

General Information

Name: Ju'Coby Ann Pittman

PID 55332

AGENCY INFORMATION

Organization	Suborganization	Title
Jacksonville	Council & Constitutional Officers	City Council Member, District 10
Jacksonville	KingSoutel Crossing Community Redevelopment Agency Board	Board Member
Jacksonville	Renew Arlington Community Redevelopment Agency Board	Board Member

Net WorthMy Net Worth as of December 31, 2024 was \$ 992,752.76.

2024 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/30/2025

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 \$ 216,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
2816 Ribault Scenic Dr., Jacksonville, FL 32208	\$ 216,137.00
Vehicles-Cadillac-20215, Nissan, 2009, Pssate 2009	\$ 49,392.48
Intangible Property-Brown/Brown, Mutual of American IRA, State Farm, RIFI Credit Union	\$ 800,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Mr. Cooper Mortgage	P. O. Box 650783, Dallas, TX 75265	\$ 68,399.34
Callillac Financial	P. O. Box 78143, Phoenix	\$ 4,376.90

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
Clara White Mission	613 W. Ashley Street, Jacksonville, FL 32202	\$ 97,596.88
City of Jacksonville	617 W. Duval Street, Jacksonville, FL 32202	\$ 56,869.15
See Attached		

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

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

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

N/A

Training

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

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

Signature of Reporting Official or Candidate

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

Ju'Coby Ann Pittman

Digitally signed: 06/30/2025

Filed with COE: 06/30/2025

See separate instructions.

Spouse's social security number

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

☐ You ☐ Spouse

☐ 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): _____

Yes ☒ No

Spouse itemizes on a separate return or you were a dual-status alien

Is blind

If more than four dependents, see instr. and check here ☐	(1) First name	Last name	number	to you	Child tax credit	Credit for other dependents

1a	148.427
----	---------

2b	58
----	----

--	--

8	
---	--

9	159,943
---	---------

10	
----	--

10	
11	159 941

11	159,943
	91,550

12	21,550
----	--------

13	
----	--

14	21,550
----	--------

15	138,393
----	---------

Form **1040** (2024)

Form 1040 (2024) **JU'COBY PITTMAN**Page **2**

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972	16	26,257
	3		17	
	17	Amount from Schedule 2, line 3	18	26,257
	18	Add lines 16 and 17	19	
	19	Child tax credit or credit for other dependents from Schedule 8812	20	
	20	Amount from Schedule 3, line 8	21	
	21	Add lines 19 and 20	22	26,257
	22	Subtract line 21 from line 18. If zero or less, enter -0-	23	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	24	26,257
	24	Add lines 22 and 23. This is your total tax		
Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	24,756
	b	Form(s) 1099	25b	2,292
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	27,048
	26	2024 estimated tax payments and amount applied from 2023 return	26	
	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	27,048
Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	791
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here ☐	35a	791
Direct deposit? See instructions.	b	Routing number [REDACTED] c Type: ☒ Checking ☐ Savings		
	d	Account number [REDACTED]		
	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	
	38	Estimated tax penalty (see instructions)	38	

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

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

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

Your signature _____ Date _____ Your occupation **EXECUTIVE DIRECTOR**

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

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

Phone no. _____ Email address _____

Preparer's name **Dr. Augustine Enofe** Preparer's signature _____ Date **06/16/25** PTIN **P01493561** Check if: ☐ Self-employed

Paid Preparer Use Only Firm's name **Enofe & Associates, LLC** Phone no. **904-301-1260**

Firm's address **5991 Chester Ave Ste 204 Jacksonville FL 32217-2245** Firm's EIN **27-0649858**

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

JU'COBY PITTMAN

Your social security number

Medical**and****Dental****Expenses****Caution:** Do not include expenses reimbursed or paid by others.**1** Medical and dental expenses (see instructions)**2** Enter amount from Form 1040 or

1040-SR, line 11

3 Multiply line 2 by 7.5% (0.075)**4** Subtract line 3 from line 1. If line 3 is more than line 1, enter -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 ☒**b** State and local real estate taxes (see instructions)**c** State and local personal property taxes**d** Add lines 5a through 5c**e** Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately)**6** Other taxes. List type and amount:**7** Add lines 5e and 6**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**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**c** Points not reported to you on Form 1098. See instructions for special rules**d** Reserved for future use**e** Add lines 8a through 8c**9** Investment interest. Attach Form 4952 if required. See instructions**10** Add lines 8e and 9**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**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**13** Carryover from prior year**14** Add lines 11 through 13**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**Other****Itemized****Deductions****16** Other—from list in instructions. List type and amount:**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**18** If you elect to itemize deductions even though they are less than your standard deduction, check this box ☐

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

DAA

Schedule A (Form 1040) 2024

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

2024Attachment
Sequence No.**13**

Your social security number

JU'COBY PITTMAN**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		
1a	Physical address of each property (street, city, state, ZIP code)					
A	1541 BOULEVARD, JACKSONVILLE, FL 32206					
B						
C						
1b	Type of Property (from list below)	2	For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	1			366		
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:		Properties:		
		A	B	C
3	Rents received	3		
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		
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	0	
23a	Total of all amounts reported on line 3 for all rental properties	23a		
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		0
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		

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2024