

General Information

Name: James Severio Peluso

PID 306079

AGENCY INFORMATION

Organization	Suborganization	Title
Jacksonville	Council & Constitutional Officers	City Council District 7
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 \$ 253,175.00.

Assets

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

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

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Home	\$ 295,285.00
Car	\$ 32,000.00
FRS	\$ 45,000.00
Retirement Account	\$ 115,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Freedom Mortgage	P.O. Box 6656, Chicago, IL 60680-6656	\$ 238,925.00
Bank of America	4996 Norwood Ave, Jacksonville FL 32208	\$ 14,250.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

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

Income

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

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

PRIMARY SOURCES OF INCOME:

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

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

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

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

N/A

Training

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

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

Signature of Reporting Official or Candidate

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

James Severio Peluso

Digitally signed: 06/24/2025

Filed with COE: 06/24/2025



2024 Federal Tax Return Filing
Instructions
FOR THE YEAR ENDING
December 31, 2024

Prepared for	JAMES S PELUSO																
Tax Summary	<table><tr><td>Gross Income.....</td><td>\$177117</td></tr><tr><td>Adjusted Gross Income.....</td><td>\$177117</td></tr><tr><td>Total Deductions.....</td><td>\$14600</td></tr><tr><td>Total Taxable Income.....</td><td>\$162517</td></tr><tr><td>Total Tax.....</td><td>\$32047</td></tr><tr><td>Total Payments.....</td><td>\$31099</td></tr><tr><td>Refund Amount.....</td><td>\$0</td></tr><tr><td>Amount You Owe.....</td><td>\$948</td></tr></table>	Gross Income.....	\$177117	Adjusted Gross Income.....	\$177117	Total Deductions.....	\$14600	Total Taxable Income.....	\$162517	Total Tax.....	\$32047	Total Payments.....	\$31099	Refund Amount.....	\$0	Amount You Owe.....	\$948
Gross Income.....	\$177117																
Adjusted Gross Income.....	\$177117																
Total Deductions.....	\$14600																
Total Taxable Income.....	\$162517																
Total Tax.....	\$32047																
Total Payments.....	\$31099																
Refund Amount.....	\$0																
Amount You Owe.....	\$948																
Make check payable to																	
Mailing Address	Since you are filing your return electronically and you chose to use an electronic signature, you do not mail your return.																

Instructions

If you e-filed your return and it has been accepted, you will get notified via text or email if you opted for that option.

If you have a balance due being paid by check or are paper filing the return, mail it to the address indicated.

Keep a copy of your return and supporting documents for your records.

2024 TWO YEAR COMPARISON

JAMES S PELUSO

Keep for Your Records

	2024	2023	Difference
Filing status	Single		
INCOME:			
Wages, salaries, tips, etc.	177,117		177,117
Interest income			
Ordinary dividend income			
IRA distributions and pension income			
Taxable social security income			
Capital gain or (loss) (Schedule D)			
Schedule 1 - Income			
Refunds of state and local taxes			
Alimony received			
Business income or (loss) (Schedule C)			
Other gains or (losses) (Form 4797)			
Rental real estate, partnerships, estates, etc. (Schedule E)			
Farm income or (loss) (Schedule F)			
Unemployment compensation			
Other income			
Total income	177,117		177,117
ADJUSTMENTS:			
Schedule 1 - Adjustments			
Educator expenses			
Busn expenses for reservists, performing artists, etc			
Health savings account deduction			
Moving expenses			
Deductible part of self-employment tax			
Self-employed SEP, SIMPLE and qualified plans deduction ...			
Self-employed health insurance			
Penalty on early withdrawal of savings			
Alimony paid			
IRA contributions			
Student loan interest deduction			
Archer MSA deduction			
Other adjustments			
Total adjustments			
ADJUSTED GROSS INCOME:	177,117		177,117
DEDUCTIONS:			
Standard deduction or Itemized deductions	14,600		14,600
Charitable contributions if taking standard deduction	N/A		
If itemized, Schedule A deductions:			
Medical and dental expenses			
Sales, income, and other taxes paid	5,629		5,629
Interest paid	6,148		6,148
Gifts to charity	1,500		1,500
Casualty and theft losses			
Other miscellaneous deductions			
Qualified business income deduction			
TAXABLE INCOME:	162,517		162,517

2024 TWO YEAR COMPARISON

JAMES S PELUSO

Keep for Your Records

	2024	2023	Difference
TAX COMPUTATION (BEFORE CREDITS):			
Tax	32,047		32,047
Tax calculation method	TCW		
Schedule 2 - Taxes			
Additions to Tax			
Alternative minimum tax			
Total taxes	32,047		32,047
Tax rate	24%	%	
CREDITS:			
Child and other dependents tax credit			
Schedule 3 - Non-Refundable Credits			
Foreign tax credit			
Child care credit			
Education credit			
Retirement savings contribution credit			
Other credits			
Total credits			
OTHER TAXES:			
Schedule 2 - Other Taxes			
Self-employment tax			
Additional tax on IRAs			
Other taxes			
TOTAL TAXES:	32,047		32,047
PAYMENTS:			
Federal income tax withheld	29,763		29,763
Estimated payments made			
Earned income credit			
Refundable child tax credit or additional child tax credit			
American opportunity credit			
Schedule 3 - Refundable Credits & Payments			
ACA premium tax credit			
Qualified sick and family leave credit			
Other payments	1,336		1,336
Total payments	31,099		31,099
AMOUNT DUE / REFUND:			
Amount overpaid			
Overpayment applied to next year			
Refund			
Amount due	948		948
Penalty			

Tax Calculation Methods:

Sch D = Sch D tax worksheet

Sch J = Inc Aver for Farmer/Fisherman

FEITW = Foreign Earned Income Tax WS

QDCGTW = Qual Div Cap Gain Tax WS
F8615 = Child with unearned income

TCW = Tax Comp Worksheet (rates)
TABLE = Tax Table

For the year Jan. 1–Dec. 31, 2024, or other tax year beginning _____, 2024, ending _____, 20 ____ See separate instructions.

Your first name and middle initial
JAMES S Last name
PELUSO Your social security number
XXXXXXXXXX

If joint return, spouse's first name and middle initial
 Last name
 Spouse's social security number
XXXXXXXXXX

Home address (number and street). If you have a P.O. box, see instructions.
3323 PARK STREET Apt. no.
 City, town, or post office. If you have a foreign address, also complete spaces below.
JACKSONVILLE State **FL** ZIP code **32205**
 Foreign country name Foreign province/state/county Foreign postal code
 Presidential Election Campaign
 Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.
☐ You ☐ Spouse

Filing Status ☒ Single ☐ Married filing separately (MFS) ☐ Head of household (HOH)
 Check only one box. ☐ Married filing jointly (even if only one had income) ☐ 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 inst.):	
(1) First name	Last name			Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here ☐					

Income	1a Total amount from Form(s) W-2, box 1 (see instructions)	1a 177,117
	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 177,117

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.	2a Tax-exempt interest	2a	b Taxable interest	2b
	3a Qualified dividends	3a	b Ordinary dividends	3b
Standard Deduction for—	4a IRA distributions	4a	b Taxable amount	4b
	5a Pensions and annuities	5a	b Taxable amount	5b
• 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 Ded., see instructions.	6a Social security benefits	6a	b Taxable amount	6b
	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
	8 Additional income from Schedule 1, line 10			8
	9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income			9 177,117
	10 Adjustments to income from Schedule 1, line 26			10
	11 Subtract line 10 from line 9. This is your adjusted gross income			11 177,117
	12 Standard deduction or itemized deductions (from Schedule A)			12 14,600
	13 Qualified business income deduction from Form 8995 or Form 8995-A			13
	14 Add lines 12 and 13			14 14,600
	15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income			15 162,517

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form **1040** (2024)

Tax and Credits	16 Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐	16	32,047
	17 Amount from Schedule 2, line 3	17	
	18 Add lines 16 and 17	18	32,047
	19 Child tax credit or credit for other dependents from Schedule 8812	19	
	20 Amount from Schedule 3, line 8	20	
	21 Add lines 19 and 20	21	
	22 Subtract line 21 from line 18. If zero or less, enter -0-	22	32,047
	23 Other taxes, including self-employment tax, from Schedule 2, line 21	23	
	24 Add lines 22 and 23. This is your total tax	24	32,047

Payments	25 Federal income tax withheld from:		
	a Form(s) W-2	25a	29,763
	b Form(s) 1099	25b	
	c Other forms (see instructions)	25c	
	d Add lines 25a through 25c	25d	29,763
	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	1,336
	32 Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32	1,336
	33 Add lines 25d, 26, and 32. These are your total payments	33	31,099

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	
Direct deposit? See instructions.	b Routing number XXXXXXXXXXXXXXXXXX c Type: ☐ Checking ☐ Savings		
	d Account number XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
	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	948
	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.			
Joint return? See instructions. Keep a copy for your records.	Your signature	Date	Your occupation Government	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	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
	Phone no. 9049230744	Email address pelusojs@gmail.com		

Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed
	Firm's name	Phone no.			
	Firm's address	Firm's EIN			

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

Form 1040 (2024)

SCHEDULE 3

(Form 1040)

Additional Credits and Payments

OMB No. 1545-0074

2024Attachment
Sequence No. **03**Department of the Treasury
Internal Revenue Service

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

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

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

JAMES S PELUSO

Your social security number

Part I Nonrefundable Credits

1	Foreign tax credit. Attach Form 1116 if required	1	
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	

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	1,336
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	1,336

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

Schedule 3 (Form 1040) 2024

2024 WAGES AND SALARIES SUMMARY ATTACHMENT

JAMES S PELUSO

Employer Name	Employer EIN	T or S	Wages	Federal Withholding	Social Security Tax Withheld	State	State Wages	State Tax Withheld	Local Tax Withheld
VyStar Credit Union	59-0690965	T	101,967	19,785	7,022	FL			
DFAS-CLJFLP	34-9980000	T	18,833	2,473	1,168	FL			
City of Jacksonville	59-6000344	T	56,317	7,505	3,599	FL			

Total	177,117	29,763	11,789	
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2024 FEDERAL TAX WITHHOLDINGS ATTACHMENT

JAMES S. PELUSO

W-2	VyStar Credit Union	19,785
W-2	DFAS-CLJFLP	2,473
W-2	City of Jacksonville	7,505

Total to Form 1040/1040-SR line 25d	29,763
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2025 CARRYFORWARD INFORMATION

JAMES S. PELUSO

Keep for Your Records

Itemized Returns Only – 2024 state and local tax refund (this amount will be proforma'd to

Taxable Refund Worksheet directly and may not be taxable in 2025)

Charitable contributions carryover to 2025	
Estimated short-term capital loss carryover	
Estimated long-term capital loss carryover	
2024 tax liability (for 2025 Form 2210 purposes)	32,047
Form 8839: 2024 carryover of unqualified expenses	
Refund amount applied to 2025	
Disallowed investment interest in 2024	
Additional state taxes paid	
Form 8396: Mortgage interest credit from 2022	
Mortgage interest credit from 2023	
Mortgage interest credit from 2024	
Form 8801: Minimum tax credit carryforward	0
Potential 2025 IRA contribution from 2024 tax refund	

NOL carryforward:

Regular Tax

from 2004	from 2014
from 2005	from 2015
from 2006	from 2016
from 2007	from 2017
from 2008	from 2018
from 2009	from 2019
from 2010	from 2020
from 2011	from 2021
from 2012	from 2022
from 2013	from 2023
Gross NOL generated in 2024	
To be absorbed in carryback period	
Net carryforward from 2024	
Total carryforward to 2025	

AMT Tax

from 2004	from 2014
from 2005	from 2015
from 2006	from 2016
from 2007	from 2017
from 2008	from 2018
from 2009	from 2019
from 2010	from 2020
from 2011	from 2021
from 2012	from 2022
from 2013	from 2023
Gross AMT NOL generated in 2024	
To be absorbed in carryback period	
Net carryforward from 2024	
Total carryforward to 2025	

- The amounts carried to next year from Schedule(s) E, pages 1 and/or 2, are found on Form 8582, Worksheet 6. Carryover AMT amounts are found on the AMT Form 8582, Worksheet 6.
- Foreign Tax Credit carryforward to 2025
- General Business Credit carryforward to 2025
- First-Time Homebuyer Credit Repayment carryforward to 2025
- If there are Form(s) 6252 in this tax return, the gross profit ratio and prior payments received (including the current year payments) will carry forward from each Form 6252.
- Amounts from Form 6251, lines 16 through 18, lines 27 and 28 are automatically carried forward to 2025.