |
| 12 | Reduction in foreign taxes | 12 | | |
| 13 | Taxes reclassified under high tax kickout | 13 | | |
| 14 | Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit | 14 | | 1,247. |
| 15 | Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions | 15 | 3,892. | |
| 16 | Adjustments to line 15 | 16 | | |
| 17 | Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, skip line 18 and enter -0- on line 19.) | 17 | 3,892. | |
| 18 | Individuals: Enter the sum of (i) Form 1040, 1040-SR, or 1040-NR, line 11b, minus Form 1040, 1040-SR, or 1040-NR, line 14, and (ii) Schedule 1-A (Form 1040), line 37. Estates and trusts: Enter your taxable income without the deduction for your exemption SEE STATEMENT 11 Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions. | 18 | 119,435. | |
| 19 | Divide line 17 by line 18. If line 17 is more than line 18, enter "1" | 19 | | .03259 |
| 20 | Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 1z. Estates and trusts: See instructions Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions. | 20 | | 14,892. |
| 21 | Multiply line 20 by line 19 (maximum amount of credit) | 21 | | 485. |
| 22 | Increase in limitation (section 960(c)) (see instructions) | 22 | | |
| 23 | Add lines 21 and 22 | 23 | | 485. |
| 24 | Enter the smaller of line 14 or line 23. Enter here and on the appropriate line of Part IV. See instructions | 24 | | 485. |

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

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

**SCHEDULE B
(Form 1116g)**

Foreign Tax Carryover Reconciliation Schedule

For calendar year 2025, or other tax year beginning _____, and ending _____

See separate instructions.

Attach to Form 1116g.

Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0121

(Rev. December 2022)
Department of the Treasury
Internal Revenue Service

Identifying number as shown on page 1 of your tax return

Name MARGARET J. TROWE & ELLEN M. BRICKLEY

Use a separate Schedule B (Form 1116g) for each applicable category of income listed below. See instructions. Check only one box on each schedule. Check the box for the same separate category code as that shown on the Form 1116 to which this Schedule B is attached.

- a Reserved for future use
- b Foreign branch category income
- c Passive category income
- d General category income
- e Section 901(f) income
- f Certain income re-sourced by treaty
- g Lump-sum distributions
- h If box e is checked, enter the country code for the sanctioned country. See instructions
- i If box f is checked, enter the country code for the treaty country. See instructions

| | (i) 10th Preceding Tax Year | (ii) 9th Preceding Tax Year | (iii) 8th Preceding Tax Year | (iv) 7th Preceding Tax Year | (v) 6th Preceding Tax Year | (vi) 5th Preceding Tax Year | (vii) Subtotal (add columns (i) through (vi)) |
|--|-----------------------------------|-----------------------------------|------------------------------------|-----------------------------------|----------------------------------|-----------------------------------|--|
| 1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B(see instructions)) | | | | | | | 512. |
| 2 Adjustments to line 1 (enter description - see instructions): | | | | | | | |
| a Carryback adjustment (see instructions) | | | | | | | |
| b Adjustments for section 905(c) redeterminations (see instructions) | | | | | | | |
| c | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| f | | | | | | | |
| g | | | | | | | |
| 3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2) | | | | | | | 512. |
| 4 Foreign tax carryover used in current tax year (enter as a negative number) | | | | | | | |
| 5 Foreign tax carryover expired unused in current tax year (enter as a negative number) | | | | | | | |
| 6 Foreign tax carryover generated in current tax year | | | | | | | |
| 7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number) | | | | | | | |
| 8 Foreign tax carryover to the following tax year. Combine lines 3 through 7. | -0- | | | | | | 512. |

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule B (Form 1116g) (Rev. 12-2022)

| Foreign Tax Carryover Reconciliation | | (viii) Subtotal from page 1 (enter the amounts from column (vii) on page 1) | (ix) 4th Preceding Tax Year | (x) 3rd Preceding Tax Year | (xi) 2nd Preceding Tax Year | (xii) 1st Preceding Tax Year | (xiii) Current Tax Year | (xiv) Totals (add columns (viii) through (xiii)) |
|--------------------------------------|--|--|-----------------------------------|----------------------------------|-----------------------------------|------------------------------------|-------------------------------|---|
| 1 | Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions)) | 512. | | | | | | 512. |
| 2 | Adjustments to line 1 (enter description - see instructions): | | | | | | | |
| 2 | Carryback adjustment (see instructions) | | | | | | | |
| | Adjustments for section 905(c) | | | | | | | |
| | b redeterminations (see instructions) | | | | | | | |
| c | | | | | | | | |
| d | | | | | | | | |
| e | | | | | | | | |
| f | | | | | | | | |
| 9 | Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1116, Part III, line 10. | 512. | | | | | | 512. |
| 4 | Foreign tax carryover used in current tax year (enter as a negative number) | | | | | | | |
| 5 | Foreign tax carryover expired unused in current tax year (enter as a negative number) | | | | | | | |
| 6 | Foreign tax carryover generated in current tax year | | | | | | 250. | 250. |
| 7 | Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number) | | | | | | | |
| 8 | Foreign tax carryover to the following tax year. Combine lines 3 through 7. | 512. | | | | | 250. | 762. |

Schedule B (Form 1116) (Rev. 12-2022)

**ALTERNATIVE MINIMUM TAX
Foreign Tax Credit**

OMB No. 1545-0074

Form **1116**

Department of the Treasury
Internal Revenue Service

(Individual, Estate, or Trust)

Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

Go to www.irs.gov/Form1116 for instructions and the latest information.

2025
Attachment
Sequence No. **19**

Name **MARGARET J. TROWE & ELLEN M. BRICKLEY** Identifying number (as shown on page 1 of your tax return) [REDACTED]

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

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

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

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

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

| | Foreign Country or U.S. Territory | | | Total (Add cols. A, B, and C.) |
|---|-----------------------------------|---|---|-----------------------------------|
| | A | B | C | |
| i Enter the name of the foreign country or U.S. territory OTHER COUNTRIES | | | | |
| 1a Gross income from sources within country shown above and of the type checked above: | | | | 1a |
| b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions <input type="checkbox"/> | | | | |
| Deductions and losses (Caution: See instructions.): | | | | |
| 2 Expenses definitely related to the income on line 1a (attach statement) | | | | |
| 3 Pro rata share of other deductions not definitely related: | | | | |
| a Certain itemized deductions or standard deduction (see instructions) | | | | |
| b Other deductions (attach statement) | | | | |
| c Add lines 3a and 3b | | | | |
| d Gross foreign source income | | | | |
| e Gross income from all sources | 116,094. | | | |
| f Divide line 3d by line 3e | .000000000 | | | |
| g Multiply line 3c by line 3f | | | | |
| 4 Pro rata share of interest expense: | | | | |
| a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) | | | | |
| b Other interest expense | | | | |
| 5 Losses from foreign sources | | | | |
| 6 Add lines 2, 3g, 4a, 4b, and 5 | | | | 6 |
| 7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 | | | | 7 |

Part II Foreign Taxes Paid or Accrued

| Country | Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued | Foreign taxes paid or accrued | | | | | | | | | |
|---------|--|-------------------------------|---------------|-------------------------|------------------------------|---|---------------|-------------------------|--------------|---|---|
| | | In foreign currency | | | In U.S. dollars | | | | | | |
| | | Taxes withheld at source on: | | | Taxes withheld at source on: | | | | | | |
| | | (l) Date paid or accrued | (m) Dividends | (n) Rents and royalties | (o) Interest | (p) Other foreign taxes paid or accrued | (q) Dividends | (r) Rents and royalties | (s) Interest | (t) Other foreign taxes paid or accrued | (u) Total foreign taxes paid or accrued (add cols. (q) through (t)) |
| A | | | | | | | | | | | |
| B | | | | | | | | | | | |
| C | | | | | | | | | | | |

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 **8**

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2025) Created 9/16/25

LHA 511501 01-07-26

ALTERNATIVE MINIMUM TAX

Part III Figuring the Credit

| | | | |
|----|---|----|--------|
| 9 | Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I | 9 | |
| 10 | Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) STATEMENT 13 <input type="checkbox"/> (If your income was section 951A category income (box a above Part I), leave line 10 blank.) | 10 | 4,033. |
| 11 | Add lines 9 and 10 | 11 | 4,033. |
| 12 | Reduction in foreign taxes | 12 | |
| 13 | Taxes reclassified under high tax kickout | 13 | |
| 14 | Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit | 14 | 4,033. |
| 15 | Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions | 15 | |
| 16 | Adjustments to line 15 | 16 | |
| 17 | Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, skip line 18 and enter -0- on line 19.) | 17 | |
| 18 | Individuals: Enter the sum of (i) Form 1040, 1040-SR, or 1040-NR, line 11b, minus Form 1040, 1040-SR, or 1040-NR, line 14, and (ii) Schedule 1-A (Form 1040), line 37. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions. | 18 | |
| 19 | Divide line 17 by line 18. If line 17 is more than line 18, enter "1" | 19 | .00000 |
| 20 | Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 1z. Estates and trusts: See instructions Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see instructions. | 20 | 4,899. |
| 21 | Multiply line 20 by line 19 (maximum amount of credit) | 21 | |
| 22 | Increase in limitation (section 960(c)) (see instructions) | 22 | |
| 23 | Add lines 21 and 22 | 23 | |
| 24 | Enter the smaller of line 14 or line 23. Enter here and on the appropriate line of Part IV. See instructions | 24 | 0. |

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

| | | | |
|----|--|----|------|
| 25 | Credit for taxes on section 951A category income | 25 | |
| 26 | Credit for taxes on foreign branch category income | 26 | |
| 27 | Credit for taxes on passive category income | 27 | |
| 28 | Credit for taxes on general category income | 28 | 175. |
| 29 | Credit for taxes on section 901(j) income | 29 | |
| 30 | Credit for taxes on certain income re-sourced by treaty | 30 | |
| 31 | Credit for taxes on lump-sum distributions | 31 | |
| 32 | Add lines 25 through 31 | 32 | 175. |
| 33 | Enter the smaller of line 20 or line 32 | 33 | 175. |
| 34 | Reduction of credit for international boycott operations | 34 | |
| 35 | Subtract line 34 from line 33. This is your foreign tax credit. Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a | 35 | 175. |

AMT
SCHEDULE B
(Form 1116)

(Rev. December 2022)
Department of the Treasury
Internal Revenue Service

Foreign Tax Carryover Reconciliation Schedule
For calendar year 2025, or other tax year beginning _____, and ending _____
See separate instructions.
Attach to Form 1116.

Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0121

Identifying number as shown on page 1 of your return

MARGARET J. TROME & ELLEN M. BRICKLEY

Use a separate Schedule B (Form 1116) for each applicable category of income listed below. See instructions. Check only one box on each schedule. Check the box for the same separate category code as that shown on the Form 1116 to which this Schedule B is attached.

- Reserved for future use
 Passive category income
 Section 901 (f) income
 Lump-sum distributions
 Foreign branch category income
 General category income
 Certain income re-sourced by treaty

h If box e is checked, enter the country code for the sanctioned country. See instructions
 i If box f is checked, enter the country code for the treaty country. See instructions

| | (i) 10th Preceding Tax Year | (ii) 9th Preceding Tax Year | (iii) 8th Preceding Tax Year | (iv) 7th Preceding Tax Year | (v) 6th Preceding Tax Year | (vi) 5th Preceding Tax Year | (vii) Subtotal (add columns (i) through (vi)) |
|---|-----------------------------------|-----------------------------------|------------------------------------|-----------------------------------|----------------------------------|-----------------------------------|--|
| 1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions)) | 2,295. | 1,738. | | | | | 4,033. |
| 2 Adjustments to line 1 (enter description - see instructions): | | | | | | | |
| a Carryback adjustment (see instructions) | | | | | | | |
| b Adjustments for section 905(c) redeterminations (see instructions) | | | | | | | |
| c | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| f | | | | | | | |
| g | | | | | | | |
| 3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2) | 2,295. | 1,738. | | | | | 4,033. |
| 4 Foreign tax carryover used in current tax year (enter as a negative number) | | | | | | | |
| 5 Foreign tax carryover expired unused in current tax year (enter as a negative number) | | | | | | | |
| 6 Foreign tax carryover generated in current tax year | | | | | | | |
| 7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number) | | | | | | | |
| 8 Foreign tax carryover to the following tax year. Combine lines 3 through 7. | -0- | 1,738. | | | | | 1,738. |

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule B (Form 1116) (Rev. 12-2022)

| Foreign Tax Carryover Reconciliation | (viii) Subtotal from page 1 (enter the amounts from column (vii) on page 1) | (ix) 4th Preceding Tax Year | (x) 3rd Preceding Tax Year | (xi) 2nd Preceding Tax Year | (xii) 1st Preceding Tax Year | (xiii) Current Tax Year | (xiv) Totals (add columns (viii) through (xiii)) |
|--|--|--------------------------------|-------------------------------|--------------------------------|---------------------------------|----------------------------|---|
| 1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior Year Schedule B (see instructions)) | 4,033. | | | | | | 4,033. |
| 2 Adjustments to line 1 (enter description - see instructions): | | | | | | | |
| a Carryback adjustment (see instructions) | | | | | | | |
| b Adjustments for section 905(c) redeterminations (see instructions) | | | | | | | |
| c | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| f | | | | | | | |
| g Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1116, Part III, line 10. | 4,033. | | | | | | 4,033. |
| 4 Foreign tax carryover used in current tax year (enter as a negative number) | | | | | | | |
| 5 Foreign tax carryover expired unused in current tax year (enter as a negative number) | -2,295. | | | | | | -2,295. |
| 6 Foreign tax carryover generated in current tax year | | | | | | | |
| 7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number) | | | | | | | |
| 8 Foreign tax carryover to the following tax year. Combine lines 3 through 7. | 1,738. | | | | | 0. | 1,738. |

Schedule B (Form 1116) (Rev. 12-2022)

**ALTERNATIVE MINIMUM TAX
Foreign Tax Credit**

OMB No. 1545-0074

2025
Attachment
Sequence No. **19**

Form **1116**

Department of the Treasury
Internal Revenue Service

(Individual, Estate, or Trust)
Attach to Form 1040, 1040-SR, 1040-NR, 1041, or 990-T.

Go to www.irs.gov/Form1116 for instructions and the latest information.

Name **MARGARET J. TROWE & ELLEN M. BRICKLEY** Identifying number as shown on page 1 of your tax return [REDACTED]

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

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

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

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

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

| | Foreign Country or U.S. Territory | | | Total (Add cols. A, B, and C.) |
|---|-----------------------------------|---|---|-----------------------------------|
| | A | B | C | |
| i Enter the name of the foreign country or U.S. territory | OTHER COUNTRIES | | | |
| 1a Gross income from sources within country shown above and of the type checked above: | | | | |
| | 5,527. | | | 1a 5,527. |
| b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions <input type="checkbox"/> | | | | |
| Deductions and losses (Caution: See instructions): | | | | |
| 2 Expenses definitely related to the income on line 1a (attach statement) | | | | |
| 3 Pro rata share of other deductions not definitely related: | | | | |
| a Certain itemized deductions or standard deduction (see instructions) | | | | |
| b Other deductions (attach statement) | | | | |
| c Add lines 3a and 3b | | | | |
| d Gross foreign source income | 5,527. | | | |
| e Gross income from all sources | 116,094. | | | |
| f Divide line 3d by line 3e | .047607973 | | | |
| g Multiply line 3c by line 3f | | | | |
| 4 Pro rata share of interest expense: | | | | |
| a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions) | | | | |
| b Other interest expense | | | | |
| 5 Losses from foreign sources | | | | |
| 6 Add lines 2, 3g, 4a, 4b, and 5 | | | | 6 |
| 7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 | | | | 7 5,527. |

Part II Foreign Taxes Paid or Accrued

| Country | Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued | Foreign taxes paid or accrued | | | | | | | | | |
|--|--|-------------------------------|---------------|-------------------------|------------------------------|---|---------------|---|---|-------------------------|--------------|
| | | In foreign currency | | | In U.S. dollars | | | | | | |
| | | Taxes withheld at source on: | | | Taxes withheld at source on: | | | (t) Other foreign taxes paid or accrued | (u) Total foreign taxes paid or accrued (add cols. (q) through (t)) | | |
| | | (l) Date paid or accrued | (m) Dividends | (n) Rents and royalties | (o) Interest | (p) Other foreign taxes paid or accrued | (q) Dividends | | | (r) Rents and royalties | (s) Interest |
| A | | | | | | | | | | 735. | 735. |
| B | | | | | | | | | | | |
| C | | | | | | | | | | | |
| 8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 | | | | | | | | | | 8 | 735. |

For Paperwork Reduction Act Notice, see instructions.

Form **1116** (2025) Created 9/16/25

LHA 511501 01-07-26

ALTERNATIVE MINIMUM TAX

Part III Figuring the Credit

| | | | |
|----|---|----|----------|
| 9 | Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I | 9 | 735. |
| 10 | Enter the sum of any carryover of foreign taxes (from Schedule B, line 3, column (xiv)) plus any carrybacks to the current tax year. If you enter an amount on line 10 and you don't need to attach Schedule B, check here (see instructions) STATEMENT 14 <input type="checkbox"/> (If your income was section 951A category income (box a above Part I), leave line 10 blank.) | 10 | 512. |
| 11 | Add lines 9 and 10 | 11 | 1,247. |
| 12 | Reduction in foreign taxes | 12 | |
| 13 | Taxes reclassified under high tax kickout | 13 | |
| 14 | Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit | 14 | 1,247. |
| 15 | Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. See instructions | 15 | 5,527. |
| 16 | Adjustments to line 15 | 16 | |
| 17 | Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, skip line 18 and enter -0- on line 19.) | 17 | 5,527. |
| 18 | Individuals: Enter the sum of (i) Form 1040, 1040-SR, or 1040-NR, line 11b, minus Form 1040, 1040-SR, or 1040-NR, line 14, and (ii) Schedule 1-A (Form 1040), line 37. Estates and trusts: Enter your taxable income without the deduction for your exemption SEE STATEMENT 15 Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions. | 18 | 155,149. |
| 19 | Divide line 17 by line 18. If line 17 is more than line 18, enter "1" | 19 | .03562 |
| 20 | Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 1z. Estates and trusts: See instructions Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 8978, Partner's Additional Reporting Year Tax, see Instructions. | 20 | 4,899. |
| 21 | Multiply line 20 by line 19 (maximum amount of credit) | 21 | 175. |
| 22 | Increase in limitation (section 960(c)) (see instructions) | 22 | |
| 23 | Add lines 21 and 22 | 23 | 175. |
| 24 | Enter the smaller of line 14 or line 23. Enter here and on the appropriate line of Part IV. See instructions | 24 | 175. |

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

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

AMT
SCHEDULE B
(Form 1116)

(Rev. December 2022)
Department of the Treasury
Internal Revenue Service

Foreign Tax Carryover Reconciliation Schedule
For calendar year 2025, or other tax year beginning _____, and ending _____
See separate instructions. Attach to Form 1116.

Go to www.irs.gov/Form1116 for instructions and the latest information.

OMB No. 1545-0121

Name **MARGARET J. TROWE & ELLEN M. BRICKLEY**

Use a separate Schedule B (Form 1116) for each applicable category of income listed below. See instructions. Check only one box on each schedule.
Check the box for the same separate category code as that shown on the Form 1116 to which this Schedule B is attached.

a Reserved for future use **c** Passive category income **e** Section 901 (f) income **g** Lump-sum distributions
b Foreign branch category income **d** General category income **f** Certain income re-sourced by treaty

h If box e is checked, enter the country code for the sanctioned country. See instructions
i If box f is checked, enter the country code for the treaty country. See instructions

| | (i) 10th Preceding Tax Year | (ii) 9th Preceding Tax Year | (iii) 8th Preceding Tax Year | (iv) 7th Preceding Tax Year | (v) 6th Preceding Tax Year | (vi) 5th Preceding Tax Year | (vii) Subtotal (add columns (i) through (vi)) |
|---|-----------------------------------|-----------------------------------|------------------------------------|-----------------------------------|----------------------------------|-----------------------------------|--|
| 1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions)) | | | | | | | 512. |
| 2 Adjustments to line 1 (enter description - see instructions): | | | | | | | 512. |
| a Carryback adjustment (see instructions) | | | | | | | |
| b Adjustments for section 905(c) redeterminations (see instructions) | | | | | | | |
| c | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| f | | | | | | | |
| g | | | | | | | |
| 3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2) | | | | | | | 512. |
| 4 Foreign tax carryover used in current tax year (enter as a negative number) | | | | | | | |
| 5 Foreign tax carryover expired unused in current tax year (enter as a negative number) | | | | | | | |
| 6 Foreign tax carryover generated in current tax year | | | | | | | |
| 7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number) | | | | | | | |
| 8 Foreign tax carryover to the following tax year. Combine lines 3 through 7. | -0- | | | | | | 512. |

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule B (Form 1116) (Rev. 12-2022)

| Foreign Tax Carryover Reconciliation | | (viii) Subtotal from page 1 (enter the amounts from column (vii) on page 1) | (ix) 4th Preceding Tax Year | (x) 3rd Preceding Tax Year | (xi) 2nd Preceding Tax Year | (xii) 1st Preceding Tax Year | (xiii) Current Tax Year | (xiv) Totals (add columns (viii) through (xiii)) |
|--------------------------------------|--|--|-----------------------------------|----------------------------------|-----------------------------------|------------------------------------|-------------------------------|---|
| 1 | Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule B (see instructions)) | 512. | | | | | | 512. |
| 2 | Adjustments to line 1 (enter description - see instructions): | | | | | | | |
| 2 | Carryback adjustment (see instructions) | | | | | | | |
| | Adjustments for section 905(c) | | | | | | | |
| | b redeterminations (see instructions) | | | | | | | |
| | c | | | | | | | |
| | d | | | | | | | |
| | e | | | | | | | |
| | f | | | | | | | |
| 9 | Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1116, Part III, line 10. | 512. | | | | | | 512. |
| 4 | Foreign tax carryover used in current tax year (enter as a negative number) | | | | | | | |
| 5 | Foreign tax carryover expired unused in current tax year (enter as a negative number) | | | | | | | |
| 6 | Foreign tax carryover generated in current tax year | | | | | | 560. | 560. |
| 7 | Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number) | | | | | | | |
| 8 | Foreign tax carryover to the following tax year. Combine lines 3 through 7. | 512. | | | | | 560. | 1,072. |

Schedule B (Form 1116) (Rev. 12-2022)

**Qualified Business Income Deduction
Simplified Computation**

2025

Attachment
Sequence No. **55**

Department of the Treasury
Internal Revenue Service

Attach to your tax return.
Go to www.irs.gov/Form8995 for instructions and the latest information.

Name(s) shown on return

Your taxpayer identification number

MARGARET J. TROWE & ELLEN M. BRICKLEY

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

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

| 1 | (a) Trade, business, or aggregation name | (b) Taxpayer identification number | (c) Qualified business income or (loss) |
|-----|---|------------------------------------|---|
| i | | | |
| ii | | | |
| iii | | | |
| iv | | | |
| v | | | |
| 2 | Total qualified business income or (loss). Combine lines 1i through 1v, column (c) | 2 | |
| 3 | Qualified business net (loss) carryforward from the prior year | 3 | () |
| 4 | Total qualified business income. Combine lines 2 and 3. If zero or less, enter -0- | 4 | |
| 5 | Qualified business income component. Multiply line 4 by 20% (0.20) | | 5 |
| 6 | Qualified REIT dividends and publicly traded partnership (PTP) income or (loss) (see instructions) | 6 | 773. |
| 7 | Qualified REIT dividends and qualified PTP (loss) carryforward from the prior year | 7 | () |
| 8 | Total qualified REIT dividends and PTP income. Combine lines 6 and 7. If zero or less, enter -0- | 8 | 773. |
| 9 | REIT and PTP component. Multiply line 8 by 20% (0.20) | | 9 155. |
| 10 | Qualified business income deduction before the income limitation. Add lines 5 and 9 | | 10 155. |
| 11 | Taxable income before qualified business income deduction (see instructions) | 11 | 119,450. |
| 12 | Enter your net capital gain, if any, increased by any qualified dividends (see instructions) | 12 | 16,869. |
| 13 | Subtract line 12 from line 11. If zero or less, enter -0- | 13 | 102,581. |
| 14 | Income limitation. Multiply line 13 by 20% (0.20) | | 14 20,516. |
| 15 | Qualified business income deduction. Enter the smaller of line 10 or line 14. Also enter this amount on the applicable line of your return (see instructions) | | 15 155. |
| 16 | Total qualified business (loss) carryforward. Combine lines 2 and 3. If greater than zero, enter -0- | 16 | () |
| 17 | Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 6 and 7. If greater than zero, enter -0- | 17 | () |

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

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

Form 1116

U.S. and Foreign Source Income Summary

NAME

MARGARET J. TROWE & ELLEN M. BRICKLEY



FOREIGN

| INCOME TYPE | TOTAL | U.S. | FOREIGN | |
|--|------------------|-----------------|---------------|---------|
| | | | GENERAL | PASSIVE |
| Compensation | 62,757. | 62,757. | | |
| Dividends/Distributions | 35,771. | 35,771. | | |
| Interest | 19,024. | 19,024. | | |
| Capital Gains | | | | |
| Business/Profession | | | | |
| Rent/Royalty | | | | |
| State/Local Refunds | 1,184. | 1,184. | | |
| Partnership/S Corporation | | | | |
| Trust/Estate | STMT 17 -47,964. | -53,491. | 5,527. | |
| Other Income | 46,506. | 46,506. | | |
| Gross Income | <u>117,278.</u> | <u>111,751.</u> | <u>5,527.</u> | |
| Less: | | | | |
| Section 911 Exclusion | | | | |
| Capital Losses | | | | |
| Capital Gains Tax Adjustment | | | | |
| Total Income - Form 1116 | <u>117,278.</u> | <u>111,751.</u> | <u>5,527.</u> | |
| Deductions: | | | | |
| Business/Profession Expenses | | | | |
| Rent/Royalty Expenses | | | | |
| Partnership/S Corporation Losses | | | | |
| Trust/Estate Losses | 47,964. | 47,964. | | |
| Capital Losses | | | | |
| Non-capital Losses | | | | |
| Individual Retirement Account | | | | |
| Moving Expenses | | | | |
| Self-employment Tax Deduction | | | | |
| Self-employment Health Insurance | | | | |
| Keogh Contributions | | | | |
| Alimony | | | | |
| Forfeited Interest | | | | |
| Foreign Housing Deduction | | | | |
| Other Adjustments | | | | |
| Capital Gains Tax Adjustment | | | | |
| Total Deductions | <u>47,964.</u> | <u>47,964.</u> | | |
| Adjusted Gross Income | <u>69,314.</u> | <u>63,787.</u> | <u>5,527.</u> | |
| Less Itemized Deductions: | | | | |
| Specifically Allocated | | | | |
| Home Mortgage Interest | | | | |
| Other Interest | | | | |
| Ratably Allocated | 34,700. | 33,065. | 1,635. | |
| Other Deductions | 1,077. | 1,077. | | |
| Total Adjustments to Adjusted Gross Income | <u>35,777.</u> | <u>34,142.</u> | <u>1,635.</u> | |
| Taxable Income | <u>33,537.</u> | <u>29,645.</u> | <u>3,892.</u> | |



| FORM 1040 | | WAGES RECEIVED AND TAXES WITHHELD | | | | STATEMENT 1 | |
|-----------|---|-----------------------------------|----------------------|--------------------|------------------|-------------|--------------|
| T S | EMPLOYER'S NAME | AMOUNT PAID | FEDERAL TAX WITHHELD | STATE TAX WITHHELD | CITY SDI TAX W/H | FICA TAX | MEDICARE TAX |
| S | GHIRARDELLI CHOCOLATE COMPANY | 38,645. | 3,008. | 1,098. | 464. | 2,396. | 560. |
| T | INTERSTATE-RIM MANAGEMENT COMPANY, LLC | 10,273. | | 68. | 123. | 637. | 149. |
| T | RPOWERSFTESTJPEMONDS ON | 3,186. | 88. | 76. | 38. | 198. | 46. |
| T | PYRAMID DOWNTOWN BERKELEY MANAGEMENT LP | 10,653. | 713. | 135. | 128. | 660. | 154. |
| TOTALS | | 62,757. | 3,809. | 1,377. | 753. | 3,891. | 909. |

| FORM 1040 | | QUALIFIED DIVIDENDS | | STATEMENT 2 | |
|--------------------------------------|--|---------------------|---------------------|-------------|--|
| NAME OF PAYER | | ORDINARY DIVIDENDS | QUALIFIED DIVIDENDS | | |
| FROM K-1 - JEROME TROWE G.S.T. TRUST | | 35,771. | 16,869. | | |
| TOTAL INCLUDED IN FORM 1040, LINE 3A | | | 16,869. | | |



| FORM 1040 | TAX | STATEMENT 4 |
|---|-----|-------------|
| DESCRIPTION | | AMOUNT |
| FROM QUALIFIED DIVIDENDS AND CAPITAL GAIN WORKSHEET | | 14,892. |
| TOTAL TO FORM 1040, LINE 16 | | 14,892. |

| FORM 1040 | FEDERAL INCOME TAX WITHHELD - FORM(S) W-2 | STATEMENT 5 |
|---|---|-------------|
| T S DESCRIPTION | | AMOUNT |
| S GHIRARDELLI CHOCOLATE COMPANY | | 3,008. |
| T RPOWERSFTESTJPEMDMONSON | | 88. |
| T PYRAMID DOWNTOWN BERKELEY MANAGEMENT LP | | 713. |
| TOTAL TO FORM 1040, LINE 25A | | 3,809. |

| FORM 1040 | CURRENT YEAR ESTIMATES AND AMOUNT APPLIED FROM PREVIOUS YEAR | STATEMENT 6 |
|--|---|-------------|
| DESCRIPTION | | AMOUNT |
| PRIOR YEAR OVERPAYMENT APPLIED - JOINT | | 440. |
| TOTAL TO FORM 1040, LINE 26 | | 440. |

| FORM 1040 | FEDERAL INCOME TAX WITHHELD - FORM(S) 1099 | STATEMENT 7 |
|------------------------------|--|-------------|
| T S DESCRIPTION | | AMOUNT |
| S FROM FORM 1099-G | | 130. |
| TOTAL TO FORM 1040, LINE 25B | | 130. |



| SCHEDULE 1 | STATE AND LOCAL INCOME TAX REFUNDS | | STATEMENT 8 |
|-----------------------------------|------------------------------------|------|-------------|
| | 2024 | 2023 | 2022 |
| GROSS STATE/LOCAL INC TAX REFUNDS | CALIFORNIA 2,205. | | |
| LESS: TAX PAID IN FOLLOWING YEAR | | | |
| NET TAX REFUNDS CALIFORNIA | 2,205. | | |
| TOTAL NET TAX REFUNDS | 2,205. | | |



| SCHEDULE 1 | TAXABLE STATE AND LOCAL INCOME TAX REFUNDS | | STATEMENT 9 |
|--|--|------|-------------|
| | 2022 | 2023 | 2024 |
| NET TAX REFUNDS FROM STATE AND LOCAL INCOME TAX REFUNDS STMT. | | | 2,205. |
| LESS: REFUNDS-NO BENEFIT DUE TO AMT -SALES TAX BENEFIT REDUCTION | | | 1,021. |
| 1 NET REFUNDS FOR RECALCULATION | | 0. | 1,184. |
| 2 AMOUNT FROM PRIOR YEAR SCHEDULE A, LINE 5E | | | 2,655. |
| 3 TOTAL OF PRIOR YEAR SCHEDULE A, LINES 5B AND 5C | | | |
| 4 SUBTRACT LINE 3 FROM LINE 2 IF ZERO OR LESS, STOP HERE NONE OF YOUR REFUND IS TAXABLE | 0. | 0. | 2,655. |
| 5 ENTER THE STATE AND LOCAL INCOME TAXES FROM PRIOR YEAR SCHEDULE A, LINE 5A | | | 2,655. |
| 6 ENTER THE AMOUNT FROM LINE 1 | | | 1,184. |
| 7 SUBTRACT LINE 6 FROM LINE 5 | | | 1,471. |
| 8 ADD LINE 7 TO LINE 3 | | | 1,471. |
| 9 SUBTRACT LINE 8 FROM LINE 2 | | | 1,184. |
| 10 ENTER THE LESSER OF LINE 4, LINE 6 OR LINE 9. IF ZERO OR LESS, STOP HERE. NONE OF YOUR REFUND IS TAXABLE. IF GREATER THAN ZERO, PROCEED TO LINE 11 | | | 1,184. |
| 11 ALLOWABLE PRIOR YEAR ITEMIZED DEDUCTIONS | | | 42,655. |
| 12 ENTER YOUR PRIOR YEAR STANDARD DEDUCTION | | | 32,300. |
| 13 SUBTRACT LINE 12 FROM LINE 11 | | | 10,355. |
| 14 ENTER THE SMALLER OF LINE 10 OR LINE 13. | | | 1,184. |
| 15 PRIOR YEAR TAXABLE INCOME | | | 29,109. |
| 16 AMOUNT TO INCLUDE ON SCHEDULE 1, LINE 1 * IF LINE 15 IS -0- OR MORE, USE AMOUNT FROM LINE 14 * IF LINE 15 IS A NEGATIVE AMOUNT, NET LINES 14 AND 15 | | | 1,184. |
| STATE AND LOCAL INCOME TAX REFUNDS PRIOR TO 2022 | | | |
| TOTAL TO SCHEDULE 1, LINE 1 | | | 1,184. |



FORM 1116 FOREIGN TAX CREDIT CARRYOVER / CARRYBACK STATEMENT 10

PASSIVE INCOME

| YEAR OF FOREIGN TAX CREDIT | TOTAL FOREIGN TAXES PAID | FOREIGN TAX CR CLAIMED | FOREIGN TAX ADJUSTMENTS | BALANCE AVAILABLE |
|---------------------------------------|--------------------------|------------------------|-------------------------|-------------------|
| 2024 | 0. | 0. | 0. | 0. |
| 2023 | 0. | 0. | 0. | 0. |
| 2022 | 0. | 0. | 0. | 0. |
| 2021 | 0. | 0. | 0. | 0. |
| 2020 | 0. | 0. | 0. | 0. |
| 2019 | 0. | 0. | 0. | 0. |
| 2018 | 0. | 0. | 0. | 0. |
| 2017 | 0. | 0. | 0. | 0. |
| 2016 | 3,002. | 1,337. | 0. | 1,665. |
| 2015 | 9,112. | 7,483. | 0. | 1,625. |
| FOREIGN TAX CR CARRYBACK TO 2025 | | | | 0. |
| TOTAL TO FORM 1116, PART III, LINE 10 | | | | 3,290. |



FORM 1116

WORLDWIDE CAPITAL GAINS
WORKSHEET FOR LINE 18

STATEMENT 11

| | | |
|----|--|------------------------|
| 1 | ENTER THE SUM OF (I) FORM 1040, OR 1040-NR, LINE 11B, MINUS FORM 1040, OR 1040-NR, LINE 14; AND (II) SCHEDULE 1-A (FORM 1040), LINE 37. | 129,465. |
| 2 | ENTER WORLDWIDE 28% GAINS | |
| 3 | MULTIPLY LINE 2 BY 0.2432 | |
| 4 | ENTER WORLDWIDE 25% GAINS | |
| 5 | MULTIPLY LINE 4 BY 0.3243 | |
| 6 | ENTER WORLDWIDE 20% GAINS AND QUALIFIED DIVIDENDS | |
| 7 | MULTIPLY LINE 6 BY 0.4595 | |
| 8 | ENTER WORLDWIDE 15% GAINS AND QUALIFIED DIVIDENDS | 16,869. |
| 9 | MULTIPLY LINE 8 BY 0.5946 | 10,030. |
| 10 | ENTER WORLDWIDE 0% GAINS AND QUALIFIED DIVIDENDS | |
| 11 | ADD LINES 3, 5, 7, 9 AND 10 | <u>10,030.</u> |
| 12 | SUBTRACT LINE 11 FROM LINE 1. ENTER THE RESULT HERE AND ON FORM 1116, LINE 18 (IF THE RESULT IS ZERO OR LESS, ENTER -0-) | <u><u>119,435.</u></u> |



FORM 1116 FOREIGN TAX CREDIT CARRYOVER / CARRYBACK STATEMENT 12

GENERAL LIMITATION INCOME

| YEAR OF FOREIGN TAX CREDIT | TOTAL FOREIGN TAXES PAID | FOREIGN TAX CR CLAIMED | FOREIGN TAX ADJUSTMENTS | BALANCE AVAILABLE |
|---------------------------------------|--------------------------|------------------------|-------------------------|-------------------|
| 2024 | 0. | 0. | 0. | 0. |
| 2023 | 0. | 0. | 0. | 0. |
| 2022 | 0. | 0. | 0. | 0. |
| 2021 | 0. | 0. | 0. | 0. |
| 2020 | 512. | 0. | 0. | 512. |
| 2019 | 0. | 0. | 0. | 0. |
| 2018 | 0. | 0. | 0. | 0. |
| 2017 | 0. | 0. | 0. | 0. |
| 2016 | 0. | 0. | 0. | 0. |
| 2015 | 0. | 0. | 0. | 0. |
| FOREIGN TAX CR CARRYBACK TO 2025 | | | | 0. |
| TOTAL TO FORM 1116, PART III, LINE 10 | | | | 512. |

FORM 1116 ALTERNATIVE MINIMUM TAX FOREIGN TAX CREDIT CARRYOVER/CARRYBACK STATEMENT 13

PASSIVE INCOME

| YEAR OF FOREIGN TAX CREDIT | TOTAL FOREIGN TAXES PAID | FOREIGN TAX CR CLAIMED | FOREIGN TAX ADJUSTMENTS | BALANCE AVAILABLE |
|---|--------------------------|------------------------|-------------------------|-------------------|
| 2024 | 0. | 0. | 0. | 0. |
| 2023 | 0. | 0. | 0. | 0. |
| 2022 | 0. | 0. | 0. | 0. |
| 2021 | 0. | 0. | 0. | 0. |
| 2020 | 0. | 0. | 0. | 0. |
| 2019 | 0. | 0. | 0. | 0. |
| 2018 | 0. | 0. | 0. | 0. |
| 2017 | 0. | 0. | 0. | 0. |
| 2016 | 3,002. | 1,264. | 0. | 1,738. |
| 2015 | 9,112. | 6,817. | 0. | 2,295. |
| FOREIGN TAX CR CARRYBACK TO 2025 | | | | 0. |
| TOTAL TO FORM 1116 (AMT), PART III, LINE 10 | | | | 4,033. |



FORM 1116 ALTERNATIVE MINIMUM TAX FOREIGN TAX CREDIT STATEMENT 14
CARRYOVER/CARRYBACK

GENERAL LIMITATION INCOME

| YEAR OF FOREIGN TAX CREDIT | TOTAL FOREIGN TAXES PAID | FOREIGN TAX CR CLAIMED | FOREIGN TAX ADJUSTMENTS | BALANCE AVAILABLE |
|---|--------------------------|------------------------|-------------------------|-------------------|
| 2024 | 0. | 0. | 0. | 0. |
| 2023 | 0. | 0. | 0. | 0. |
| 2022 | 0. | 0. | 0. | 0. |
| 2021 | 0. | 0. | 0. | 0. |
| 2020 | 512. | 0. | 0. | 512. |
| 2019 | 0. | 0. | 0. | 0. |
| 2018 | 0. | 0. | 0. | 0. |
| 2017 | 0. | 0. | 0. | 0. |
| 2016 | 0. | 0. | 0. | 0. |
| 2015 | 0. | 0. | 0. | 0. |
| FOREIGN TAX CR CARRYBACK TO 2025 | | | | 0. |
| TOTAL TO FORM 1116 (AMT), PART III, LINE 10 | | | | 512. |

FORM 1116 ALTERNATIVE MINIMUM TAX FOREIGN TAX CREDIT STATEMENT 15
WORLDWIDE CAPITAL GAINS
WORKSHEET FOR LINE 18

| | | |
|----|---|----------|
| 1 | ENTER THE AMOUNT FROM FORM 6251, LINE 4 | 162,981. |
| 2 | ENTER WORLDWIDE 25% GAINS | |
| 3 | MULTIPLY LINE 2 BY 0.1071 | |
| 4 | ENTER WORLDWIDE 20% GAINS AND QUALIFIED DIVIDENDS | |
| 5 | MULTIPLY LINE 4 BY 0.2857 | |
| 6 | ENTER WORLDWIDE 15% GAINS AND QUALIFIED DIVIDENDS | 16,869. |
| 7 | MULTIPLY LINE 6 BY 0.4643 | 7,832. |
| 8 | ENTER WORLDWIDE 0% GAINS AND QUALIFIED DIVIDENDS | |
| 9 | ADD LINES 3, 5, 7 AND 8 | 7,832. |
| 10 | SUBTRACT LINE 9 FROM LINE 1. ENTER THE RESULT HERE AND ON FORM 1116 AMT, LINE 18 (IF THE RESULT IS ZERO OR LESS, ENTER -0-) | 155,149. |



FORM 8995 QUALIFIED REIT DIVIDENDS AND PTP INCOME STATEMENT 16

| NAME OF ENTITY/ACTIVITY | REIT DIVIDENDS | PTP INCOME |
|--------------------------------------|----------------|------------|
| FROM K-1 - JEROME TROWE G.S.T. TRUST | 773. | |
| TOTAL TO FORM 8995, LINE 6 | 773. | |

FORM 1116 U.S. AND FOREIGN SOURCE INCOME SUMMARY FOREIGN TRUST/ESTATE INCOME STATEMENT 17

| DESCRIPTION | AMOUNT |
|-----------------------------------|--------|
| JEROME TROWE G.S.T. TRUST | 5,527. |
| TOTAL FOREIGN TRUST/ESTATE INCOME | 5,527. |