

2025 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 05/15/2026

General Information

Name: Gabriel Maximilian Hament

PID 310840

AGENCY INFORMATION

Organization	Suborganization	Title
Public Defender; 13Th Circuit	Employees	Assistant Public Defender

CANDIDATE FOR

Position	Agency Name	Position sought or held
City, Town or Village (Commission or Council), Governing Board - Form 6	St. Petersburg City Council	City Council Member, District 2

Net Worth

My Net Worth as of December 31, 2025 was \$ 61,318.26.

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.

The aggregate value of my household goods and personal effect is \$ 10,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
2055 Retirement Date Fund (FRS)	\$ 6,086.69
VIXI ETF (FRS)	\$ 5,168.24
BITI ETF (401(k))	\$ 23,424.87
SBIT ETF (401(k))	\$ 6,588.00
UVIX ETF (brokerage account)	\$ 16,678.91
SBIT ETF (brokerage account)	\$ 13,527.36
Bank Accounts (Bank of America)	\$ 10,713.28
Lease (Acura Financial Services)	\$ 10,602.50

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Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Bank of America (credit card)	P.O. Box 851001, Dallas, TX 75285-1001	\$ 4,971.93
Edge Real Estate LLC (apartment lease)	400 W Overall St., Coleman, TX 76834	\$ 16,100.00
Acura Financial Services (car lease)	P.O. Box 7829 Philadelphia, PA 19101-7829	\$ 20,399.66

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 2025 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 2025 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.

Gabriel Maximilian Hament

Digitally signed: 05/15/2026

Filed with COE: 05/15/2026

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

, 2025, ending

, 20

See separate instructions.

☐ Filed pursuant to section 301.9100-2 ☐ Combat zone ☐ Other

☐ Deceased

Spouse

Your first name and middle initial

Last name

Your social security number

Gabriel M

Hament

XXXXXXXXXX

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

Last name

Spouse's social security number

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

Apt. no.

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

825 S Village Dr N

204

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

State

ZIP code

St Petersburg

FL

337163023

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

☐ Head of household (HOH)

Check only one box.

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

☐ Qualifying surviving spouse (QSS)

☐ Married filing separately (MFS). Enter spouse's SSN above and full name here:

If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

☐ If treating a nonresident alien or dual-status alien spouse as a U.S. resident for the entire tax year, check the box and enter their name (see instructions and attach statement if required):

Digital Assets

At any time during 2025, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.)

☐ Yes ☐ No

Dependents

Dependent 1

Dependent 2

Dependent 3

Dependent 4

(see instructions)

(1) First name

(2) Last name

(3) SSN

(4) Relationship

(5) Check if lived with you more than half of 2025

(a) ☐ Yes

(b) ☐ And in the U.S.

(6) Check if

☐ Full-time student

☐ Permanently and totally disabled

(7) Credits

☐ Child tax credit

☐ Credit for other dependents

(a) ☐ Yes

(b) ☐ And in the U.S.

☐ Full-time student

☐ Permanently and totally disabled

☐ Child tax credit

☐ Credit for other dependents

(a) ☐ Yes

(b) ☐ And in the U.S.

☐ Full-time student

☐ Permanently and totally disabled

☐ Child tax credit

☐ Credit for other dependents

(a) ☐ Yes

(b) ☐ And in the U.S.

☐ Full-time student

☐ Permanently and totally disabled

☐ Child tax credit

☐ Credit for other dependents

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

Income

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.

1a	Total amount from Form(s) W-2, box 1 (see instructions)	1a	72,324.
b	Household employee wages not reported on Form(s) W-2	1b	
c	Tip income not reported on line 1a (see instructions)	1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d	
e	Taxable dependent care benefits from Form 2441, line 26	1e	
f	Employer-provided adoption benefits from Form 8839, line 31	1f	
g	Wages from Form 8919, line 6	1g	
h	Other earned income (see instructions). Enter type and amount:	1h	0.
i	Nontaxable combat pay election (see instructions)	1i	
z	Add lines 1a through 1h	1z	72,324.
2a	Tax-exempt interest	2a	0.
3a	Qualified dividends	3a	
c	Check if your child's dividends are included in ☐ Line 3a	2	☐ Line 3b
4a	IRA distributions	4a	
c	Check if (see instructions) ☐ Rollover	2	☐ QCD ☐
5a	Pensions and annuities	5a	
c	Check if (see instructions) ☐ Rollover	2	☐ PSO ☐
6a	Social security benefits	6a	
c	If you elect to use the lump-sum election method, check here (see instructions) ☐		
d	If you are married filing separately and lived apart from your spouse the entire year (see inst.), check here ☐		
7a	Capital gain or (loss). Attach Schedule D if required	7a	20,306.
b	Check if: ☐ Schedule D not required ☐ Includes child's capital gain or (loss)		
8	Additional income from Schedule 1, line 10	8	
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7a, and 8. This is your total income	9	92,695.
10	Adjustments to income from Schedule 1, line 26	10	
11a	Subtract line 10 from line 9. This is your adjusted gross income	11a	92,695.

SCHEDULE D
(Form 1040)

Capital Gains and Losses

OMB No. 1545-0074

2025

Department of the Treasury
Internal Revenue Service

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

Attachment
Sequence No. 12

Name(s) shown on return

Gabriel M Hament

Your social security number

XXXXXXXXXX

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 or Form 1099-DA 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				
1b Totals for all transactions reported on Form(s) 8949 with Box A or Box G checked	221,560.	201,254.		20,306.
2 Totals for all transactions reported on Form(s) 8949 with Box B or Box H checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C or Box I 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	20,306.

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 or Form 1099-DA for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D or Box J checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E or Box K checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F or Box L checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824			11	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			12	
13 Capital gain distributions. See the instructions			13	
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	

Part III Summary

16	Combine lines 7 and 15 and enter the result	16	20,306.
• If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7a. 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 7a. 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	
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	
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 7a, the smaller of: • The loss on line 16; or • (\$3,000), or if married filing separately, (\$1,500) } 	21	()
Note: When figuring which amount is smaller, treat both amounts as positive numbers.			
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.		

Department of the Treasury
Internal Revenue Service

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Go to www.irs.gov/Form8949 for instructions and the latest information.2025
Attachment
Sequence No. 12A

Name(s) shown on return

Gabriel M Hament

Social security number or taxpayer identification number

Before you check Box A, B, C, G, H, or I below, see whether you received any Form(s) 1099-B, Form(s) 1099-DA, or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B or Form 1099-DA. They 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 I **Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B and Form(s) 1099-DA showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, C, G, H, or I below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-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.

- ☐ (A) Short-term transactions reported on **Form(s) 1099-B** showing basis **was** reported to the IRS (see **Note** above)
- ☐ (B) Short-term transactions reported on **Form(s) 1099-B** showing basis **was not** reported to the IRS
- ☐ (C) Short-term transactions, other than digital asset transactions, not reported to you on **Form 1099-B** or **Form 1099-DA**
- ☐ (G) Short-term transactions reported on **Form(s) 1099-DA** showing basis **was** reported to the IRS (see **Note** above)
- ☐ (H) Short-term transactions reported on **Form(s) 1099-DA** showing basis **was not** reported to the IRS
- ☐ (I) Short-term digital asset transactions not reported to you on **Form 1099-DA** or **Form 1099-B**

1	(a) Description of property (Example: 100 sh. 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 <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	2523.00 2X LONG VIX FUTURES XXXXREVERSE SPLIT	EFF: 01/15/25	VARIOUS	01/10/25	9,774.	8,389.		1,385.
	156.00 2X LONG VIX FUTURES ETF	01/15/25	01/27/25	4,934.	4,930.			4.
	173.00 2X LONG VIX FUTURES ETF	01/31/25	01/31/25	5,213.	4,796.			417.
	469.00 PROSHARES ULTRASHORT XXXXREVERSE SPLIT	EFF: 06/12/25	01/15/25	02/03/25	4,983.	4,802.		181.
	499.00 PROSHARES ULTRASHORT XXXXREVERSE SPLIT	EFF: 06/12/25	02/04/25	02/06/25	5,231.	5,002.		229.
	357.00 2X LONG VIX FUTURES ETF	VARIOUS	02/24/25	10,952.	10,585.			367.
	259.00 2X BITCOIN STRATEGY ETF	02/25/25	02/25/25	11,199.	10,958.			241.
	356.00 2X LONG VIX FUTURES ETF	02/27/25	02/27/25	11,456.	11,203.			253.
	358.00 2X LONG VIX FUTURES ETF	03/03/25	03/03/25	13,258.	11,449.			1,809.
	297.00 2X BITCOIN STRATEGY ETF	03/05/25	03/05/25	13,373.	13,089.			284.
	319.00 2X LONG VIX FUTURES ETF	03/06/25	03/06/25	13,646.	13,087.			559.

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 1b** (if **Box A** or **Box G** above is checked), **line 2** (if **Box B** or **Box H** above is checked), or **line 3** (if **Box C** or **Box I** above is checked)

104,019.	98,290.		5,729.
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Note: If you checked Box A or Box G 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.

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service**File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.****Go to www.irs.gov/Form8949 for instructions and the latest information.****2025**Attachment
Sequence No. **12A**

Name(s) shown on return

Social security number or taxpayer identification number

Gabriel M Hament

Before you check Box A, B, C, G, H, or I below, see whether you received any Form(s) 1099-B, Form(s) 1099-DA, or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B or Form 1099-DA. They 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 I **Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B and Form(s) 1099-DA showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, C, G, H, or I below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-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.

- ☐ **(A)** Short-term transactions reported on **Form(s) 1099-B** showing basis **was** reported to the IRS (see **Note** above)
- ☐ **(B)** Short-term transactions reported on **Form(s) 1099-B** showing basis **was not** reported to the IRS
- ☐ **(C)** Short-term transactions, other than digital asset transactions, not reported to you on **Form 1099-B** or **Form 1099-DA**
- ☐ **(G)** Short-term transactions reported on **Form(s) 1099-DA** showing basis **was** reported to the IRS (see **Note** above)
- ☐ **(H)** Short-term transactions reported on **Form(s) 1099-DA** showing basis **was not** reported to the IRS
- ☐ **(I)** Short-term digital asset transactions not reported to you on **Form 1099-DA** or **Form 1099-B**

1

(a) Description of property (Example: 100 sh. 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 <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
					(f) Code(s) from instructions	(g) Amount of adjustment	
159.00 2X LONG VIX FUTURES ETF	03/26/25	03/28/25	5,562.	5,003.			559.
271.00 2X LONG VIX FUTURES ETF	03/11/25	04/03/25	14,124.	14,070.			54.
211.00 DIREXION DAILY S&P 500 BULL 3X ETF	04/07/25	04/07/25	21,053.	20,098.			955.
454.00 PROSHARES ULTRASHORT XXXREVERSE SPLIT	EFF: 06/12/25	04/01/25	04/07/25	6,667.	5,605.		1,062.
1006.00 2X LONG VIX FUTURES ETF	10/07/25	10/10/25	12,155.	9,995.			2,160.
2123.00 T REX 2X INVERSE MSTR DAILY TGT ETF	VARIOUS	10/30/25	16,071.	12,134.			3,937.
1637.00 2X LONG VIX FUTURES ETF	11/03/25	11/18/25	20,339.	15,985.			4,354.
701.00 2X BITCOIN STRATEGY ETF	11/21/25	11/24/25	21,570.	20,074.			1,496.

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 1b** (if **Box A** or **Box G** above is checked), **line 2** (if **Box B** or **Box H** above is checked), or **line 3** (if **Box C** or **Box I** above is checked)

117,541. 102,964. 14,577.

Note: If you checked Box A or Box G 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.

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

BAA

REV 03/25/26 Inituit.cg.ctp.sp

Form **8949** (2025) Created 5/5/25

		a Employee's social security number XXXXXX		Payroll organization code 21-60-13-00-000		Intradepartment number 0000002000	
b Employer identification number (EIN) 59 - 6001874		1 Wages, tips, other compensation 72,324.38		2 Federal income tax withheld 7,525.36			
c Employer's name, address, and ZIP code State of Florida Chief Financial Officer 200 E Gaines Street Tallahassee, Florida 32399-0356		3 Social security wages 78,195.77		4 Social security tax withheld 4,848.14			
		5 Medicare wages and tips 78,195.77		6 Medicare tax withheld 1,133.84			
		7 Social security tips		10 Dependent care benefits			
d Control number 11437 01/07		11 Nonqualified plans		12a See instructions for box 12 G 3,515.04			
e Employee's first name, mi, and last name GABRIEL M HAMENT 825 S VILLAGE DR N #204 SAINT PETERSBURG, FL 33716-0000		13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b DD 10,801.69			
		14 Other 125 357.80		12c			
				12d			
				12e			
f Employee's address and ZIP code							
15 State Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		

Form **W-2** WAGE AND TAX STATEMENT **2025**
 Copy B - To Be Filed With Employee's FEDERAL Tax Return
 This information is being furnished to the Internal Revenue Service.

OMB No. 1545-0008
 Department of the Treasury - Internal Revenue Service