

2024 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/11/2025

General Information

Name: Hon Stephen Anthony Pitre

CONFIDENTIAL

PID 37329

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (1St)	Elected Constitutional Officer	Circuit Judge

Net Worth

My Net Worth as of December 31, 2024 was \$ 6,779,663.90.

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 \$ 400,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Northwestern Mutual Life Ins.	\$ 117,700.38
Synovus bank account	\$ 44,020.93

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Description of Asset	Value of Asset
FLORIDA 457B AMFS EMRG MKT BD R6 AMFS NEW WLD R6 DDGECOC INX I FIX CONTRA K6 FIXED ASSETS JPM MDCAP VAL R6 SMCAP VAL EQ D TROE PR DIVID GR 1 AND EDINC B AND GR STK B AND OVSEAR STK I AND SPCTRM INC I AND US MDCAP GR EQ D VANGUARD INST INDS INST LS AND REAL	\$ 135,442.21
{REDACTED}	\$ 2,150,000.00
{REDACTED}	\$ 65,625.00
APPLE INC	\$ 814,365.84
BRISTOL-MYERS SQUIBB	\$ 89,986.96
CATERPILLAR INC	\$ 36,276.00
CONOCOPHILLIPS	\$ 119,004.00
CHEVRON CORP	\$ 159,324.00
HOME DEPOT INC	\$ 175,045.50
IBM CORP	\$ 153,881.00
JOHNSON & JOHNSON	\$ 260,311.60
MERCK & CO. INC.	\$ 119,376.90
ORGANON & CO	\$ 1,571.78
RYDER SYSTEM INC	\$ 80,542.00
SUN LIFE FINL F	\$ 31,116.00
US LIME&M	\$ 46,070.00
XEROX HOLDINGS CORP	\$ 1,806.75
ISHARES MSCI EMERGING MKT ETF IV	\$ 33,855.51
SCHWAB FUNDAMENTAL INTL SMAL COM ETF	\$ 122,010.00
ISHARES RUSSELL 2000 ETF	\$ 194,430.51
VANGUARD FTSE ALL WORLD EX US ETF	\$ 95,438.00
PARNASSUS CORE EQUITY INSTITUTIONAL	\$ 81,108.91
TCW GLOBAL REAL ESTATE I	\$ 21,763.99
PIMCO RAE US SMALL INSTL	\$ 37,280.88
VANGUARD INTERNATIONAL GROWTH ADM	\$ 70,771.39
VANGUARD INFLATION-PROTECTED SECS ADM	\$ 9,681.86

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Description of Asset	Value of Asset
VICTOR INCOME INSTIT	\$ 45,545.58
AVANTIS US SMAL CAP V	\$ 30,283.94
BOSTON TRUST WALDEN SMALL	\$ 11,764.18
FEDERATE HERME INTL SM	\$ 30,871.82
HARBOR INTERNATIONAL COR	\$ 25,095.65
JPMORGAN EMERGING MARKET	\$ 43,933.98
VANGUARD EQUITY INCOME A VEIRX	\$ 30,202.68
BAIRD CORE BOND INS	\$ 15,256.22
DODGE & CO INCOME I	\$ 15,272.21
T ROEW PRICE EMERGING M	\$ 3,859.53
VICTORY INCOME INSTIT	\$ 16,647.27
AVANTIS US SMALL CAP V	\$ 39,553.81
DWS ENHANCED COMMIODDITY S	\$ 4,797.47
FEDERATED HERMES INTL SM	\$ 29,728.37
HARBOR INTL COR	\$ 20,156.22
PARNASSUS CORE EQUITY IN	\$ 84,821.68
PIMCO RAE US SMALL INSTL	\$ 15,751.39
TCW GLOBAL REAL ESTATE	\$ 13,589.34
VANGUARD EMERGIUNG MKTS SEL	\$ 21,418.62
VANGUARD INTL G	\$ 42,730.07
FLORIDA PENSION PLAN BUT UNKNOWN VALUE BUT OVER 15,000	\$ 30,000.00
MORGAN STANLEY CD	\$ 75,180.00
CD MORGAN STANLY	\$ 101,044.00
UBS BANK CD	\$ 75,533.25
WELLS FARGO MTN	\$ 50,601.00
CASH RAYMOND JAMES	\$ 16,285.32
INVESCO STIT TREASURY	\$ 49,869.76
AT&T	\$ 8,219.97

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Description of Asset	Value of Asset
Alliant Energy LNT	\$ 2,543.02
Allstate Corp.	\$ 4,819.75
Alphabet inc google	\$ 39,563.70
american elec pwr AEP	\$ 3,504.74
AMEX	\$ 8,606.91
American Int'l Group AIG	\$ 4,295.20
American WTR WKS C.	\$ 2,489.80
Automatic Data Processing	\$ 1,170.92
avalonbay cmntys AVB	\$ 3,079.58
bank america corp. BAC	\$ 12,130.20
bank new york mellon	\$ 5,762.25
bershire hathaway	\$ 26,743.52
blackrock inc.	\$ 8,200.88
capitol one COF	\$ 5,706.24
citigroup inc com new	\$ 7,390.95
consolidated edison inc.	\$ 2,676.90
constellation energy corp.	\$ 4,697.91
digital rty DLR	\$ 3,901.26
electronic arts inc	\$ 3,364.90
equinix inc EQIX	\$ 3,771.56
Exelon corp.	\$ 2,973.56
meta platforms META	\$ 46,255.29
first energy	\$ 2,426.58
GE Aerospace	\$ 1,501.11
healthpeak	\$ 2,594.56
honeywell intl inc	\$ 1,129.45
IRM	\$ 2,522.64
jp morgan chase	\$ 23,251.87
KKR & Co.	\$ 6,951.77

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Description of Asset	Value of Asset
Kimco realty	\$ 2,717.88
marsh and mclennan	\$ 5,947.48
mastercard inc	\$ 15,270.53
mcdonalds corp.	\$ 159,439.50
merck and co.	\$ 108,930.60
NRG Energy	\$ 3,067.48
netflix inc.	\$ 15,152.44
nextgerra energy	\$ 7,097.31
paypal holdings	\$ 6,828.00
PFG principal financial group	\$ 3,328.65
proctor and gamble	\$ 70,580.65
progressive corp.	\$ 7,427.91
pubic storatge opera PSA	\$ 2,694.96
RTX corp.	\$ 1,388.64
regions financial corp.	\$ 4,280.64
Ryder Systems Inc.	\$ 109,174.56
Simon Property Group	\$ 3,444.20
Southern Co.	\$ 5,021.52
Sun Life Financial	\$ 35,544.66
T Mobile US Inc.	\$ 5,959.71
USLM	\$ 132,740.00
Verizon	\$ 8,077.98
Visa Inc.	\$ 17,382.20
Walmart Inc.	\$ 271,050.00
Wells Fargo Co.	\$ 10,816.96
Welltower	\$ 4,789.14
Zimmer Biomet Holdings	\$ 33,590.34
Eaton Corp. PLC SHS (ETN)	\$ 1,327.48
Willis Towers Watson PLC (WTW)	\$ 4,385.36

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Description of Asset	Value of Asset
Ishares TR Russell (IWM)	\$ 68,276.64
GQGIX equity fund	\$ 26,565.95
ANBFX american funds	\$ 29,132.15
LCGFX william blair large cap	\$ 69,129.49
DHLRX diamon hill large	\$ 68,970.29
AEPFX american funds euro	\$ 31,754.01
MWTIX tcw metro west total return	\$ 43,612.13
principal mid cap PCBIX	\$ 32,257.63
TROX t rowe price overseas	\$ 32,001.64
JP Morgan undiscoverd UBVLX	\$ 31,529.85
WIAEX wasatch small pa growth	\$ 33,740.34
WFMIX allspring special	\$ 28,978.31
AGG ishares	\$ 50,097.30
IEF ishares	\$ 28,289.70
IJH ishares tr core S&P	\$ 15,577.50
VOO vanguard index	\$ 216,601.62
TRPXX invesco	\$ 2,695.88
ally fin inc	\$ 49,863.50
citigroup inc.	\$ 25,071.00
jeffries financial group	\$ 50,529.50
morgan stanley	\$ 101,105.00
USB bank usa CD	\$ 76,503.75
wells fargo and co MTN ISIS	\$ 49,485.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
SYNOVUS MORTGAGE	800 SHADES CREEK PARKWAY, MS 130, BIRMINGHAM, AL 35209	\$ 490,344.07
Wells Fargo Auto	PO Box 5265 Sioux Falls, SD 57117-5265	\$ 49,908.16

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

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you 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.

Stephen Anthony Pitre

Digitally signed: 06/11/2025

Filed with COE: 06/11/2025

2024 Individual Return
prepared for:

STEPHEN A. and [REDACTED] PITRE
P O BOX 607
GULF BREEZE, FL 32562

Angela J. Parker, CPA, APAC
1997 Surgi Dr
Mandeville, LA 70448

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

Your first name and middle initial
STEPHEN A. PITRE

Last name
PITRE

Your social security number
[REDACTED]

Spouse's social security number
[REDACTED]

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

Apt. no.
[REDACTED]

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

State
[REDACTED]

ZIP code
[REDACTED]

Foreign country name
[REDACTED]

Foreign province/state/country
[REDACTED]

Foreign postal code
[REDACTED]

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

Filing Status

☐ Single ☐ Head of household (HOH)

☒ Married filing jointly (even if only one had income)

☐ 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 their 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):		(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions):	
If more than four dependents, see instructions and check here ☐	(1) First name Last name			Child tax credit	Credit for other dependents
	[REDACTED] PITRE	[REDACTED]	DAUGHTER	☐	☒
	[REDACTED] PITRE	[REDACTED]	DAUGHTER	☒	☐
	[REDACTED] PITRE	[REDACTED]	DAUGHTER	☒	☐

Income

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.

1a	Total amount from Form(s) W-2, box 1 (see instructions)	1a	173,925.
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	173,925.
2a	Tax-exempt interest	2a	
3a	Qualified dividends	3a	56,171.
4a	IRA distributions	4a	18,750.
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	149,439.
8	Additional income from Schedule 1, line 10	8	12,109.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income	9	436,036.
10	Adjustments to income from Schedule 1, line 26	10	
11	Subtract line 10 from line 9. This is your adjusted gross income	11	436,036.
12	Standard deduction or itemized deductions (from Schedule A)	12	45,458.
13	Qualified business income deduction from Form 8995 or Form 8995-A	13	177.
14	Add lines 12 and 13	14	45,635.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income	15	390,401.

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	62,926.
	17	Amount from Schedule 2, line 3.....	17	
	18	Add lines 16 and 17.....	18	62,926.
	19	Child tax credit or credit for other dependents from Schedule 8812.....	19	2,650.
	20	Amount from Schedule 3, line 8.....	20	211.
	21	Add lines 19 and 20.....	21	2,861.
	22	Subtract line 21 from line 18. If zero or less, enter -0-.....	22	60,065.
	23	Other taxes, including self-employment tax, from Schedule 2, line 21.....	23	8,867.
24	Add lines 22 and 23. This is your total tax	24	68,932.	

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2.....	25a	20,053.
	b	Form(s) 1099.....	25b	3,750.
	c	Other forms (see instructions).....	25c	
	d	Add lines 25a through 25c.....	25d	23,803.
	26	2024 estimated tax payments and amount applied from 2023 return.....	26	29,760.
	27	Earned income credit (EIC).....	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		
33	Add lines 25d, 26, and 32. These are your total payments	33	53,563.	

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 2025 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	15,476.
	38	Estimated tax penalty (see instructions).....	38	107.

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 ANGELA P. KANGAS	Phone no. 985-624-8583	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.			
	Your signature	Date	Your occupation JUDICIAL	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 HOMEMAKER	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
	Phone no.	Email address		

Paid Preparer Use Only	Preparer's name ANGELA P. KANGAS	Preparer's signature ANGELA P. KANGAS	Date 3/21/2025	PTIN [REDACTED]	Check if: ☒ Self-employed
	Firm's name ANGELA J. PARKER, CPA, APAC	Firm's EIN [REDACTED]			Phone no. 985-624-8583
	Firm's address 1997 SURGI DR MANDEVILLE, LA 70448				

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

Form 1040 (2024)

SCHEDULE 1
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2024

Attachment
Sequence No. 01

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

STEPHEN A. AND [REDACTED] PITRE

Your social security number

[REDACTED]

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	12,109.
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(i) 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	12,109.

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	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	0.

Schedule 1 (Form 1040) 2024

SCHEDULE 2
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Taxes

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form1040 for instructions and the latest information.

OMB No. 1545-0074

2024

Attachment
Sequence No. **02**

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

STEPHEN A. AND [REDACTED] PITRE

Your social security number

[REDACTED]

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	0.
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	1,798.
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	
12	Net investment income tax. Attach Form 8960.	12	7,069.
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12.	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares.	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000.	15	
16	Recapture of low-income housing credit. Attach Form 8611.	16	

(continued on page 2)

Part II Other Taxes (continued)

17	Other additional taxes:		
a	Recapture of other credits. List type, form number, and amount:		
		17a	
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b	
c	Additional tax on HSA distributions. Attach Form 8889	17c	
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d	
e	Additional tax on Archer MSA distributions. Attach Form 8853	17e	
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f	
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g	
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h	
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i	
j	Section 72(m)(5) excess benefits tax	17j	
k	Golden parachute payments	17k	
l	Tax on accumulation distribution of trusts	17l	
m	Excise tax on insider stock compensation from an expatriated corporation	17m	
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n	
o	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17o	
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p	
q	Any interest from Form 8621, line 24	17q	
z	Any other taxes. List type and amount:	17z	
18	Total additional taxes. Add lines 17a through 17z		18
19	Recapture of net EPE from Form 4255, line 1d, column (i)		19
20	Section 965 net tax liability installment from Form 965-A	20	
21	Add lines 4, 7 through 16, 18, and 19. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21
			8,867.

Schedule 2 (Form 1040) 2024

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

STEPHEN A. AND [REDACTED] PITRE

Your social security number

[REDACTED]

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	211.
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	211.

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.

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

Schedule 3 (Form 1040) 2024

SCHEDULE A
(Form 1040)Department of the Treasury
Internal Revenue Service**Itemized Deductions**

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/ScheduleA for instructions and the latest information.
Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

2024Attachment
Sequence No. **07**

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

Your social security number

STEPHEN A. AND [REDACTED] PITRE

Medical and Dental Expenses		Caution: Do not include expenses reimbursed or paid by others.	
1	Medical and dental expenses (see instructions).....	1	
2	Enter amount from Form 1040 or 1040-SR, line 11.....	2	
3	Multiply line 2 by 7.5% (0.075).....	3	
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-.....	4	0.
Taxes You Paid			
5	State and local taxes.		
a	State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box..... ☒	5a	2,141.
b	State and local real estate taxes (see instructions).....	5b	13,739.
c	State and local personal property taxes.....	5c	
d	Add lines 5a through 5c.....	5d	15,880.
e	Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately).....	5e	10,000.
6	Other taxes. List type and amount:	6	
7	Add lines 5e and 6.....	7	10,000.
Interest You Paid			
Caution: Your mortgage interest deduction may be limited. See instructions.			
8	Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box..... ☐		
a	Home mortgage interest and points reported to you on Form 1098. See instructions if limited.....	8a	21,280.
b	Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address.....	8b	
c	Points not reported to you on Form 1098. See instructions for special rules.....	8c	19.
d	Reserved for future use.....	8d	
e	Add lines 8a through 8c.....	8e	21,299.
9	Investment interest. Attach Form 4952 if required. See instructions.....	9	
10	Add lines 8e and 9.....	10	21,299.
Gifts to Charity			
Caution: If you made a gift and got a benefit for it, see instructions.			
11	Gifts by cash or check. If you made any gift of \$250 or more, see instructions.....	11	13,659.
12	Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500.....	12	500.
13	Carryover from prior year.....	13	
14	Add lines 11 through 13.....	14	14,159.
Casualty and Theft Losses			
15	Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions..	15	0.
Other Itemized Deductions			
16	Other—from list in instructions. List type and amount:	16	0.
Total Itemized Deductions			
17	Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12.....	17	45,458.
18	If you elect to itemize deductions even though they are less than your standard deduction, check this box..... ☐		

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

STEPHEN A. AND [REDACTED] PITRE

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.

		Amount
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: <u>MY PENSACOLA CREDIT UNION</u> <u>RAYMOND JAMES - R [REDACTED]</u> <u>RAYMOND JAMES - W [REDACTED]</u>	58. 40. 24,414.
2	Add the amounts on line 1.	24,512.
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.	24,512.

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.

		Amount
5	List name of payer: <u>CHARLES SCHWAB - [REDACTED]</u> <u>RAYMOND JAMES - R [REDACTED]</u> <u>RAYMOND JAMES - W [REDACTED]</u>	10,704. 46,368. 995.
6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b.	58,067.

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. ☐ Yes ☒ No
- 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. ☐ Yes ☒ No
- 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

SCHEDULE D
(Form 1040)

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

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

OMB No. 1545-0074

2024

Attachment
Sequence No. **12**

Name(s) shown on return

STEPHEN A. AND [REDACTED] PITRE

Your social security number

[REDACTED]

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.....	123,384.	129,297.		-5,913.
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 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back.....				7 -5,913.

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.....	382,267.	261,634.		120,633.
8b Totals for all transactions reported on Form(s) 8949 with Box D checked.....				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked.....	49,395.	38,993.		10,402.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked.....	40,602.	16,400.		24,202.
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 instrs.....				13 115.
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions.....				14 ()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on the back.....				15 155,352.

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	149,439.
- 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	18,289.
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	42.
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)		
	21	()
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.		

Note: When figuring which amount is smaller, treat both amounts as positive numbers.

Schedule D (Form 1040) 2024

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

SSN or taxpayer identification number

STEPHEN A. AND [REDACTED] PITRE

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 shares XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	RAYMOND JAMES # V	L-T						
		VARIOUS	VARIOUS	2,515.	879.			1,636.
	RAYMOND JAMES # R	L-T						
		VARIOUS	VARIOUS	46,880.	38,114.			8,766.
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).				49,395.	38,993.		0.	10,402.

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.

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

SSN or taxpayer identification number

STEPHEN A. AND [REDACTED] PITRE

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 shares XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
					(f) Code(s) from instructions	(g) Amount of adjustment	
GOLD AND SILVER	VARIOUS	VARIOUS	40,602.	16,400.	C		24,202.
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).			40,602.	16,400.		0.	24,202.

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.

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

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

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

OMB No. 1545-0074

2024

Attachment
Sequence No. 13

Your social security number

STEPHEN A. AND [REDACTED] PITRE

Part I Income or Loss From Rental Real Estate and Royalties

Note: If you are in the business of renting personal property, use Schedule C. See instructions. If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

- A Did you make any payments in 2024 that would require you to file Form(s) 1099? See instructions. ☐ Yes ☒ No
- B If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No

1 a Physical address of each property (street, city, state, ZIP code)

A [REDACTED]
B [REDACTED]
C [REDACTED]

1 b Type of Property
(from list below)

A 5
B
C

2 For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.

	Fair Rental Days	Personal Use Days	QJV
A			
B			
C			

Type of Property:

- 1 Single Family Residence 3 Vacation/Short-Term Rental 5 Land 7 Self-Rental
2 Multi-Family Residence 4 Commercial 6 Royalties 8 Other (describe) _____

Income:

3 Rents received 3 12,109.
4 Royalties received 4

Expenses:

5 Advertising 5
6 Auto and travel (see instructions) 6
7 Cleaning and maintenance 7
8 Commissions 8
9 Insurance 9
10 Legal and other professional fees 10
11 Management fees 11
12 Mortgage interest paid to banks, etc. (see instructions) 12
13 Other interest 13
14 Repairs 14
15 Supplies 15
16 Taxes 16
17 Utilities 17
18 Depreciation expense or depletion 18
19 Other (list) 19
20 Total expenses. Add lines 5 through 19 20

21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198. 21 12,109.

22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions) 22 ()

23 a Total of all amounts reported on line 3 for all rental properties 23a 12,109.
b Total of all amounts reported on line 4 for all royalty properties 23b
c Total of all amounts reported on line 12 for all properties 23c
d Total of all amounts reported on line 18 for all properties 23d
e Total of all amounts reported on line 20 for all properties 23e

24 Income. Add positive amounts shown on line 21. Do not include any losses 24 12,109.

25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here. 25 ()

26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2 26 12,109.

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2024

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

Your social security number

STEPHEN A. AND [REDACTED] PITRE

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations

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

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

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
A	CROWN POINT CORPORATION	S		[REDACTED]		
B						
C						
D						

Passive Income and Loss			Nonpassive Income and Loss		
	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss allowed (see Schedule K-1)	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A					
B					
C					
D					
29 a Totals					
b Totals					
30 Add columns (h) and (k) of line 29a				30	
31 Add columns (g), (i), and (j) of line 29b				31	
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31				32	

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer ID no.
A		
B		

Passive Income and Loss			Nonpassive Income and Loss		
	(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1	
A					
B					
34 a Totals					
b Totals					
35 Add columns (d) and (f) of line 34a				35	
36 Add columns (c) and (e) of line 34b				36	
37 Total estate and trust income or (loss). Combine lines 35 and 36				37	

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

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5	41	12,109.
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AN; and Schedule K-1 (Form 1041), box 14, code F. See instructions	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

Foreign Tax Credit

OMB No. 1545-0121

(Individual, Estate, or Trust)

2024

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

Name

ID no. as shown on page 1 of your tax return

STEPHEN A. AND [REDACTED] PITRE

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 columns A, B, and C.)
	A	B	C	
i Enter the name of the foreign country or U.S. territory.	VARIOUS	OTHER COUNTRY (VARIOUS)		
1a Gross income from sources within country shown above and of the type checked above (see instructions): SEE STATEMENT 3	10,704.	1,175.		1a 11,879.
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions.				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement).				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions).	10,000.	10,000.		
b Other deductions (attach statement).				
c Add lines 3a and 3b.	10,000.	10,000.		
d Gross foreign source income (see instructions).	10,704.	1,175.		
e Gross income from all sources (see instructions).	441,949.	441,949.		
f Divide line 3d by line 3e (see instructions).	0.024220	0.002659		
g Multiply line 3c by line 3f.	242.	27.		
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions).	516.	57.		
b Other interest expense.				
5 Losses from foreign sources.				
6 Add lines 2, 3g, 4a, 4b, and 5.	758.	84.		6 842.
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2.				7 11,037.

Part II Foreign Taxes Paid or Accrued (see instructions)

COUNTRY	Credit is claimed for taxes (you must check one) (j) ☒ Paid (k) ☐ Accrued	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:				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
A	1099 TAXES									
B	12/31/2024					159.				159.
C										

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2. 8 159.

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	159.	
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). SEE STMT 4 ☐	10	52.	
11	Add lines 9 and 10.	11	211.	
12	Reduction in foreign taxes (see instructions).	12	()	
13	Taxes reclassified under high tax kickout (see instructions).	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit.	14		211.
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	11,037.	
16	Adjustments to line 15 (see instructions).	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	11,037.	
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. Estates and trusts: Enter your taxable income without the deduction for your exemption.	18	390,401.	
Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.				
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1".	19		0.028270932
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.	20		62,926.
Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 9978, Partner's Additional Reporting Year Tax, see instructions.				
21	Multiply line 20 by line 19 (maximum amount of credit).	21		1,779.
22	Increase in limitation (section 960(c)) (see instructions).	22		
23	Add lines 21 and 22.	23		1,779.
24	Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV. See instructions.	24		211.

Part IV Summary of Credits From Separate Parts III (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		211.
34	Reduction of credit for international boycott operations. See instructions for line 12.	34		
35	Subtract line 34 from line 33. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a.	35		211.

ALTERNATIVE MINIMUM TAX

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. 1545-0121

2024

Attachment
Sequence No. 19Department of the Treasury
Internal Revenue Service

Name

ID no. as shown on page 1 of your tax return

STEPHEN A. AND [REDACTED] PITRE

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 columns A, B, and C.)
	A	B	C	
i Enter the name of the foreign country or U.S. territory.....				
1 a Gross income from sources within country shown above and of the type checked above (see instructions):				1 a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source. See instructions. ☐				
Deductions and losses (Caution: See instructions.):				
2 Expenses definitely related to the income on line 1a (attach statement).....				
3 Pro rata share of other deductions not definitely related:				
a Certain itemized deductions or standard deduction (see instructions).....				
b Other deductions (attach statement).....				
c Add lines 3a and 3b.....				
d Gross foreign source income (see instructions).....				
e Gross income from all sources (see instructions).....				
f Divide line 3d by line 3e (see instructions).....				
g Multiply line 3c by line 3f.....				
4 Pro rata share of interest expense (see instructions):				
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions).....				
b Other interest expense.....				
5 Losses from foreign sources.....				
6 Add lines 2, 3g, 4a, 4b, and 5.....				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 (see instructions)

C O U N T R Y	Credit is claimed for taxes (you must check one) (i) ☒ Paid (k) ☐ Accrued	Foreign taxes paid or accrued						(u) Total foreign taxes paid or accrued (add columns (q) through (t))			
		In foreign currency			In U.S. dollars						
		Taxes withheld at source on:			Taxes withheld at source on:						
		(j) 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
A	1099 TAXES										
B	12/31/2024						159.				159.
C											

8 Add lines A through C, column (u). Enter the total here and on line 9, page 2..... 8 159.

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	159.	
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). SEE STMT 6 ☐ (If your income was section 951A category income (box a above Part I), leave line 10 blank.)	10	815.	
11	Add lines 9 and 10.	11	974.	
12	Reduction in foreign taxes (see instructions).	12	()	
13	Taxes reclassified under high tax kickout (see instructions).	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit.	14		974.
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 (see instructions).	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 24. However, if you are filing more than one Form 1116, you must complete line 20.)	17	11,037.	
18	Individuals: Enter the amount from line 15 of your Form 1040, 1040-SR, or 1040-NR. 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	400,401.	
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1".	19		0.027564866
20	Individuals: Enter the total of Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 1z. Estates and trusts: See instructions. Caution: If you are completing line 20 for separate category g (lump-sum distributions), or, if you file Form 9978, Partner's Additional Reporting Year Tax, see instructions.	20		48,846.
21	Multiply line 20 by line 19 (maximum amount of credit).	21		1,346.
22	Increase in limitation (section 960(c)) (see instructions).	22		
23	Add lines 21 and 22.	23		1,346.
24	Enter the smaller of line 14 or line 23. If this is the only Form 1116 you are filing, skip lines 25 through 32 and enter this amount on line 33. Otherwise, complete the appropriate line in Part IV. See instructions.	24		974.

Part IV Summary of Credits From Separate Parts III (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		974.
34	Reduction of credit for international boycott operations. See instructions for line 12.	34		
35	Subtract line 34 from line 33. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040), line 1; Form 1041, Schedule G, line 2a; or Form 990-T, Part III, line 1a.	35		974.

SCHEDULE B
(Form 1116)

(Rev. December 2022)

Department of the Treasury
Internal Revenue Service

Foreign Tax Carryover Reconciliation Schedule

For calendar year 2024, 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

STEPHEN A. AND [REDACTED] PITRE

Identifying number as shown
on page 1 of your tax return
[REDACTED]

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(j) 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))							
2 Adjustments to line 1 (enter description—see instructions):							
a Carryback adjustment (see instr.)							
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)							
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.							

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BAA For Paperwork Reduction Act Notice, see the separate instructions.

FD-2621 01/10/23

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

Foreign Tax Carryover Reconciliation (continued)		(viii) Subtotal from page 1 (enter the amounts from column (vi) on page 1)	(ix) 4th Preceding Tax Year	(ix) 3rd Preceding Tax Year	(x) 2nd Preceding Tax Year	(xi) 1st Preceding Tax Year	(xii) 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))			52.				52.
2	Adjustments to line 1 (enter description—see instructions):							
a	Carryback adjustment (see instr.)							
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.			52.				52.
4	Foreign tax carryover used in current tax year (enter as a negative number)			-52.				-52.
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.							

BAA

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

SCHEDULE B
(Form 1116)

(Rev. December 2022)

Department of the Treasury
Internal Revenue Service

Foreign Tax Carryover Reconciliation Schedule

For calendar year 2024, 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. 1545-0021

Name

STEPHEN A. AND [REDACTED] PITRE

ALTERNATIVE MINIMUM TAX

Identifying number as shown
on page 1 of your tax return
[REDACTED]

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(i) 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))
Foreign Tax Carryover Reconciliation							
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 Adjustments to line 1 (enter description—see instructions):							
a Carryback adjustment (see instr.)							
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)							
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-						

BAA For Paperwork Reduction Act Notice, see the separate instructions.

FD-1262 01/10/23

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

	(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 (vii) 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))							815.
2 Adjustments to line 1 (enter description—see instructions):							
a Carryback adjustment (see instr.)							
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.			459.	356.			815.
4 Foreign tax carryover used in current tax year (enter as a negative number)			-459.	-356.			-815.
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.							

BAA

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

Additional Taxes on Qualified Plans
(Including IRAs) and Other Tax-Favored Accounts

OMB No. 1545-0074

2024

Department of the Treasury
Internal Revenue ServiceAttach to Form 1040, 1040-SR, 1040-NR, or 1041.
Go to www.irs.gov/Form5329 for instructions and the latest information.Attachment
Sequence No. 29

Name of individual subject to additional tax. If married filing jointly, see instructions.

Your social security number

PITRE

Home address (number and street), or P.O. box if mail is not delivered to your home

Apt. no.

Fill in Your Address Only
if You Are Filing This
Form by Itself and Not
With Your Tax ReturnCity, town or post office, state, and ZIP code. If you have a foreign address, also complete the
spaces below. See instructions.If this is an amended
return, check here ☐

Foreign country name

Foreign province/state/county

Foreign postal code

If you only owe the additional 10% tax on the full amount of the early distributions, you may be able to report this tax directly on Schedule 2
(Form 1040), line 8, without filing Form 5329. See instructions.**Part I Additional Tax on Early Distributions.**Complete this part if you took a taxable distribution (other than a qualified disaster distribution) before you reached age 59-1/2
from a qualified retirement plan (including an IRA) or modified endowment contract (unless you are reporting this tax directly on
Schedule 2 (Form 1040) — see above). You may also have to complete this part to indicate that you qualify for an exception to
the additional tax on early distributions or for certain Roth IRA distributions. See instructions.

1	Early distributions includible in income (see instructions). For Roth IRA distributions, see instructions	1	17,984.
2	Early distributions included on line 1 that are not subject to the additional tax (see instructions). Enter the appropriate exception number from the instructions:	2	
3	Amount subject to additional tax. Subtract line 2 from line 1	3	17,984.
4	Additional tax. Enter 10% (0.10) of line 3. Include this amount on Schedule 2 (Form 1040), line 8	4	1,798.
Caution: If any part of the amount on line 3 was a distribution from a SIMPLE IRA, you may have to include 25% of that amount on line 4 instead of 10%. See instructions.			

Part II Additional Tax on Certain Distributions From Education Accounts and ABLER Accounts.Complete this part if you included an amount in income, on Schedule 1 (Form 1040), line 8z, from a Coverdell education savings
account (ESA) or a qualified tuition program (QTP), or on Schedule 1 (Form 1040), line 8g, from an ABLER account.

5	Distributions included in income from a Coverdell ESA, a QTP, or an ABLER account	5	
6	Distributions included on line 5 that are not subject to the additional tax (see instructions)	6	
7	Amount subject to additional tax. Subtract line 6 from line 5	7	
8	Additional tax. Enter 10% (0.10) of line 7. Include this amount on Schedule 2 (Form 1040), line 8	8	

Part III Additional Tax on Excess Contributions to Traditional IRAs.Complete this part if you contributed more to your traditional IRAs for 2024 than is allowable or you had an amount on
line 17 of your 2023 Form 5329.

9	Enter your excess contributions from line 16 of your 2023 Form 5329. See instructions. If zero, go to line 15	9	
10	If your traditional IRA contributions for 2024 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0-	10	
11	2024 traditional IRA distributions included in income (see instructions)	11	
12	2024 distributions of prior year excess contributions (see instructions)	12	
13	Add lines 10, 11, and 12	13	
14	Prior year excess contributions. Subtract line 13 from line 9. If zero or less, enter -0-	14	
15	Excess contributions for 2024 (see instructions)	15	
16	Total excess contributions. Add lines 14 and 15	16	
17	Additional tax. Enter 6% (0.06) of the smaller of line 16 or the value of your traditional IRAs on December 31, 2024 (including 2024 contributions made in 2025). Include this amount on Schedule 2 (Form 1040), line 8 ...	17	

Part IV Additional Tax on Excess Contributions to Roth IRAs.Complete this part if you contributed more to your Roth IRAs for 2024 than is allowable or you had an amount on
line 25 of your 2023 Form 5329.

18	Enter your excess contributions from line 24 of your 2023 Form 5329. See instructions. If zero, go to line 23 ...	18	
19	If your Roth IRA contributions for 2024 are less than your maximum allowable contribution, see instructions. Otherwise, enter -0-	19	
20	2024 distributions from your Roth IRAs (see instructions)	20	
21	Add lines 19 and 20	21	
22	Prior year excess contributions. Subtract line 21 from line 18. If zero or less, enter -0-	22	
23	Excess contributions for 2024 (see instructions)	23	
24	Total excess contributions. Add lines 22 and 23	24	
25	Additional tax. Enter 6% (0.06) of the smaller of line 24 or the value of your Roth IRAs on December 31, 2024 (including 2024 contributions made in 2025). Include this amount on Schedule 2 (Form 1040), line 8	25	

SCHEDULE 8812
(Form 1040)

Department of the Treasury
Internal Revenue Service

**Credits for Qualifying Children
and Other Dependents**

Attach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Schedule8812 for instructions and the latest information.

OMB No. 1545-0074

2024

Attachment
Sequence No. **47**

Name(s) shown on return

Your social security number

STEPHEN A. AND [REDACTED] PITRE

Part I Child Tax Credit and Credit for Other Dependents

1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	1	436,036.
2a	Enter income from Puerto Rico that you excluded	2a	
b	Enter the amounts from lines 45 and 50 of your Form 2555	2b	
c	Enter the amount from line 15 of your Form 4563	2c	
d	Add lines 2a through 2c	2d	
3	Add lines 1 and 2d	3	436,036.
4	Number of qualifying children under age 17 with the required social security number	4	2
5	Multiply line 4 by \$2,000	5	4,000.
6	Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number	6	1
Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4.			
7	Multiply line 6 by \$500	7	500.
8	Add lines 5 and 7	8	4,500.
9	Enter the amount shown below for your filing status. • Married filing jointly—\$400,000 • All other filing statuses—\$200,000	9	400,000.
10	Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.	10	37,000.
11	Multiply line 10 by 5% (0.05)	11	1,850.
12	Is the amount on line 8 more than the amount on line 11? ☐ No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27. ☒ Yes. Subtract line 11 from line 8. Enter the result.	12	2,650.
13	Enter the amount from Credit Limit Worksheet A	13	62,715.
14	Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.	14	2,650.

If the amount on line 12 is more than the amount on line 14, you may be able to take the **additional child tax credit** on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

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

Schedule 8812 (Form 1040) 2024

Part II-A Additional Child Tax Credit for All Filers**Caution:** If you file Form 2555, you cannot claim the additional child tax credit.

15 Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27.....	☐
16a Subtract line 14 from line 12. If zero, stop here ; you cannot take the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27.....	16a 0.
b Number of qualifying children under age 17 with the required social security number; _____ X \$1,700. Enter the result. If zero, stop here ; you cannot claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27.....	16b
TIP: The number of children you use for this line is the same as the number of children you used for line 4.	
17 Enter the smaller of line 16a or line 16b.....	17
18a Earned income (see instructions).....	18a
b Nontaxable combat pay (see instructions).....	18b
19 Is the amount on line 18a more than \$2,500? ☐ No. Leave line 19 blank and enter -0- on line 20. ☐ Yes. Subtract \$2,500 from the amount on line 18a. Enter the result.....	19
20 Multiply the amount on line 19 by 15% (0.15) and enter the result..... Next. On line 16b, is the amount \$5,100 or more? ☐ No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27. ☐ Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27. Otherwise, go to line 21.	20

Part II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Residents of Puerto Rico

21 Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or if you are a bona fide resident of Puerto Rico, see instructions.....	21
22 Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13.....	22
23 Add lines 21 and 22.....	23
24 1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27, and Schedule 3 (Form 1040), line 11. 1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.	24
25 Subtract line 24 from line 23. If zero or less, enter -0-.....	25
26 Enter the larger of line 20 or line 25..... Next, enter the smaller of line 17 or line 26 on line 27.	26

Part II-C Additional Child Tax Credit

27 This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28.....	27 0.
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Schedule 8812 (Form 1040) 2024

Nondeductible IRAs

OMB No. 1545-0074

2024

Department of the Treasury
Internal Revenue ServiceAttach to 2024 Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form8606 for instructions and the latest information.Attachment
Sequence No. 48

Name. If married, file a separate form for each spouse required to file 2024 Form 8606. See instructions.

Your social security number

PITRE

Fill in Your Address
Only if You Are
Filing This Form by
Itself and Not With
Your Tax Return

Home address (number and street, or P.O. box if mail is not delivered to your home)

Apt. no.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete the spaces below (see instructions).

Foreign country name

Foreign province/state/county

Foreign postal code

Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional, Traditional SEP, and Traditional SIMPLE IRAs

Complete this part only if one or more of the following apply.

- You made nondeductible contributions to a traditional IRA for 2024.
- You took distributions from a traditional, traditional SEP, or traditional SIMPLE IRA in 2024 and you made nondeductible contributions to a traditional IRA in 2024 or an earlier year. For this purpose, "distributions" does not include rollovers (but does include certain 2024 retirement plan distribution repayments treated as rollovers (see instructions)). Also, it does not include qualified charitable distributions, one-time distributions to fund an HSA, conversions, recharacterizations, or returns of certain contributions.
- You converted part, but not all, of your traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2024 and you made nondeductible contributions to a traditional IRA in 2024 or an earlier year.

1	Enter your nondeductible contributions to traditional IRAs for 2024, including those made for 2024 from January 1, 2025, through April 15, 2025. See instructions.	1	
2	Enter your total basis in traditional IRAs. See instructions.	2	5,100.
3	Add lines 1 and 2.	3	5,100.
In 2024, did you take a distribution from traditional, traditional SEP, or traditional SIMPLE IRAs, or make a Roth, Roth SEP, or Roth SIMPLE IRA conversion? No ——— Enter the amount from line 3 on line 14. Do not complete the rest of Part I. Yes ——— Go to line 4. ☐ No ☐ Yes			
4	Enter those contributions included on line 1 that were made from January 1, 2025, through April 15, 2025.	4	
5	Subtract line 4 from line 3.	5	5,100.
6	Enter the value of all your traditional, traditional SEP, and traditional SIMPLE IRAs as of December 31, 2024, plus any outstanding rollovers. Subtract certain 2024 retirement plan distribution repayments treated as rollovers, if any (see instructions).	6	106,034.
7	Enter your distributions from traditional, traditional SEP, and traditional SIMPLE IRAs in 2024. Do not include rollovers (but do include certain 2024 retirement plan distribution repayments treated as rollovers (see instructions)). Also, do not include qualified charitable distributions; a one-time distribution to fund an HSA; conversions to a Roth, Roth SEP, or Roth SIMPLE IRA; certain returned contributions; or recharacterizations of traditional IRA contributions (see instructions).	7	18,750.
8	Enter the net amount you converted from traditional, traditional SEP, and traditional SIMPLE IRAs to Roth, Roth SEP, or Roth SIMPLE IRAs in 2024. Also, enter this amount on line 16.	8	
9	Add lines 6, 7, and 8.	9	124,784.
10	Divide line 5 by line 9. Enter the result as a decimal rounded to at least 3 places. If the result is 1.000 or more, enter "1.000".	10	X 0.0408706
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth, Roth SEP, or Roth SIMPLE IRAs. Also, enter this amount on line 17.	11	
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth, Roth SEP, or Roth SIMPLE IRA.	12	766.
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions.	13	766.
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2024 and earlier years.	14	4,334.
15a	Subtract line 12 from line 7.	15a	17,984.
b	Enter the amount on line 15a attributable to qualified disaster distributions, if any, from 2024 Form(s) 8915-F (see instructions). Also, enter this amount on 2024 Form(s) 8915-F, line 18, as applicable (see instructions).	15b	
c	Taxable amount. Subtract line 15b from line 15a. Reduce that amount by certain 2024 retirement plan distribution repayments (other than those reported on Form 8915-F) that are treated as rollovers (see instructions). If more than zero, also include this amount on 2024 Form 1040, 1040-SR, or 1040-NR, line 4b.	15c	17,984.

Note: You may be subject to an additional 10% tax on the amount on line 15c if you were under age 59-1/2 at the time of the distribution. See instructions.

Qualified Business Income Deduction

OMB No. 1545-2294

Attach to your tax return.

2024

Department of the Treasury
Internal Revenue ServiceGo to www.irs.gov/Form8995A for instructions and the latest information.Attachment
Sequence No. 55A

Name(s) shown on return

Your taxpayer identification number

STEPHEN A. AND [REDACTED] PITRE

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

Use this form if your taxable income, before your qualified business income deduction, is above \$191,950 (\$383,900 if married filing jointly), or you're a patron of an agricultural or horticultural cooperative.

Part I Trade, Business, or Aggregation Information

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

1	(a) Trade, business, or aggregation name	(b) Check if specified service	(c) Check if aggregation	(d) Taxpayer identification number	(e) Check if patron
A	CROWN POINT CORPORATION	☐	☐	[REDACTED]	☐
B		☐	☐		☐
C		☐	☐		☐

Part II Determine Your Adjusted Qualified Business Income

	A	B	C
2 Qualified business income from the trade, business, or aggregation. See instructions.	2		
3 Multiply line 2 by 20% (0.20). If your taxable income is \$191,950 or less (\$383,900 if married filing jointly), skip lines 4 through 12 and enter the amount from line 3 on line 13.	3		
4 Allocable share of W-2 wages from the trade, business, or aggregation.	4		
5 Multiply line 4 by 50% (0.50)	5		
6 Multiply line 4 by 25% (0.25)	6		
7 Allocable share of the unadjusted basis immediately after acquisition (UBIA) of all qualified property.	7		
8 Multiply line 7 by 2.5% (0.025)	8		
9 Add lines 6 and 8.	9		
10 Enter the greater of line 5 or line 9.	10		
11 W-2 wage and UBIA of qualified property limitation. Enter the smaller of line 3 or line 10.	11		
12 Phased-in reduction. Enter the amount from line 26, if any.	12		
13 Qualified business income deduction before patron reduction. Enter the greater of line 11 or line 12.	13		
14 Patron reduction. Enter the amount from Schedule D (Form 8995-A), line 6, if any. See instructions.	14		
15 Qualified business income component. Subtract line 14 from line 13.	15		
16 Total qualified business income component. Add all amounts reported on line 15.	16		

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

Form 8995-A (2024)

Part III Phased-in Reduction

Complete Part III only if your taxable income is more than \$191,950 but not \$241,950 (\$383,900 and \$483,900 if married filing jointly) and line 10 is less than line 3. Otherwise, skip Part III.

		A	B	C
17 Enter the amounts from line 3.....	17			
18 Enter the amounts from line 10.....	18			
19 Subtract line 18 from line 17.....	19			
20 Taxable income before qualified business income deduction.....	20			
21 Threshold. Enter \$191,950 (\$383,900 if married filing jointly).....	21			
22 Subtract line 21 from line 20.....	22			
23 Phase-in range. Enter \$50,000 (\$100,000 if married filing jointly).....	23			
24 Phase-in percentage. Divide line 22 by line 23.....	24	%		
25 Total phase-in reduction. Multiply line 19 by line 24.....	25			
26 Qualified business income after phase-in reduction. Subtract line 25 from line 17. Enter this amount here and on line 12, for the corresponding trade or business.....	26			

Part IV Determine Your Qualified Business Income Deduction

27 Total qualified business income component from all qualified trades, businesses, or aggregations. Enter the amount from line 16.....	27		
28 Qualified REIT dividends and publicly traded partnership (PTP) income or (loss). See instructions.....	28	886.	
29 Qualified REIT dividends and PTP (loss) carryforward from prior years.....	29	()	
30 Total qualified REIT dividends and PTP income. Combine lines 28 and 29. If less than zero, enter -0-.....	30	886.	
31 REIT and PTP component. Multiply line 30 by 20% (0.20).....	31	177.	
32 Qualified business income deduction before the income limitation. Add lines 27 and 31.....	32		177.
33 Taxable income before qualified business income deduction.....	33	390,578.	
34 Enter your net capital gain, if any, increased by any qualified dividends (see instructions).....	34	205,610.	
35 Subtract line 34 from line 33. If zero or less, enter -0-.....	35		184,968.
36 Income limitation. Multiply line 35 by 20% (0.20).....	36		36,994.
37 Qualified business income deduction before the domestic production activities deduction (DPAD) under section 199A(g). Enter the smaller of line 32 or line 36.....	37		177.
38 DPAD under section 199A(g) allocated from an agricultural or horticultural cooperative. Don't enter more than line 33 minus line 37.....	38		
39 Total qualified business income deduction. Add lines 37 and 38.....	39		177.
40 Total qualified REIT dividends and PTP (loss) carryforward. Combine lines 28 and 29. If zero or greater, enter -0-.....	40	()	

Form 8995-A (2024)

(Rev. November 2024)

Department of the Treasury
Internal Revenue Service

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC),
Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC)) and
Credit for Other Dependents (ODC), and Head of Household (HOH) Filing Status
To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, or 1040-SS.
Go to www.irs.gov/Form8867 for instructions and the latest information.

OMB No. 1545-0074

For tax year

2024

Attachment
Sequence No. 70

Taxpayer name(s) shown on return

STEPHEN A. AND [REDACTED] PITRE

Taxpayer identification number

Preparer's name

ANGELA P. KANGAS

Preparer tax identification number

Part I Due Diligence Requirements

Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I–V for the benefit(s) claimed (check all that apply).

☐ EIC ☒ CTC/ACTC/ODC ☐ AOTC ☐ HOH

- 1 Did you complete the return based on information for the applicable tax year provided by the taxpayer or reasonably obtained by you?
- 2 If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-SS, or Schedule 8812 (Form 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit claimed?
- 3 Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following.
- Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status.
 - Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of any credit(s)
- 4 Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes," answer questions 4a and 4b. If "No," go to question 5.)
- a Did you make reasonable inquiries to determine the correct, complete, and consistent information?
- b Did you contemporaneously document your inquiries? (Documentation should include the questions you asked, whom you asked, when you asked, the information that was provided, and the impact the information had on your preparation of the return.)
- 5 Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure the amount(s) of the credit(s)
- List those documents provided by the taxpayer, if any, that you relied on:
-
-
-
-
- 6 Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her return is selected for audit?
- 7 Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year?
- (If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)
- a Did you complete the required recertification Form 8862?
- 8 If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and correct Schedule C (Form 1040)?

Yes	No	N/A
☒	☐	☐
☒	☐	☐
☒	☐	☐
☐	☒	☐
☐	☐	☐
☒	☐	☐
☒	☐	☐
☒	☐	☐
☐	☐	☒

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 8867 (Rev. 11-2024)

Part II Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go to Part III.)

- | | Yes | No | N/A |
|---|--------------------------|--------------------------|--------------------------|
| 9a Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.) | ☐ | ☐ | ☐ |
| b Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year? | ☐ | ☐ | ☐ |
| c Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)? | ☐ | ☐ | ☐ |

Part III Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not claim CTC, ACTC, or ODC, go to Part IV.)

- | | Yes | No | N/A |
|--|-------------------------------------|--------------------------|--------------------------|
| 10 Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States? | ☒ | ☐ | ☐ |
| 11 Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child? | ☒ | ☐ | ☐ |
| 12 Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return? | ☒ | ☐ | ☐ |

Part IV Due Diligence Questions for Returns Claiming AOTC (If the return does not claim AOTC, go to Part V.)

- | | Yes | No |
|---|--------------------------|--------------------------|
| 13 Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qualified tuition and related expenses for the claimed AOTC? | ☐ | ☐ |

Part V Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing status, go to Part VI.)

- | | Yes | No |
|---|--------------------------|--------------------------|
| 14 Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for a qualifying person? | ☐ | ☐ |

Part VI Eligibility Certification

You will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filing status on the return of the taxpayer identified above if you:

- Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responses on the return or in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s);
- Complete this Form 8867 truthfully and accurately and complete the actions described in this checklist for any applicable credit(s) claimed and HOH filing status, if claimed;
- Submit Form 8867 in the manner required; and
- Keep all five of the following records for 3 years from the latest of the dates specified in the Form 8867 instructions under *Document Retention*.
 - A copy of this Form 8867.
 - The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.
 - Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).
 - A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s) was obtained.
 - A record of any additional information you relied upon, including questions you asked and the taxpayer's responses, to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).

If you have not complied with all due diligence requirements, you may have to pay a penalty for each failure to comply related to a claim of an applicable credit or HOH filing status (see instructions for more information).

- | | Yes | No |
|--|-------------------------------------|--------------------------|
| 15 Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and complete? | ☒ | ☐ |

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

Attach to your tax return.

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

OMB No. 1545-2227

2024Attachment
Sequence No. **72**

Name(s) shown on your tax return

STEPHEN A. AND [REDACTED] PITRE

Your social security number or EIN

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	24,512.
2	Ordinary dividends (see instructions)	2	58,067.
3	Annuities (see instructions)	3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a	12,109.
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	12,109.
5a	Net gain or loss from disposition of property (see instructions)	5a	149,439.
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	149,439.
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	244,127.

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	244,127.
Individuals:			
13	Modified adjusted gross income (see instructions)	13	436,036.
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	186,036.
16	Enter the smaller of line 12 or line 15	16	186,036.
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	7,069.
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

FEDERAL STATEMENTS

PAGE 1

CLIENT PITRS01

STEPHEN A. AND [REDACTED] PITRE

3/21/25

12:35PM

STATEMENT 1
FORM 1040
WAGE SCHEDULE

TAXPAYER - EMPLOYER	WAGES	FEDERAL W/H	FICA	MEDI- CARE	STATE W/H	LOCAL W/H
STATE OF FLORIDA	173,925.	20,053.	10,453.	2,782.		
GRAND TOTAL	173,925.	20,053.	10,453.	2,782.	0.	0.

STATEMENT 2
FORM 1040
IRA DISTRIBUTION SCHEDULE

SPOUSE - PAYER	TOTAL RECEIVED	TAXABLE AMOUNT	FEDERAL W/H	STATE W/H
RAYMOND JAMES TRUST CO.	18,750.	***.	3,750.	
TAXABLE AMOUNT FROM FORM 8606		17,984.		
GRAND TOTAL	18,750.	17,984.	3,750.	0.

*** DENOTES THAT THE TAXABLE AMOUNT
WAS COMPUTED ON FORM 8606

STATEMENT 3
FORM 1116, LINE 1A - PASSIVE CATEGORY INCOME
GROSS INCOME FROM SOURCES OUTSIDE U.S.

FOREIGN COUNTRY OR U.S. POSSESSION: VARIOUS

DIVIDENDS.....	\$	41.
FOREIGN SOURCE QUALIFIED DIVIDENDS.....		10,663.
TOTAL	\$	10,704.

FOREIGN COUNTRY OR U.S. POSSESSION: OTHER COUNTRY (VARIOU

FOREIGN SOURCE QUALIFIED DIVIDENDS.....	\$	1,060.
FOREIGN SOURCE CAPITAL GAIN DISTRIBUTIONS.....		115.
TOTAL	\$	1,175.

2024

FEDERAL STATEMENTS

PAGE 2

CLIENT PITRS01

STEPHEN A. AND [REDACTED] PITRE

3/21/25

12:35PM

STATEMENT 4
FORM 1116, LINE 10
FOREIGN TAX CREDIT CARRYOVERS

PASSIVE INCOME

	FOREIGN TAXES PAID	FOREIGN TAXES DISALLOWED	FOREIGN TAXES CLAIMED	FOREIGN TAX CREDIT CARRYOVER
2023 FOREIGN TAX CREDIT	834.	0.	834.	0.
2022 FOREIGN TAX CREDIT	1,028.	0.	1,028.	0.
2021 FOREIGN TAX CREDIT	625.	0.	573.	52.
2020 FOREIGN TAX CREDIT	0.	0.	0.	0.
2019 FOREIGN TAX CREDIT	0.	0.	0.	0.
2018 FOREIGN TAX CREDIT	0.	0.	0.	0.
2017 FOREIGN TAX CREDIT	0.	0.	0.	0.
2016 FOREIGN TAX CREDIT	0.	0.	0.	0.
2015 FOREIGN TAX CREDIT	0.	0.	0.	0.
2014 FOREIGN TAX CREDIT	0.	0.	0.	0.

TOTAL FOREIGN TAX CREDIT CARRYOVER - FORM 1116, LINE 10

\$ 52.

STATEMENT 5
FORM 1116, LINE 1A - PASSIVE CATEGORY INCOME (AMT)
GROSS INCOME FROM SOURCES OUTSIDE U.S.

FOREIGN COUNTRY OR U.S. POSSESSION: VARIOUS

DIVIDENDS.....	\$ 41.
FOREIGN SOURCE QUALIFIED DIVIDENDS.....	10,663.
TOTAL	\$ 10,704.

FOREIGN COUNTRY OR U.S. POSSESSION: OTHER COUNTRY (VARIOUS)

FOREIGN SOURCE QUALIFIED DIVIDENDS.....	\$ 1,060.
FOREIGN SOURCE CAPITAL GAIN DISTRIBUTIONS.....	115.
TOTAL	\$ 1,175.

2024

FEDERAL STATEMENTS

PAGE 3

CLIENT PITRS01

STEPHEN A. AND [REDACTED] PITRE

3/21/25

12:35PM

STATEMENT 6
FORM 1116, LINE 10
FOREIGN TAX CREDIT CARRYOVERS

PASSIVE INCOME - AMT

	FOREIGN TAXES PAID	FOREIGN TAXES DISALLOWED	FOREIGN TAXES CLAIMED	FOREIGN TAX CREDIT CARRYOVER
2023 FOREIGN TAX CREDIT	834.	0.	834.	0.
2022 FOREIGN TAX CREDIT	1,028.	0.	672.	356.
2021 FOREIGN TAX CREDIT	625.	0.	166.	459.
2020 FOREIGN TAX CREDIT	825.	0.	825.	0.
2019 FOREIGN TAX CREDIT	0.	0.	0.	0.
2018 FOREIGN TAX CREDIT	0.	0.	0.	0.
2017 FOREIGN TAX CREDIT	0.	0.	0.	0.
2016 FOREIGN TAX CREDIT	0.	0.	0.	0.
2015 FOREIGN TAX CREDIT	0.	0.	0.	0.
2014 FOREIGN TAX CREDIT	0.	0.	0.	0.

TOTAL FOREIGN TAX CREDIT CARRYOVER - FORM 1116, LINE 10

\$ 815.

Form **8879**

(Rev. January 2021)

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

- ERO must obtain and retain completed Form 8879.
► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID) ►

Taxpayer's name

STEPHEN A. PITRE

Social security number

Spouse's name

PITRE

Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2024 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income	1	436,036.
2	Total tax	2	68,932.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	23,803.
4	Amount you want refunded to you	4	
5	Amount you owe	5	15,476.

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

☒ I authorize ANGELA J. PARKER, CPA, APAC to enter or generate my PIN as my
ERO firm name Enter five digits, but
don't enter all zeros
signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ►

Date ►

Spouse's PIN: check one box only

☒ I authorize ANGELA J. PARKER, CPA, APAC to enter or generate my PIN as my
ERO firm name Enter five digits, but
don't enter all zeros
signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►

Date ►

Practitioner PIN Method Returns Only – continue below**Part III Certification and Authentication – Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► **ANGELA P. KANGAS**

Date ►

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

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

Form 8879 (Rev. 01-2021)

2024

E-FILE PAYMENT RECORD - ESTIMATE INSTALLMENT 1

PAGE 1

CLIENT PITRS01

STEPHEN A. AND [REDACTED] PITRE

3/21/25

12:34PM

Form Payment Record

The taxpayer's balance due or an estimated tax payment for next year will be paid electronically using the following information. Modify the bank and account information using the Direct Deposit / Electronic Payment input fields in Screen 3. To cancel payment, call the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the requested payment (settlement) date.

Name of Bank

COASTAL BANK & TRUST

Routing Transit Number

[REDACTED]

Bank Account Number

[REDACTED]

Type of Account

1

1 = Checking; 2 = Savings

Amount of Tax Payment

11,210.

Tax Type

1040-ES

1040, 1040-ES, 2350 or 4868

Requested Payment Date

4/15/25

Taxpayer's Daytime Phone Number

[REDACTED]

2024

E-FILE PAYMENT RECORD - BALANCE DUE

PAGE 1

CLIENT PITRS01

STEPHEN A. AND [REDACTED] PITRE

3/21/25

12:34PM

Form Payment Record

The taxpayer's balance due or an estimated tax payment for next year will be paid electronically using the following information. Modify the bank and account information using the Direct Deposit / Electronic Payment input fields in Screen 3. To cancel payment, call the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the requested payment (settlement) date.

Name of Bank

COASTAL BANK & TRUST

Routing Transit Number

[REDACTED]

Bank Account Number

[REDACTED]

Type of Account

1

1 = Checking; 2 = Savings

Amount of Tax Payment

15,476.

Tax Type

1040

1040, 1040-ES, 2350 or 4868

Requested Payment Date

4/11/25

Taxpayer's Daytime Phone Number

[REDACTED]

2024

FINANCIAL TRANSACTION SUMMARY

PAGE 1

CLIENT PITRS01

STEPHEN A. AND [REDACTED] PITRE

3/21/25

12:34PM

FEDERAL

2024 FEDERAL FORM 1040 ELECTRONIC FINANCIAL TRANSACTION INFORMATION.

THE TAXPAYER HAS AN AMOUNT DUE OF \$15,476 WHICH WILL BE DEBITED FROM THE FOLLOWING ACCOUNT ON 4/11/2025.

NAME OF BANK: COASTAL BANK & TRUST
ROUTING TRANSIT NUMBER: [REDACTED]
ACCOUNT NUMBER: *****[REDACTED]
ACCOUNT TYPE: CHECKING

2025 FEDERAL FORM 1040-ES ELECTRONIC ESTIMATED TAX PAYMENTS

YOUR FEDERAL ESTIMATED TAX PAYMENTS WILL BE DEBITED FROM THE FOLLOWING BANK ACCOUNT IN ACCORDANCE WITH THE SCHEDULE BELOW.

ESTIMATE 1 AMOUNT DUE OF \$11,210 WILL BE DEBITED ON 4/15/2025.

NAME OF BANK: COASTAL BANK & TRUST
ROUTING TRANSIT NUMBER: [REDACTED]
ACCOUNT NUMBER: *****[REDACTED]
ACCOUNT TYPE: CHECKING

LOUISIANA

2024 LOUISIANA FORM IT-540B ELECTRONIC FINANCIAL TRANSACTION INFORMATION.

THE TAXPAYER HAS AN AMOUNT DUE OF \$218 WHICH WILL BE DEBITED FROM THE FOLLOWING ACCOUNT ON 4/11/2025.

NAME OF BANK: COASTAL BANK & TRUST
ROUTING TRANSIT NUMBER: [REDACTED]
ACCOUNT NUMBER: *****[REDACTED]
ACCOUNT TYPE: CHECKING

2024

FEDERAL INCOME TAX SUMMARY

PAGE 1

CLIENT PITRS01

STEPHEN A. AND [REDACTED] PITRE

3/21/25

12:34 PM

	2024	2023	DIFF
INCOME			
WAGES, SALARIES, TIPS, ETC.....	173,925	174,112	-187
INTEREST INCOME.....	24,512	708	23,804
DIVIDEND INCOME.....	58,067	66,358	-8,291
TAXABLE IRA DISTRIBUTIONS.....	17,984	0	17,984
CAPITAL GAIN OR LOSS.....	149,439	113,451	35,988
RENT, ROYALTY, PARTNERSHIP, SCORP, TRUST	12,109	8,130	3,979
TOTAL INCOME.....	436,036	362,759	73,277
ADJUSTMENTS TO INCOME			
TOTAL ADJUSTMENTS.....	0	0	0
ADJUSTED GROSS INCOME.....	436,036	362,759	73,277
ITEMIZED DEDUCTIONS			
TAXES.....	10,000	10,000	0
INTEREST.....	21,299	50	21,249
CONTRIBUTIONS.....	14,159	5,385	8,774
TOTAL ITEMIZED DEDUCTIONS.....	45,458	15,435	30,023
TAX COMPUTATION			
STANDARD DEDUCTION.....	29,200	27,700	1,500
LARGER OF ITEMIZED OR STANDARD DEDUCTION	45,458	27,700	17,758
QUALIFIED BUSINESS INCOME DEDUCTION.....	177	52	125
TAXABLE INCOME.....	390,401	335,007	55,394
TAX BEFORE CREDITS.....	62,926	52,095	10,831
CREDITS			
CHILD TAX CREDIT & OTHER DEPENDENT CR....	2,650	4,500	-1,850
FOREIGN TAX CREDIT.....	211	1,369	-1,158
TOTAL CREDITS.....	2,861	5,869	-3,008
TAX AFTER CREDITS.....	60,065	46,226	13,839
OTHER TAXES			
TAX ON IRAS, OTHER QUAL. RET. PLANS, ETC	1,798	0	1,798
OTHER TAXES.....	7,069	4,285	2,784
TOTAL TAX.....	68,932	50,511	18,421
PAYMENTS & REFUNDABLE CREDITS			
FEDERAL INCOME TAX WITHHELD.....	23,803	20,934	2,869
ESTIMATED TAX PAYMENTS.....	29,760	20,840	8,920
TOTAL PAYMENTS.....	53,563	41,774	11,789
REFUND OR AMOUNT DUE			
UNDERPAYMENT PENALTY.....	107	0	107
AMOUNT YOU OWE.....	15,476	8,737	6,739
TAX RATES			
ORDINARY INCOME TAX BRACKET.....	24.0%	22.0%	2.0%
EFFECTIVE TAX RATE.....	17.7%	15.1%	2.6%

IT-540B-2D (Page 1 of 4)
2024 LOUISIANA NONRESIDENT
AND PART-YEAR RESIDENT - 2D

DEV ID 1315

Name
Change

Decedent
Filing

STEPHEN A PITRE

Your SSN

Spouse
Decedent

PITRE

Spouse's SSN

Address
Change

P O BOX 607

Amended
Return

GULF BREEZE

FL 32562

Telephone

NOL

MSRA

Nonresident
Return

X

Part-Year
Return

NRPA

Your Date of Birth

Spouse's Date of Birth

Decedent's Date of Death

Spouse's Date of Death

FILING STATUS: Enter the appropriate number in the filing status box. It must agree with your federal return.

Enter a "1" in box if single.

Enter a "2" in box if married filing jointly.

Enter a "3" in box if married filing separately.

Enter a "4" in box if head of household.

If the qualifying person is not your dependent, enter name here.

Enter a "5" in box if qualifying surviving spouse.

If the qualifying person is not your dependent, enter name here.

6 EXEMPTIONS:

6A X Yourself

65 or
older

Blind

6B X Spouse

65 or
older

Blind

Total of
6A & 6B 2

6C DEPENDENTS — Enter dependent information below. If you have more than six dependents, attach a statement to your return with the required information. Enter the number of dependents claimed on your Federal Form 1040 or 1040-SR in the boxes here.

6C 3

First Name

Last Name

Social Security Number

Relationship to You

Birth Date (mm/dd/yyyy)

PITRE

DAUGHTER

PITRE

DAUGHTER

PITRE

DAUGHTER

IMPORTANT!

All four (4) pages of this return **MUST** be mailed in together along with your W-2s and completed schedules. Please paperclip. **Do not staple.**

6D TOTAL EXEMPTIONS — Total of 6A, 6B, and 6C

6D 5

FOR OFFICE USE ONLY

Field
Flag

If you are not required to file a federal return, indicate wages here.

Mark this box and enter zero "0" on Line 14.

7	FEDERAL ADJUSTED GROSS INCOME — From the NPR worksheet, Federal column, Line 12	7	436036
8	LOUISIANA ADJUSTED GROSS INCOME — From the NPR worksheet, Line 20	8	12109
9	RATIO OF LOUISIANA ADJUSTED GROSS INCOME TO FEDERAL ADJUSTED GROSS INCOME	9	277
10A	FEDERAL ITEMIZED DEDUCTIONS	10A	45458
10B	FEDERAL ITEMIZED DEDUCTION FOR MEDICAL AND DENTAL EXPENSES	10B	
10C	FEDERAL STANDARD DEDUCTION	10C	29200
10D	EXCESS FEDERAL ITEMIZED DEDUCTIONS — Subtract Line 10C from Line 10B	10D	
10E	ALLOWABLE DEDUCTIONS — Multiply Line 10D by the percentage on Line 9. Round to the nearest dollar.	10E	
11	LOUISIANA NET INCOME — Subtract Line 10E from Line 8. If less than zero, enter zero "0".	11	12109
12	YOUR LOUISIANA INCOME TAX	12	218
13	NONREFUNDABLE PRIORITY 1 CREDITS — From Schedule C-NR, Line 5	13	
14	TAX LIABILITY AFTER NONREFUNDABLE PRIORITY 1 CREDITS — Subtract Line 13 from Line 12. If less than zero, enter zero "0".	14	218
15	2024 LOUISIANA REFUNDABLE CHILD CARE CREDIT — Your Federal Adjusted Gross Income must be EQUAL TO OR LESS THAN \$25,000 to claim the credit on this line. See the instructions and the Refundable Care Credit Worksheet.	15	
15A	Enter the qualified expense amount from the Refundable Child Care Credit Worksheet, Line 3.	15A	
15B	Enter the amount from the Refundable Child Care Credit Worksheet, Line 6.	15B	
16	2024 LOUISIANA REFUNDABLE SCHOOL READINESS CREDIT — Your Federal Adjusted Gross Income must be EQUAL TO OR LESS THAN \$25,000 to claim the credit on this line. See the Refundable School Readiness Credit Worksheet.	16	
	5 Star 4 Star 3 Star 2 Star		
17	OTHER REFUNDABLE PRIORITY 2 CREDITS — From Schedule F-NR, Line 9	17	
18	TOTAL REFUNDABLE PRIORITY 2 CREDITS — Add Lines 15, 16, and 17. Do not include amounts on Lines 15A and 15B.	18	
19	TAX LIABILITY AFTER REFUNDABLE PRIORITY 2 CREDITS	19	218
20	OVERPAYMENT AFTER REFUNDABLE PRIORITY 2 CREDITS	20	
21	NONREFUNDABLE PRIORITY 3 CREDITS — From Schedule J-NR, Line 16	21	

22	ADJUSTED LOUISIANA INCOME TAX - Subtract Line 21 from Line 19.	22	218
	☒ No use tax due		
23A	CONSUMER USE TAX	23A	
	Amount from the Consumer Use Tax Worksheet		
	☒ No usage fee due		
23B	ELECTRIC AND HYBRID VEHICLE ROAD USAGE FEE	23B	
	Amount from Form R-19000A		
24	TOTAL INCOME TAX, CONSUMER USE TAX, AND ELECTRIC AND HYBRID VEHICLE ROAD USAGE FEE. Add Lines 22, 23A, AND 23B.	24	218
25	OVERPAYMENT OF REFUNDABLE PRIORITY 2 CREDITS - Enter the amount from Line 20.	25	
26	REFUNDABLE PRIORITY 4 CREDITS - From Schedule I-NR, Line 6	26	
27	AMOUNT OF LOUISIANA TAX WITHHELD FOR 2024 - Attach Forms W-2 and 1099.	27	
28	AMOUNT OF CREDIT CARRIED FORWARD FROM 2023	28	
29	AMOUNT PAID ON YOUR BEHALF BY A COMPOSITE PARTNERSHIP FILING Enter name of partnership. _____	29	
30	AMOUNT OF ESTIMATED PAYMENTS MADE FOR 2024	30	
31	AMOUNT OF EXTENSION PAYMENT	31	
32	TOTAL REFUNDABLE TAX CREDITS AND PAYMENTS - Add Lines 25 through 31.	32	
33	OVERPAYMENT - If Line 32 is greater than Line 24, subtract Line 24 from Line 32. Your overpayment may be reduced by Underpayment of Estimated Tax Penalty. Otherwise, go to Line 40.	33	
34	UNDERPAYMENT PENALTY - See the instructions for Underpayment Penalty and Form R-210NR. If you are a farmer, check the box.	34	
35	ADJUSTED OVERPAYMENT - If Line 33 is greater than Line 34, subtract Line 34 from Line 33, and enter on Line 35. If Line 34 is greater than Line 33, subtract Line 33 from Line 34, and enter the balance on Line 40.	35	
36	TOTAL DONATIONS - From Schedule D-NR, Line 20	36	
37	SUBTOTAL - Subtract Line 36 from Line 35. This amount of overpayment is available for credit or refund.	37	
38	AMOUNT OF LINE 37 TO BE CREDITED TO 2025 INCOME TAX CREDIT	38	
	AMOUNT TO BE REFUNDED - Subtract Line 38 from Line 37. If mailing to LDR, use the address on the bottom of page 4.		
39	Enter a "2" in box if you want to receive your refund by paper check. Enter a "3" in box if you want to receive your refund by direct deposit. Complete information below. If information is unreadable, you are filing for the first time, or if you do not make a refund selection, you will receive your refund by paper check.	39	

DIRECT DEPOSIT INFORMATION

Type: Checking Savings

Routing
NumberWill this refund be forwarded to a financial
institution located outside the United States?Account
Number

Yes

No

Social Security Number

AMOUNTS DUE LOUISIANA

40	AMOUNT YOU OWE — If Line 24 is greater than Line 32, subtract Line 32 from Line 24	40	218
41	ADDITIONAL DONATION TO THE MILITARY FAMILY ASSISTANCE FUND	41	
42	ADDITIONAL DONATION TO THE COASTAL PROTECTION AND RESTORATION FUND	42	
43	ADDITIONAL DONATION TO LOUISIANA FOOD BANK ASSOCIATION	43	
44	INTEREST — From the Interest Calculation Worksheet, Line 5	44	
45	DELINQUENT FILING PENALTY — From the Delinquent Filing Penalty Calculation Worksheet, Line 3	45	
46	DELINQUENT PAYMENT PENALTY — From the Delinquent Payment Penalty Calculation Worksheet, Line 7	46	
47	UNDERPAYMENT PENALTY — See the instructions for Underpayment Penalty and Form R-210NR. If you are a farmer, check the box.	47	
48	BALANCE DUE LOUISIANA — Add Lines 40 through 47.	48	218

**PAY THIS AMOUNT.
DO NOT SEND CASH.**

IMPORTANT!

All four (4) pages of this return
MUST be mailed in together along
with your W-2s and completed
schedules. Please paperclip.

Do not staple.

Status 001

Contribution and Donation 0000



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. If I made a contribution to a START Savings Program, I consent that my Social Security Number may be given to the Louisiana Office of Student Financial Assistance to properly identify the START Savings Program account holder. If married filing jointly, both Social Security Numbers may be submitted. I understand that by submitting this form I authorize the disbursement of individual income tax refunds through the method as described on Line 39.

Your Signature		Date (mm/dd/yyyy)	Spouse's Signature (If filing jointly, both must sign.)		Date (mm/dd/yyyy)
Email Address					
PAID PREPARER USE ONLY	Print/Type Preparer's Name ANGELA P. KANGAS		Preparer's Signature ANGELA P. KANGAS		Date (mm/dd/yyyy)
	Firm's Name	ANGELA J. PARKER, CPA, APAC		Firm's FEIN	
	Firm's Address	1997 SURGI DR MANDEVILLE, LA 70448		Telephone	985-624-8583

Name
PITR

Individual Income Tax Return
Calendar Year Return Due 5/15/2025

Mail to: Department of Revenue
PO BOX 3550
BATON ROUGE LA 70821-3550

PTIN, FEIN, or
LDR Account Number
of Paid Preparer

For Office
Use Only.

2024 Nonresident and Part-Year Resident (NPR) Worksheet

See instructions for completing the NPR worksheet.		Federal	Louisiana
1	Wages, salaries, tips, etc.	173925	
2	Taxable interest	24512	
3	Dividends	58067	
4	Business income (or loss) and farm income (or loss)		
5	Gains (or losses)	149439	
6	IRA distributions, pensions, and annuities	17984	
7	Rental real estate, royalties, partnerships, S corporations, trusts, etc.	12109	12109
8	Social Security benefits		
9	Other income — Enter the amount of Louisiana NOL utilized.		
10	Total Income — Add the income amounts on Lines 1-9 for each column.	436036	12109
11	Total Adjustments to Income		
12	Adjusted Gross Income — Subtract Line 11 from Line 10 for each column. Enter the amount in the Federal column on Form IT-540B, Line 7. The amount shown in the Federal column should agree with Federal Form 1040 or 1040-SR, Line 11.	436036	12109
Additions	13 Interest and dividend income from other states and their political subdivisions		
	14 Recapture of START contributions		
	15 Recapture of START K12 contributions		
	16 Add back of pass-through entity loss		
	17 Total — Add Lines 12 through 16.		12109

EXEMPT INCOME — Enter on Lines 18A through 18F; the amount of any exempt income included on Line 12 in the Louisiana column. Enter the description and associated code, along with the dollar amount. See the instructions.			
Exempt Income Description		Code	Amount
Subtractions	18A		
	18B		
	18C		
	18D		
	18E		
	18F		
19	Total Exempt Income — Add Lines 18A through 18F.		
20	LOUISIANA ADJUSTED GROSS INCOME. Subtract Line 19 from Line 17. Also, enter this amount on Form IT-540B, Line 8.		12109

Description - See instructions.	Code	Description - See the instructions.	Code
Interest and Dividends on U.S. Government Obligations	01E	Native American Income	08E
Louisiana State Employees' Retirement Benefits	02E	START Savings Program Contribution	09E
Taxpayer date retired: _____ Spouse date retired: _____		Military Pay Exclusion	10E
Louisiana State Teachers' Retirement Benefits	03E	Road Home	11E
Taxpayer date retired: _____ Spouse date retired: _____		Recreation Volunteer	13E
Federal Retirement Benefits	04E	Volunteer Firefighter	14E
Taxpayer date retired: _____ Spouse date retired: _____		Voluntary Retrofit Residential Structure	16E
Other Retirement Benefits — Provide name or statute: _____	05E	Elementary and Secondary School Tuition	17E
Taxpayer date retired: _____ Spouse date retired: _____		Educational Expenses for Home-Schooled Children	18E
Annual Retirement Income Exemption for Taxpayers 65 or over	06E	Educational Expenses for Quality Public Education	19E
Provide name of pension or annuity: _____		Capital Gain from Sale of Louisiana Business	20E
		Employment of Certain Qualified Disabled Individuals	21E
		S Bank Shareholder Income Exclusion	22E
		Entity Level Taxes Paid to Other States	23E
		Pass-Through Entity Exclusion	24E
		IRC 280C Expense	25E
		COVID-19 Relief Benefits	27E
		START K12 Savings Program Contributions	28E
		Digital Nomads	29E
		Other, see instructions. Identify: _____	49E

LA 8453

2024 Individual Income Tax Declaration for Electronic Filing

LOUISIANA

DEPARTMENT of REVENUE

Your first name and initial STEPHEN A. PITRE	Last name PITRE	1 Your Social Security Number [REDACTED]	2024
Spouse's first name and initial [REDACTED]	Last name PITRE	2 Spouse's Social Security Number [REDACTED]	
Present home address (number and street including apartment number or rural route) P O BOX 607		Daytime Telephone Number	
City, town, or post office GULF BREEZE, FL 32562		State ZIP	

Part A

Tax Return Information

Balance Due 218.

Refund Due _____

Part B

Direct Deposit of Refund (Optional) ☐ or Direct Debit (Optional) ☒Routing Number The first 2 digits of the routing number must be 01 through 12 or 21 through 32.
[REDACTED]

Direct Debit Payment

218.Account Number
[REDACTED]

Withdrawal Date

4/11/2025

MM DD YYYY

Type of Account: ☒ Checking ☐ Savings
(Check one.)Full Payment ☒ Partial Payment ☐
☐ Payment made/will be made by credit card.

PART C

Declaration of Taxpayer

☐ I consent that my refund be directly deposited as designated in Part B, and declare that the information shown in Part B is correct. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.☐ I do not want direct deposit of my refund, am a first-time filer with Louisiana, or am not receiving a refund. I understand that by not having my refund direct deposited I will receive my refund by paper check.☒ I authorize the Louisiana Department of Revenue and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in Part B for payment of my state taxes owed on this return. I also authorize the financial institutions involved in processing the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

I understand that if I have filed a balance due return and if the Louisiana Department of Revenue does not receive full and timely payment of my tax liability, I will remain liable for the tax liability and all applicable interest and penalties.

I declare that I have examined my state income tax return prepared for electronic transmission to the State of Louisiana and, to the best of my knowledge and belief, it is true and complete.

Please sign here.

Your signature

Date

Spouse's signature (if joint return)

Date

Part D

Declaration and Signature of Electronic Return Originator (ERO) and Paid Preparer

I declare that I have reviewed the above taxpayer's return and that the entries on the return are complete and correctly represented to the best of my knowledge based on the information submitted/furnished by the taxpayer. I also declare that I have complied with all of the requirements of the Louisiana Department of Revenue and in the Louisiana Handbook for Electronic Filers.

Please sign here. ANGELA P. KANGAS

Preparer's signature

Preparer's SSN or PTIN

Date

985-624-8583

Telephone

☒ Mark box if also ERO.

Electronic Return Originator's signature

ERO's SSN or PTIN

Date

Telephone

This form is to be maintained by ERO. Do not submit to LDR.

2024

LA E-FILE PAYMENT RECORD - BALANCE DUE

PAGE 1

CLIENT PITRS01

STEPHEN A. AND TRACI L. PITRE

3/21/25

12:34PM

Form Payment Record

THE FORM IT-540B BALANCE DUE WILL BE PAID ELECTRONICALLY USING THE FOLLOWING INFORMATION. MODIFY THE BANK AND ACCOUNT INFORMATION USING THE LOUISIANA ELECTRONIC PAYMENT INPUT FIELDS IN SCREEN 3.

Name of Bank COASTAL BANK & TRUST

Routing Translt Number

Bank Account Number

Type of Account CHECKING

Amount of Tax Payment 218.00

Tax Type FORM IT-540B

Requested Payment Date 4/11/25

Taxpayer's Daytime Phone Number

2024

LOUISIANA INCOME TAX SUMMARY

PAGE 1

CLIENT PITRS01

STEPHEN A. AND [REDACTED] PITRE

3/21/25

12:34 PM

	2024	2023	DIFF
FEDERAL ADJUSTED GROSS INCOME			
FEDERAL ADJUSTED GROSS INCOME.....	436,036	362,759	73,277
TAXABLE LOUISIANA INCOME.....	12,109	8,130	3,979
TOTAL LOUISIANA INCOME.....	12,109	8,130	3,979
RATIO OF LOUISIANA INCOME.....	2.77%	2.24%	0.53%
DEDUCTIONS			
FEDERAL ITEMIZED DEDUCTIONS.....	45,458	0	45,458
FEDERAL STANDARD DEDUCTION.....	29,200	0	29,200
LOUISIANA INCOME			
LOUISIANA NET INCOME.....	12,109	8,130	3,979
LOUISIANA INCOME TAX.....	218	145	73
CREDITS			
ADJUSTED LOUISIANA INCOME TAX.....	218	145	73
TOTAL LA INCOME/USE TAX.....	218	0	218
PAYMENTS			
TOTAL REFUNDABLE CREDITS AND PAYMENTS....	0	0	0
AMOUNTS DUE LOUISIANA			
AMOUNT YOU OWE.....	218	145	73
TAX RATES			
MARGINAL TAX RATE.....	1.9%	1.9%	0.0%
EFFECTIVE TAX RATE.....	1.8%	1.8%	0.0%