

2024 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 05/28/2025

General Information

Name: Mr Richard M Surrency Sr

PID 266994

AGENCY INFORMATION

Organization	Suborganization	Title
Putnam County School Board	Elected Constitutional Officer	Superintendent

Net Worth

My Net Worth as of December 31, 2024 was \$ 604,000.00.

Assets

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effect is \$ 20,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
PRIMARY HOME	\$ 369,500.00
VEHICLES OWNED (3)	\$ 75,000.00
SEI INVESTMENT ACCOUNT	\$ 29,000.00
FRANKLIN-TEMPLETON INVESTMENT ACCOUNT	\$ 6,000.00
OHIO NAITONAL INVESTMENT ACCOUNT	\$ 350,000.00
TD BANK CHECKING ACCOUNT	\$ 4,000.00
TD BANK SAVINGS ACCOUNT	\$ 10,500.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Vystar Credit Union	PO Box 45085, Jacksonville, FL. 32232	\$ 200,000.00
Yamaha Financial Services	3065 Chastain Meadows Parkway, Bldg. 100, Marietta, GA. 30066	\$ 35,000.00
Wells Fargo Credit Cards	420 Montgomery St., San Francisco, CA. 94104	\$ 5,000.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2024 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☒ I elect to file a copy of my 2024 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
See Attached		

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
See Attached			

Interests in Specified Businesses**Business Entity # 1**

N/A

Training

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

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

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Richard M Surrency Sr

Digitally signed: 05/28/2025

Filed with COE: 05/28/2025

2024

Income Tax Return

Prepared For:

Richard M Surrency, Sr and Penny L Surrency
6003 4th Manor East
Palatka, FL 32177
(386) 937-5136

Prepared By:

Rhonda D. Odom, CPA
P.O. Box 1594
Palatka, FL 32178
Telephone: (386) 972-1832
FAX: (386) 312-4904
Email: rhonda.odom.cpa@gmail.com

2024 Form 1040-V



Department of the Treasury
Internal Revenue Service



Before you mail a check, consider your
online payment options

IRS Direct Pay

- Pay with Bank account
- Schedule up to 30 days in advance
- No fees
- Immediate Confirmation

Go to
directpay.irs.gov

Pay by Card

- Credit or Debit Card option
- Schedule in advance
- Service fees apply and vary by processor

Go to
irs.gov/Payments

Electronic Federal Tax Payment System

- Registration required
- Business and Individuals
- Pay with Bank Account by phone or online
- No fees

Go to **EFTPS.gov**
to enroll
Registered users
call 1800-555-3453

Online payments save time, reduce paper, and don't require postage.
If you do mail a check, include the portion below with your payment.

Amount to pay includes penalties and interest of \$0

Form **1040-V** (2024)

Detach Here and Mail With Your Payment and Return

FORM **1040-V**

Department of the Treasury
Internal Revenue Service

Payment Voucher for Individuals

Do not staple or attach this voucher to your payment or return.
Go to **www.irs.gov/Payments** for payment options and information.

OMB No. 1545-0074

2024

Amount you are paying by check or money
order. Make your check or money order
payable to "United States Treasury"

7,108.00

1064

Richard M Surrency, Sr
Penny L Surrency
6003 4th Manor East
Palatka, FL 32177

Internal Revenue Service
P.O. Box 1214
Charlotte, NC 28201-1214

For the year Jan. 1–Dec. 31, 2024, or other tax year beginning _____, 2024, ending _____ See separate instructions.

Your first name and middle initial
Richard M

Last name
Surrency, Sr

Your social security number
[REDACTED]

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

Last name
Surrency

Spouse's social security number
[REDACTED]

Home address (number and street). If you have a P.O. box, see instructions.
6003 4th Manor East

Apt. no.

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.
☐ You ☐ Spouse

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

State
FL

ZIP code
32177

Foreign country name

Foreign province/state/country

Foreign postal code

Filing Status ☐ Single ☐ Head of household (HOH)
☒ Married filing jointly (even if only one had income)
Check only one box. ☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS)
If you checked the MFS box, enter the name of your spouse. 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 name (see instructions and attach statement if required): _____

Digital Assets At any time during 2024, 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

Standard Deduction Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: ☒ Were born before January 2, 1960 ☐ Are blind Spouse: ☐ Was born before January 2, 1960 ☐ Is blind

Dependents (see instructions):
If more than four dependents, see instructions and check here ☐

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check if qualifies for (see instructions):	
				Child tax credit	Credit for other dependents
				☐	☐
				☐	☐
				☐	☐
				☐	☐

Income

1a	Total amount from Form(s) W-2, box 1 (see instructions)	1a	278,817.
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 29	1f	
g	Wages from Form 8919, line 6	1g	
h	Other earned income (see instructions)	1h	
i	Nontaxable combat pay election (see instructions)	1i	
z	Add lines 1a through 1h	1z	278,817.
2a	Tax-exempt interest	2a	384.
3a	Qualified dividends	3a	366.
4a	IRA distributions	4a	17,640.
5a	Pensions and annuities	5a	
6a	Social security benefits	6a	
c	If you elect to use the lump-sum election method, check here (see instructions)		☐
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here	7	-3,000.
8	Additional income from Schedule 1, line 10	8	5,000.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income.	9	365,990.
10	Adjustments to income from Schedule 1, line 26	10	300.
11	Subtract line 10 from line 9. This is your adjusted gross income	11	365,690.
12	Standard deduction or itemized deductions (from Schedule A)	12	30,750.
13	Qualified business income deduction from Form 8995 or Form 8995-A	13	
14	Add lines 12 and 13	14	30,750.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income	15	334,940.

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.

Standard Deduction for-

- Single or Married filing separately, \$14,600
- Married filing jointly or Qualifying surviving spouse, \$29,200
- Head of household, \$21,900
- If you checked any box under Standard Deduction, see instructions.

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐ _____	16	66,438.
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	66,438.
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	37.
	21	Add lines 19 and 20	21	37.
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	66,401.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	283.
	24	Add lines 22 and 23. This is your total tax	24	66,684.

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	49,346.
	b	Form(s) 1099	25b	10,230.
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	59,576.
	26	2024 estimated tax payments and amount applied from 2023 return	26	
	27	Earned income credit (EIC) NO	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
	31	Amount from Schedule 3, line 15	31	
	32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	0.
	33	Add lines 25d, 26, and 32. These are your total payments	33	59,576.

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	0.
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here ☐	35a	0.

Direct deposit? See instructions.	b	Routing number XXXXXX	c	Type: ☐ Checking ☐ Savings
	d	Account number XXXXXX		

	36	Amount of line 34 you want applied to your 2025 estimated tax	36	
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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	7,108.
	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 Rhonda D Odom	Phone no. 386-972-1832	Personal identification number (PIN) [REDACTED]

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.			
Joint return? See instructions. Keep a copy for your records.	Your signature	Date	Your occupation Superintendent	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
	Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation Teacher	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
	Phone no. (386) 937-5136	Email address		

Paid Preparer Use Only	Preparer's signature Rhonda D Odom	Date 05/20/2025	PTIN P01388459	Check if: ☒ Self-employed
	Preparer's name Rhonda D Odom	Phone no. (386) 972-1832		
	Firm's name Rhonda D. Odom, CPA			
	Firm's address P.O. Box 1594, Palatka, FL, 32178	Firm's EIN 99-5011222		

SCHEDULE 1
(Form 1040)

Additional Income and Adjustments to Income

OMB No. 1545-0074

2024

Attachment
Sequence No. **01**

Department of the Treasury
Internal Revenue Service

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

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

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

Your social security number

Richard M Surrency, Sr and Penny L Surrency

For 2024, enter the amount reported to you on Form(s) 1099-K that was included in error or for personal items sold at a loss . . .

Note: The remaining amounts reported to you on Form(s) 1099-K should be reported elsewhere on your return depending on the nature of the transaction. See www.irs.gov/1099k.

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes	1	
2a	Alimony received	2a	
b	Date of original divorce or separation agreement (see instructions):		
3	Business income or (loss). Attach Schedule C	3	
4	Other gains or (losses). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	7	
8	Other income:		
a	Net operating loss	8a	()
b	Gambling	8b	
c	Cancellation of debt	8c	
d	Foreign earned income exclusion from Form 2555	8d	()
e	Income from Form 8853	8e	
f	Income from Form 8889	8f	
g	Alaska Permanent Fund dividends	8g	
h	Jury duty pay	8h	
i	Prizes and awards	8i	
j	Activity not engaged in for profit income	8j	
k	Stock options	8k	
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l	
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m	
n	Section 951(a) inclusion (see instructions)	8n	
o	Section 951A(a) inclusion (see instructions)	8o	
p	Section 461(l) excess business loss adjustment	8p	
q	Taxable distributions from an ABLE account (see instructions)	8q	
r	Scholarship and fellowship grants not reported on Form W-2	8r	
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s	()
t	Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan	8t	
u	Wages earned while incarcerated	8u	
v	Digital assets received as ordinary income not reported elsewhere. See instructions	8v	
z	Other income. List type and amount: Worksheet attached	8z	5,000.
9	Total other income. Add lines 8a through 8z	9	5,000.
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	5,000.

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

Schedule 1 (Form 1040) 2024

UYA

Part II Adjustments to Income

11	Educator expenses	11	300.
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	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	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	300.

SCHEDULE 2
(Form 1040)

Additional Taxes

OMB No. 1545-0074

2024

Attachment
Sequence No. **02**

Department of the Treasury
Internal Revenue Service

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

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

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

Your social security number

Richard M Surrency, Sr and Penny L Surrency

Part I Tax

1	Additions to tax:			
a	Excess advance premium tax credit repayment. Attach Form 8962	1a		
b	Repayment of new clean vehicle credit(s) transferred to a registered dealer from Schedule A (Form 8936), Part II. Attach Form 8936 and Schedule A (Form 8936)	1b		
c	Repayment of previously owned clean vehicle credit(s) transferred to a registered dealer from Schedule A (Form 8936), Part IV. Attach Form 8936 and Schedule A (Form 8936)	1c		
d	Recapture of net EPE from Form 4255, line 2a, column (i)	1d		
e	Excessive payments (EP) from Form 4255. Check applicable box and enter amount. (i) ☐ Line 1a, column (n) (ii) ☐ Line 1c, column (n) (iii) ☐ Line 1d, column (n) (iv) ☐ Line 2a, column (n)	1e		
f	20% EP from Form 4255. Check applicable box and enter amount. See instructions. (i) ☐ Line 1a, column (o) (ii) ☐ Line 1c, column (o) (iii) ☐ Line 1d, column (o) (iv) ☐ Line 2a, column (o)	1f		
y	Other additions to tax (see instructions):	1y		
z	Add lines 1a through 1y		1z	
2	Alternative minimum tax. Attach Form 6251		2	
3	Add lines 1z and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17		3	0.

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE.	4	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	5	
6	Uncollected social security and Medicare tax on wages. Attach Form 8919.	6	
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required. If not required, check here ☐	8	
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	283.
12	Net investment income tax. Attach Form 8960	12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	

(continued on page 2)

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

Schedule 2 (Form 1040) 2024

UYA

Part II Other Taxes (continued)

17	Other additional taxes:		
a	Recapture of other credits. List type, form number, and amount:	17a	
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b	
c	Additional tax on HSA distributions. Attach Form 8889.	17c	
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889.	17d	
e	Additional tax on Archer MSA distributions. Attach Form 8853.	17e	
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853.	17f	
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g	
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h	
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A.	17i	
j	Section 72(m)(5) excess benefits tax.	17j	
k	Golden parachute payments	17k	
l	Tax on accumulation distribution of trusts	17l	
m	Excise tax on insider stock compensation from an expatriated corporation.	17m	
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866.	17n	
o	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR.	17o	
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund.	17p	
q	Any interest from Form 8621, line 24.	17q	
z	Any other taxes. List type and amount:	17z	
18	Total additional taxes. Add lines 17a through 17z.	18	
19	Recapture of net EPE from Form 4255, line 1d, column (I).	19	
20	Section 965 net tax liability installment from Form 965-A	20	
21	Add lines 4, 7 through 16, and 18. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b	21	283.

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

2024

Attachment
Sequence No. **03**

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

Your social security number

Richard M. Surrency, Sr and Penny L. Surrency

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	37.
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	37.

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	0.

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

Schedule 3 (Form 1040) 2024

SCHEDULE B
(Form 1040)

Department of the Treasury
Internal Revenue Service

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR.

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

OMB No. 1545-0074

2024

Attachment
Sequence No. 08

Name(s) shown on return

Richard M Surrency, Sr and Penny L Surrency

Your social security number

Part I

Interest

(See instructions
and the
instructions for
Form 1040, line
2b.)

Note: If you
received a Form
1099-INT, Form
1099-OID, or
substitute
statement from
a brokerage firm,
list the firm's
name as the
payer and enter
the total interest
shown on that
form.

- 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see the instructions and list this interest first. Also, show that buyer's social security number and address:

SEI Private Trust Company

Amount

3.

1

- 2 Add the amounts on line 1.
3 Excludable interest on series EE and I U.S. savings bonds issued after 1989.
Attach Form 8815
4 Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR,
line 2b.

2

3

4

3.

3.

Note: If line 4 is over \$1,500, you must complete Part III.

Part II

Ordinary
Dividends

(See instructions
and the
instructions for
Form 1040, line
3b.)

Note: If you
received a Form
1099-DIV or
substitute
statement from
a brokerage firm,
list the firm's
name as the
payer and enter
the ordinary
dividends shown
on that form.

- 5 List name of payer: SEI Private Trust Company

Amount

561.

5

- 6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR,
line 3b.

6

561.

Note: If line 6 is over \$1,500, you must complete Part III.

Part III
Foreign
Accounts
and Trusts

Caution: If
required, failure
to file FinCEN
Form 114 may
result in substantial
penalties.
Additionally, you
may be required to
file Form 8938,
Statement of
Specified Foreign
Financial Assets.
See instructions.

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

- 7a At any time during 2024, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions

If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements

- b If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the financial account(s) is (are) located:

- 8 During 2024, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions

Yes No

X

SCHEDULE D
(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

2024

Attachment
Sequence No. **12**

Department of the Treasury
Internal Revenue Service

Attach to Form 1040, 1040-SR, or 1040-NR.
Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.
Go to www.irs.gov/ScheduleD for instructions and the latest information.

Name(s) shown on return

Your social security number

Richard M Surrency, Sr and Penny L Surrency

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☒ No

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

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

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b . . .	4,582.	4,332.		250.
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824			4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions			6	(637.)
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on page 2			7	-387.

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

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . . .				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked	8,732.	9,223.	141.	-350.
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824			11	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			12	
13 Capital gain distributions. See the instructions			13	1,608.
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions			14	(53,500.)
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on page 2			15	-52,242.

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

Schedule D (Form 1040) 2024

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	-52,629.
• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22.		
17 Are lines 15 and 16 both gains? ☐ Yes. Go to line 18. ☐ No. Skip lines 18 through 21, and go to line 22.		
18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the amount, if any, from line 7 of that worksheet	18	0.
19 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet	19	0.
20 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. ☐ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below.		
21 If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of : • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) } Note: When figuring which amount is smaller, treat both amounts as positive numbers.	21	(3,000.)
22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? ☒ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. ☐ No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.		

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

Social security number or taxpayer identification number

Richard M Surrency, Sr and Penny L Surrency

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

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

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

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

- ☒ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- ☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- ☐ (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	SEI Private Trust Company See attached statement			8,732.	9,223.	MW	141.	(350.)
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked)				8,732.	9,223.		141.	(350.)

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Capital Loss Carryover Worksheet

Keep for Your Records

Use this worksheet to figure your capital loss carryovers from 2024 to 2025 if your 2024 Schedule D, line 21, is a loss and (a) that loss is a smaller loss than the loss on your 2024 Schedule D, line 16, or (b) if the amount on your 2024 Form 1040, line 15 (or your 2024 Form 1040-NR, line 15, if applicable) would be less than zero if you could enter a negative amount on that line. Otherwise, you don't have any carryovers.

If you and your spouse once filed a joint return and are filing separate returns for 2025, any capital loss carryover from the joint return can be deducted only on the return of the spouse who actually had the loss.

If you excluded canceled debt from income in 2025, see Pub. 4681.

1. Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 15.	1.	<u>334,940.</u>
2. Enter the loss from Schedule D, line 21, as a positive amount	2.	<u>3,000.</u>
3. Combine lines 1 and 2. If zero or less, enter -0-	3.	<u>337,940.</u>
4. Enter the smaller of line 2 or line 3	4.	<u>3,000.</u>
If line 7 of Schedule D is a loss, go to line 5; otherwise, enter -0- on line 5 and go to line 9.		
5. Enter the loss from Schedule D, line 7, as a positive amount	5.	<u>387.</u>
6. Enter any gain from Schedule D, line 15. If a loss, enter -0-	6.	
7. Add lines 4 and 6	7.	<u>3,000.</u>
8. Short-term capital loss carryover to 2025. Subtract line 7 from line 5. If zero or less, enter -0-	8.	
If line 15 of Schedule D is a loss, go to line 9; otherwise, skip lines 9 through 13.		
9. Enter the loss from Schedule D, line 15, as a positive amount	9.	<u>52,242.</u>
10. Enter any gain from Schedule D, line 7	10.	
11. Subtract line 5 from line 4. If zero or less, enter -0-	11.	<u>2,613.</u>
12. Add lines 10 and 11	12.	<u>2,613.</u>
13. Long-term capital loss carryover to 2025. Subtract line 12 from line 9. If zero or less, enter -0-	13.	<u>49,629.</u>

Health Savings Accounts (HSAs)

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service

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

Go to www.irs.gov/Form8889 for instructions and the latest information.**2024**
Attachment
Sequence No. **52**

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

Social security number of HSA beneficiary.
If both spouses have HSAs, see instructions.**Richard M Surrency, Sr****Before you begin:** Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.**Part I HSA Contributions and Deduction.** See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse.

1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2024. See instructions	☒ Self-only ☐ Family
2	HSA contributions you made for 2024 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2024. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions.	2
3	If you were under age 55 at the end of 2024 and, on the first day of every month during 2024, you were, or were considered, an eligible individual with the same coverage, enter \$4,150 (\$8,300 for family coverage). All others , see the instructions for the amount to enter.	3 4,150.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2024 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2024, also include any amount contributed to your spouse's Archer MSAs.	4
5	Subtract line 4 from line 3. If zero or less, enter -0-	5 4,150.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2024, see the instructions for the amount to enter.	6 4,150.
7	If you were age 55 or older at the end of 2024, married, and you or your spouse had family coverage under an HDHP at any time during 2024, enter your additional contribution amount. See instructions.	7
8	Add lines 6 and 7.	8 4,150.
9	Employer contributions made to your HSAs for 2024	9 4,000.
10	Qualified HSA funding distributions.	10
11	Add lines 9 and 10.	11 4,000.
12	Subtract line 11 from line 8. If zero or less, enter -0-	12 150.
13	HSA deduction (see instructions)	13

Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.

14a	Total distributions you received in 2024 from all HSAs (see instructions)	14a 3,752.
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions.	14b
c	Subtract line 14b from line 14a.	14c 3,752.
15	Qualified medical expenses paid using HSA distributions (see instructions).	15 3,752.
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f.	16
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here ☐	
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c.	17b

Part III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse.

18	Last-month rule	18
19	Qualified HSA funding distribution	19
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f.	20
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d.	21

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

UYA

Form **8889** (2024)

Health Savings Accounts (HSAs)

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

Go to www.irs.gov/Form8889 for instructions and the latest information.

OMB No. 1545-0074

2024

Attachment
Sequence No. **52**

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

Penny L Surrency

Social security number of HSA beneficiary.
If both spouses have HSAs, see instructions.

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part I HSA Contributions and Deduction. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse.

1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2024. See instructions	☒ Self-only ☐ Family
2	HSA contributions you made for 2024 (or those made on your behalf), including those made by the unextended due date of your tax return that were for 2024. Do not include employer contributions, contributions through a cafeteria plan, or rollovers. See instructions.	2
3	If you were under age 55 at the end of 2024 and, on the first day of every month during 2024, you were, or were considered, an eligible individual with the same coverage, enter \$4,150 (\$8,300 for family coverage). All others , see the instructions for the amount to enter.	3 5,150.
4	Enter the amount you and your employer contributed to your Archer MSAs for 2024 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2024, also include any amount contributed to your spouse's Archer MSAs.	4
5	Subtract line 4 from line 3. If zero or less, enter -0-	5 5,150.
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2024, see the instructions for the amount to enter.	6 5,150.
7	If you were age 55 or older at the end of 2024, married, and you or your spouse had family coverage under an HDHP at any time during 2024, enter your additional contribution amount. See instructions	7
8	Add lines 6 and 7.	8 5,150.
9	Employer contributions made to your HSAs for 2024	9 2,000.
10	Qualified HSA funding distributions.	10
11	Add lines 9 and 10.	11 2,000.
12	Subtract line 11 from line 8. If zero or less, enter -0-	12 3,150.
13	HSA deduction (see instructions)	13

Part II HSA Distributions. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.

14a	Total distributions you received in 2024 from all HSAs (see instructions)	14a 2,176.
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return. See instructions.	14b
c	Subtract line 14b from line 14a.	14c 2,176.
15	Qualified medical expenses paid using HSA distributions (see instructions).	15 2,176.
16	Taxable HSA distributions. Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this amount in the total on Schedule 1 (Form 1040), Part I, line 8f.	16
17a	If any of the distributions included on line 16 meet any of the Exceptions to the Additional 20% Tax (see instructions), check here ☐	
b	Additional 20% tax (see instructions). Enter 20% (0.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also, include this amount in the total on Schedule 2 (Form 1040), Part II, line 17c.	17b

Part III Income and Additional Tax for Failure To Maintain HDHP Coverage. See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part III for each spouse.

18	Last-month rule	18
19	Qualified HSA funding distribution	19
20	Total income. Add lines 18 and 19. Include this amount on Schedule 1 (Form 1040), Part I, line 8f.	20
21	Additional tax. Multiply line 20 by 10% (0.10). Include this amount in the total on Schedule 2 (Form 1040), Part II, line 17d.	21

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

UYA

Form **8889** (2024)

Additional Medicare Tax

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

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

Go to www.irs.gov/Form8959 for instructions and the latest information.**2024**Attachment
Sequence No. **71**

Name(s) shown on return

Your social security number

Richard M Surrency, Sr and Penny L Surrency**Part I Additional Medicare Tax on Medicare Wages**

1	Medicare wages and tips from Form W-2, box 5. If you have more than one Form W-2, enter the total of the amounts from box 5.	1	281,499.	
2	Unreported tips from Form 4137, line 6	2		
3	Wages from Form 8919, line 6	3		
4	Add lines 1 through 3	4	281,499.	
5	Enter the following amount for your filing status: Married filing jointly \$250,000 Married filing separately \$125,000 Single, Head of household, or Qualifying surviving spouse \$200,000	5	250,000.	
6	Subtract line 5 from line 4. If zero or less, enter -0-	6		31,499.
7	Additional Medicare Tax on Medicare wages. Multiply line 6 by 0.9% (0.009). Enter here and go to Part II	7		283.

Part II Additional Medicare Tax on Self-Employment Income

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

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

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

Part IV Total Additional Medicare Tax

18	Add lines 7, 13, and 17. Also include this amount on Schedule 2 (Form 1040), line 11 (Form 1040-SS filers, see instructions), and go to Part V	18		283.
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Part V Withholding Reconciliation

19	Medicare tax withheld from Form W-2, box 6. If you have more than one Form W-2, enter the total of the amounts from box 6.	19	4,082.	
20	Enter the amount from line 1	20	281,499.	
21	Multiply line 20 by 1.45% (0.0145). This is your regular Medicare tax withholding on Medicare wages	21	4,082.	
22	Subtract line 21 from line 19. If zero or less, enter -0-. This is your Additional Medicare Tax withholding on Medicare wages	22		
23	Additional Medicare Tax withholding on railroad retirement (RRTA) compensation from Form W-2, box 14 (see instructions)	23		
24	Total Additional Medicare Tax withholding. Add lines 22 and 23. Also include this amount with federal income tax withholding on Form 1040, 1040-SR, or 1040-NR, line 25c (Form 1040-SS filers, see instructions).	24		

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

UYA

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

Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.**2024**Attachment
Sequence No. **72**

Name(s) shown on your tax return

Your social security number or EIN

Richard M Surrency, Sr and Penny L Surrency**Part I Investment Income**

- ☐ Section 6013(g) election (see instructions)
☐ Section 6013(h) election (see instructions)
☐ Regulations section 1.1411-10(g) election (see instructions)

1	Taxable interest (see instructions)	1	3.
2	Ordinary dividends (see instructions)	2	561.
3	Annuities (see instructions)	3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a	
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b	
c	Combine lines 4a and 4b	4c	
5a	Net gain or loss from disposition of property (see instructions)	5a	-3,000.
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b	
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c	
d	Combine lines 5a through 5c	5d	-3,000.
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)	6	
7	Other modifications to investment income (see instructions)	7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7	8	-2,436.

Part II Investment Expenses Allocable to Investment Income and Modifications

9a	Investment interest expenses (see instructions)	9a	
b	State, local, and foreign income tax (see instructions)	9b	
c	Miscellaneous investment expenses (see instructions)	9c	
d	Add lines 9a, 9b, and 9c	9d	
10	Additional modifications (see instructions)	10	
11	Total deductions and modifications. Add lines 9d and 10	11	

Part III Tax Computation

12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. Estates and trusts, complete lines 18a-21. If zero or less, enter -0-	12	
Individuals:			
13	Modified adjusted gross income (see instructions)	13	365,690.
14	Threshold based on filing status (see instructions)	14	250,000.
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	115,690.
16	Enter the smaller of line 12 or line 15	16	
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include on your tax return (see instructions)	17	0.
Estates and Trusts:			
18a	Net investment income (line 12 above)	18a	
b	Deductions for distributions of net investment income and charitable deductions (see instructions)	18b	
c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c	
19a	Adjusted gross income (see instructions)	19a	
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b	
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c	
20	Enter the smaller of line 18c or line 19c	20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and include on your tax return (see instructions)	21	

2024 Other Income - Supporting Details for Schedule 1 (Form 1040), Line 8

Name(s) shown on Form 1040

Richard M Surrency, Sr and Penny L Surrency

Your social security number

Supporting Details for Schedule 1 (Form 1040), Lines 8a - 8v

	Richard	Penny
Net Operating Loss carry forward from 2023		
Gambling Winnings reported on Form W-2G		
Other winnings where a Form W-2G not received		
Cancellation of a nonbusiness debt, Form 1099-C		
Cancellation of a business debt, Partnership Sch K-1		
Foreign earned income exclusion from Form 2555		
MSA Distributions, Form 8853		
Medicare Advantage MSA Distributions, Form 8853		
Long-term Care Distribution, Form 8853		
HSA distributions and excess contributions, Form 8889		
Alaska Permanent Fund dividends		
Jury Pay		
Prizes and awards		
Activity not engaged in for profit income (Hobby)		
Stock options		
Income from personal property rental		
Olympic and Paralympic medals and USOC prize money		
Section 951(a) inclusion		
Section 951A(a) inclusion		
Section 461(l) excess business loss adjustments		
Taxable distributions from ABLE accounts, Form 1099-QA		
Scholarship and fellowship grants not reported on Form W-2		
Medicaid waiver payments to exclude from income (NOTICE 2014-07)		
Pension or annuity from a nonqualified deferred compensation plan or a nongovernmental section 457 plan		
Wages earned while incarcerated		
Digital assets received as ordinary income not reported elsewhere. See instructions		

Supporting Details for Schedule 1 (Form 1040), Line 8z

	Richard	Penny
1099-NEC UNF 59-2976169 Sporadic Ac	4,000.	
1099NEC FL Asc Dist Sch Supt-Mentor	1,000.	
Other Income from Schedule K-1		
Child's income amount from Form 8814, line 12		
Form 1099-MISC, Boxes 3 and 8		
Coverdell ESA or Qualified Tuition Program		
Reemployment trade adjustment assistance (RTAA)		
Recapture of prior year tuition and fees deduction		
Recapture of charitable contribution deduction of a fractional interest in tangible personal property		
Recapture of charitable contribution deduction if no exempt use		
Income or loss, Form 8621		
Loss on excess deferral distribution		
Disaster relief payments		
Credit adjustment from regular income, Form 6478 and Form 8864		
Indian gaming proceeds (from 1099-MISC)		
Indian tribal distribution (from 1099-MISC)		
Native American distribution (from 1099-MISC)		
Foreign currency transaction electing section 988 treatment as ordinary income (Form 1099-B)		
Section 965(n) election - reduction of NOL		
Total other income for Schedule 1, line 8z	5,000.	

Federal Electronic Filing Instructions

Tax Year 2024

You are responsible for confirming the status of your electronically filed return. You can confirm the status of your return by going to <https://www.taxact.com/ef/efile-center>. You will need to enter the primary social security number and last name on the return along with your ZIP code.

You can check the status of your client's returns by clicking the Refresh button in the Professional Reports.

Self Select PIN: Your return has been successfully e-filed once you receive your acceptance from the IRS.

Form 8453 is required to send the necessary supporting documents (listed below) to the IRS. DO NOT mail a printed return or any copies of Form W-2, W-2G or Form 1099-R to the IRS.

Only attach the supporting documentation for the following forms to the back of Federal Form 8453:

Form 8949

Mail Form 8453 to:

Internal Revenue Service
Attn: Shipping and Receiving, 0254
Receipt and Control Branch
Austin, TX 73344-0254

Balance Due:

Mail Federal Form 1040V with payment to:
Internal Revenue Service
P.O. Box 1214
Charlotte, NC 28201-1214

Make your check or money order payable to the "United States Treasury".

Prior Year Comparison

Keep for your records

Name(s) shown on return		SSN or ITIN	
Richard M Surrency, Sr and Penny L Surrency		[REDACTED]	
Income	2023	2024	Difference
Total wages	261,933.	278,817.	16,884.
Interest and dividend income	372.	564.	192.
Pensions and IRA distributions	82,287.	84,609.	2,322.
Social Security benefits			
Gains or losses	-3,000.	-3,000.	
Taxable state tax refunds			
Alimony received			
Business income or loss			
Rental real estate, royalties, partnership			
Farm income or loss			
Unemployment compensation			
Other income	4,000.	5,000.	1,000.
Total income	345,592.	365,990.	20,398.
Adjustments to income	300.	300.	
Adjusted gross income	345,292.	365,690.	20,398.
Standard deduction or itemized deductions	35,606.	30,750.	-4,856.
Medical and dental expenses			
Taxes	8,995.	8,588.	-407.
Interest	11,811.	10,887.	-924.
Gifts to charity	14,800.	7,661.	-7,139.
Casualty and theft losses			
Other deductions			
Qualified business income deduction			
Taxable income	309,686.	334,940.	25,254.
Tax	61,107.	66,438.	5,331.
Alternative minimum tax			
Excess advance premium tax credit repayment			
Other additions to tax			
Income tax	61,107.	66,438.	5,331.
Child tax credit			
Foreign tax credit	15.	37.	22.
Nonrefundable credit for child and dependent care			
Education credits			
Retirement savings contributions credit			
Residential energy credit			
Energy efficient home improvement credit			
Other credits			
Other taxes	132.	283.	151.
Total tax	61,224.	66,684.	5,460.
Federal income tax withheld	53,191.	59,576.	6,385.
Estimated tax payments			
Earned income credit			
Additional child tax credit			
Refundable education credit			
Net premium tax credit			
Amount paid with request for extension			
Excess social security and tier 1 RRTA			
Fuel tax credit			
Other payments or refundable credits			
Total payments	53,191.	59,576.	6,385.
Estimated tax penalty			
Balance due	8,033.	7,108.	-925.
Refund			
Effective tax rate	19.77%	19.91%	00.14%

Richard M Surrency, Sr and Penny L Surrency

T = Taxpayer S = Spouse

FORM 1099-R - RETIREMENT DISTRIBUTION SUMMARY

T = Taxpayer S = Spouse

	T S	Payer's Name	Gross distributions	Federal income tax withheld	State income tax withheld	Local income tax withheld
	T	State of Florida Dept of Mgmt	66,968.52	8,466.06		
	T	American General Life Services	17,640.48	1,764.08		
TOTAL (rounded)				10,230.00		

OTHER WITHHOLDINGS

	Federal income tax withheld	State income tax withheld	Local income tax withheld
Form 1099-G - Unemployment Compensation			
Form W-2G - Certain Gambling Winnings			
Form 1099-MISC - Miscellaneous Income			
Form 1099-NEC - Nonemployee Compensation			
Form SSA-1099 / RRB-1099 - Social Security Benefits			
Form(s) 1099-INT - Interest Income			
Form(s) 1099-DIV - Dividend Income			
Form(s) 1099-OID - Original Issue Discount			
Form 1099-B / Capital Gain Transaction Worksheet			
Form 1099-K - Payment Card and 3rd Party Network Trans.			
Schedule K-1 - Partnership, S Corporation, and Estate/Trust			
Form RRB-1099-R - Railroad Retirement Benefits			
Form W-2GU / W-2AS / W-2VI / W-2CM Wages			
Other Withholdings			

2024 Short Term Capital Gain Summary

<u>Description</u>	<u>Reporting Category</u>	<u>Date Acquired</u>	<u>Date Sold</u>	<u>Sales Price</u>	<u>Cost or Basis</u>	<u>Code</u>	<u>Adjustment Amount</u>	<u>Gain/Loss</u>
TOTALS				0	0		0	0

2024 Long Term Capital Gain Summary

<u>Description</u>	<u>Reporting</u> <u>Category</u>	<u>Date</u> <u>Acquired</u>	<u>Date</u> <u>Sold</u>	<u>Sales</u> <u>Price</u>	<u>Cost</u> <u>or</u> <u>Basis</u>	<u>Code</u>	<u>Adjustment</u> <u>Amount</u>	<u>Gain/Loss</u>
TOTALS				0	0		0	0

2024 Joint Return vs. Separate Returns Analysis

	Richard	Penny	Joint
Income			
Wages, salaries, and tips	\$190,486	\$88,331	\$278,817
Interest income	\$3	\$0	\$3
Ordinary dividends	\$281	\$280	\$561
Taxable state tax refunds	\$0	\$0	\$0
Alimony received	\$0	\$0	\$0
Business income or (loss)	\$0	\$0	\$0
Capital gain or (loss)	\$-1,500	\$804	\$-3,000
Other gains or (losses)	\$0	\$0	\$0
IRA distributions	\$17,640	\$0	\$17,640
Pensions and annuities	\$66,969	\$0	\$66,969
Rental real estate, royalties, partnership	\$0	\$0	\$0
Farm income or (loss)	\$0	\$0	\$0
Unemployment compensation	\$0	\$0	\$0
Social security benefits	\$0	\$0	\$0
Total income	\$278,879	\$89,415	\$365,990
Deductions			
Educator expenses	\$0	\$300	\$300
Certain business expenses of reservists and QPA	\$0	\$0	\$0
Health savings account deduction	\$0	\$0	\$0

Moving expenses	\$0	\$0	\$0
One-half of self-employment tax	\$0	\$0	\$0
Self-employed SEP, SIMPLE and qualified plans	\$0	\$0	\$0
Self-employed health insurance deduction	\$0	\$0	\$0
Penalty on early withdrawal of savings	\$0	\$0	\$0
Alimony paid	\$0	\$0	\$0
IRA deduction	\$0	\$0	\$0
Student loan interest	\$0	\$0	\$0
Other deductions	\$0	\$0	\$0
Total Deductions	\$0	\$300	\$300
Adjusted Gross Income	\$278,879	\$89,115	\$365,690
Itemized deductions			
Deductible medical expenses	\$0	\$0	\$0
Taxes	\$5,000	\$2,079	\$8,588
Interest	\$10,887	\$0	\$10,887
Contributions	\$5,806	\$1,855	\$7,661
Casualty and theft losses	\$0	\$0	\$0
Other deductions	\$0	\$0	\$0
Total itemized deductions	\$21,693	\$3,934	\$27,136
Standard deduction	\$16,150	\$14,600	\$30,750
Qualified business income deduction	\$0	\$0	\$0
Taxable income	\$262,729	\$74,515	\$334,940
Tax	\$62,293	\$11,377	\$66,438
Alternative minimum tax	\$0	\$0	\$0
Additions to tax	\$0	\$0	\$0
Credits			

Foreign tax credit	\$18	\$19	\$37
Credit for child and dependent care	\$0	\$0	\$0
Education credits	\$0	\$0	\$0
Retirement savings contribution credit	\$0	\$0	\$0
Child tax credit and other dependent credit	\$0	\$0	\$0
Other credits	\$0	\$0	\$0
Total credits	\$18	\$19	\$37
Other taxes			
Additional Medicare tax	\$589	\$0	\$283
Additional net investment tax	\$0	\$0	\$0
Other taxes	\$0	\$0	\$0
Total other taxes	\$589	\$0	\$283
Total Tax	\$62,864	\$11,358	\$66,684
Payments			
Withholding	\$46,410	\$13,166	\$59,576
Estimated tax payments	\$0	\$0	\$0
Earned income credit	\$0	\$0	\$0
Additional child tax credit	\$0	\$0	\$0
Refundable education credit	\$0	\$0	\$0
Net premium tax credit	\$0	\$0	\$0
Excess social security withheld	\$0	\$0	\$0
Other payments	\$0	\$0	\$0
Total payments	\$46,410	\$13,166	\$59,576
Underpayment penalty	\$0	\$0	\$0
Balance due	\$16,454	\$0	\$7,108
Refund	\$0	\$1,808	\$0

	Separate	Joint
Total Refund or (Amount You Owe)	\$-14,646	\$-7,108

Warning: To protect your privacy, certain information has been removed from this document. If you are the taxpayer, you may want to review the information removed to ensure it is correct. If you are not the taxpayer, you may want to review the information removed to ensure it is correct.

TaxWatch 2025

The TaxWatch report includes an analysis of your 2024 tax situation, so you can plan for upcoming tax years and take advantage of new tax rules.

Marginal Tax Rate

Your 2025 marginal tax rate will be 24%. The marginal tax rate is the federal income tax rate that will be applied to any additional income that you might receive. For example, if your marginal tax rate is 24%, the next \$100 of additional income that you earn will result in \$24 of additional tax.

Your marginal tax rate will apply to the next \$59,660 of income.

Standard Deduction

Your 2025 standard deduction will be \$31,600. The standard deduction is a fixed amount your income *not subject to tax*.

Capital Loss Carryforward

You have a capital loss of \$49,629 to carryforward to 2025. The capital loss that you can deduct in any one year is limited to \$3,000 (\$1,500 if married filing separately). However, you can offset capital gains up to the amount of the loss carryforward.

Increased Withholding

Consider increasing the amount of tax being withheld from your pay.

Doing so could help to ease the burden of a large balance due on April 15. To increase the withholding from your wages, you will need to submit a new Form W-4 to your employer. Increasing your withholding may also prevent you from paying any interest or penalties for not having paid enough tax throughout the year.

Estimated Payments

You might need to make estimated tax payments. If you have income from investments or self-employment that are not subject to withholding, it may be wise to submit estimated tax payments using Form 1040-ES. You can also modify your income tax withheld on wages and other earnings to cover such transactions.

Will Power

If you don't have a will, your state has one for you - and it is probably not what you would have chosen. Make sure that your loved ones and assets are protected by taking the time to prepare a will. If you already have a will in place, it is a good idea to review it periodically to ensure that it is up-to-date with your financial and family information.