

2025 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/29/2026

General Information

Name: Hon Angela Jane Cowden

CONFIDENTIAL

PID 28971

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (10Th)	Elected Constitutional Officer	Circuit Judge

Net Worth

My Net Worth as of December 31, 2025 was \$ 336,153.08.

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 \$ 240,011.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Homestead residence	\$ 375,000.00
Series EE Bond	\$ 1,001.00
TruStage Whole Life Insurance	\$ 10,000.00
MidFlorida Credit Union accounts	\$ 18,061.47
Timeshare Points 300 at \$165 each	\$ 49,500.00
Edward Jones IRA account	\$ 52,594.60

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Chase Visa	PO Box 15123 Wilmington DE 19850	\$ 47,814.14
MidFlorida Credit Union	PO Box 8008 Lakeland FL 33802	\$ 276,471.81
USBank RV loan	PO Box 790179 St. Louis MO 63179	\$ 30,022.48
USBank zero interest loan	PO Box 790179 St. Louis MO 63179	\$ 2,249.00
Citibank Mastercard	PO Box 6744 Sioux Falls SD 57117	\$ 1,327.69
USBank boat loan	PO Box 790179 St. Louis MO 63179	\$ 52,129.87

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.

Angela Jane Cowden

Digitally signed: 06/29/2026

Filed with COE: 06/29/2026

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 ☐ Deceased / / Spouse / /

☐ Other

Your first name and middle initial
ANGELA J

Last name
COWDEN

Your social security number
[REDACTED]

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.
[REDACTED]

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. ☐

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

State
[REDACTED]

ZIP 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

Foreign country name Foreign province/state/county Foreign postal code

Filing Status ☒ Single ☐ Head of household (HOH) ☐ Qualifying surviving spouse (QSS)
Check only one box. ☐ Married filing jointly (even if only one had income) ☐ 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
(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.	(a) ☐ Yes (b) ☐ And in the U.S.	(a) ☐ Yes (b) ☐ And in the U.S.	(a) ☐ Yes (b) ☐ And in the U.S.
(6) Check if	☐ Full-time student ☐ Permanently and totally disabled	☐ Full-time student ☐ Permanently and totally disabled	☐ Full-time student ☐ Permanently and totally disabled	☐ Full-time student ☐ Permanently and totally disabled
(7) Credits	☐ Child tax credit ☐ Credit for other dependents	☐ Child tax credit ☐ Credit for other dependents	☐ Child tax credit ☐ Credit for other dependents	☐ 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																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
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Tax and Credits

11b	Amount from line 11a (adjusted gross income)	11b	192,301
12a	Someone can claim ☐ You as a dependent ☐ Your spouse as a dependent		
b	☐ Spouse itemizes on a separate return c ☐ You were a dual-status alien		
d	You: ☐ Were born before January 2, 1961 ☐ Are blind		
	Spouse: ☐ Was born before January 2, 1961 ☐ Is blind		
e	Standard deduction or itemized deductions (from Schedule A)	12e	15,750
13a	Qualified business income deduction from Form 8995 or Form 8995-A	13a	0
b	Additional deductions from Schedule 1-A, line 38	13b	0
14	Add lines 12e, 13a, and 13b	14	15,750
15	Subtract line 14 from line 11b. If zero or less, enter -0-. This is your taxable income	15	176,551
16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐	16	35,219
17	Amount from Schedule 2, line 3	17	0
18	Add lines 16 and 17	18	35,219
19	Child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3, line 8	20	0
21	Add lines 19 and 20	21	0
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	35,219
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0
24	Add lines 22 and 23. This is your total tax	24	35,219

Standard deduction for—

- Single or Married filing separately, \$15,750
- Married filing jointly or Qualifying surviving spouse, \$31,500
- Head of household, \$23,625
- If you checked a box on line 12a, 12b, 12c, or 12d, see inst.

Payments and Refundable Credits

25	Federal income tax withheld from:		
a	Form(s) W-2	25a	35,399
b	Form(s) 1099	25b	
c	Other forms (see instructions)	25c	
d	Add lines 25a through 25c	25d	35,399
26	2025 estimated tax payments and amount applied from 2024 return	26	
	If you made estimated tax payments with your former spouse in 2025, enter their SSN (see instructions):		
27a	Earned income credit (EIC)	27a	
b	Clergy filing Schedule SE (see instructions)		☐
c	If you do not want to claim the EIC, check here		☐
28	Additional child tax credit (ACTC) from Schedule 8812. If you do not want to claim the ACTC, check here ☐	28	
29	American opportunity credit from Form 8863, line 8	29	0
30	Refundable adoption credit from Form 8839, line 13	30	0
31	Amount from Schedule 3, line 15	31	0
32	Add lines 27a, 28, 29, 30, and 31. These are your total other payments and refundable credits	32	0
33	Add lines 25d, 26, and 32. These are your total payments	33	35,399

Refund

Direct deposit? See instructions.

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	180
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here ☐	35a	180
b	Routing number	c Type: ☒ Checking ☐ Savings	
d	Account number		
36	Amount of line 34 you want applied to your 2026 estimated tax	36	0

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	0
38	Estimated tax penalty (see instructions)	38	0

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	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.		Email address ajcowden@yahoo.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			

Nondeductible IRAs

Attach to 2025 Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form8606 for instructions and the latest information.

Name. If married, file a separate form for each spouse required to file 2025 Form 8606. See instructions.

Your social security number

ANGELA J COWDEN

**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

Note: Except where stated otherwise, "traditional IRA" includes traditional SEP IRAs and traditional SIMPLE IRAs. "Roth IRA" includes Roth SEP IRAs and Roth SIMPLE IRAs.

Part I Nondeductible Contributions to Traditional IRAs and Distributions From Traditional IRAs

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

- You made nondeductible contributions to a traditional IRA for 2025. Nondeductible contributions to a traditional IRA do not include employer contributions made to a SEP IRA pursuant to a SEP arrangement or to a SIMPLE IRA pursuant to a SIMPLE IRA plan.
- You took distributions from a traditional IRA in 2025 **and** you made nondeductible contributions to a traditional IRA in 2025 or an earlier year. For this purpose, "distributions" **does not** include rollovers (but does include certain 2025 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 IRAs to Roth IRAs in 2025 **and** you made nondeductible contributions to a traditional IRA in 2025 or an earlier year.

1	Enter your nondeductible contributions to traditional IRAs for 2025, including those made for 2025 from January 1, 2026, through April 15, 2026. See instructions	1	
2	Enter your total basis in traditional IRAs. See instructions	2	52,595
3	Add lines 1 and 2	3	52,595
In 2025, did you take a distribution from a traditional IRA, or make a Roth 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.			
4	Enter those contributions included on line 1 that were made from January 1, 2026, through April 15, 2026	4	
5	Subtract line 4 from line 3	5	52,595
6	Enter the value of all your traditional IRAs as of December 31, 2025, plus any outstanding rollovers. Subtract certain 2025 retirement plan distribution repayments treated as rollovers, if any. See instructions	6	
7	Enter your distributions from traditional IRAs in 2025. Do not include rollovers (but do include certain 2025 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 IRA; certain returned contributions; or recharacterizations of traditional IRA contributions. See instructions	7	
8	Enter the net amount you converted from traditional IRAs to Roth IRAs in 2025. Also, enter this amount on line 16	8	
9	Add lines 6, 7, and 8	9	0
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	× 0.00000
11	Multiply line 8 by line 10. This is the nontaxable portion of the amount you converted to Roth IRAs. Also, enter this amount on line 17	11	0
12	Multiply line 7 by line 10. This is the nontaxable portion of your distributions that you did not convert to a Roth IRA	12	0
13	Add lines 11 and 12. This is the nontaxable portion of all your distributions	13	0
14	Subtract line 13 from line 3. This is your total basis in traditional IRAs for 2025 and earlier years	14	52,595

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

a Employee's social security number [REDACTED]		Payroll organization code 22-20-10-00-110		Intradepartment number 0000000000									
b Employer identification number (EIN) 59-6001874		1 Wages, tips, other compensation 192,301.02		2 Federal income tax withheld 35,399.28									
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 176,100.00		4 Social security tax withheld 10,918.20									
		5 Medicare wages and tips 198,267.06		6 Medicare tax withheld 2,874.87									
		7 Social security tips		10 Dependent care benefits									
d Control number 015879 01/07		11 Nonqualified plans		12a See instructions for box 12 DD 10,818.37									
e Employee's first name, mi, and last name ANGELA J COWDEN [REDACTED]		13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b									
		14 Other 125 600.00		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**

OMB No. 1545-0046

Department of the Treasury - Internal Revenue Service

Copy B - To Be Filed With Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service.

a Employee's social security number [REDACTED]		Payroll organization code 22-20-10-00-110		Intradepartment number 0000000000									
b Employer identification number (EIN) 59-6001874		1 Wages, tips, other compensation 192,301.02		2 Federal income tax withheld 35,399.28									
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 176,100.00		4 Social security tax withheld 10,918.20									
		5 Medicare wages and tips 198,267.06		6 Medicare tax withheld 2,874.87									
		7 Social security tips		10 Dependent care benefits									
d Control number 015879 01/07		11 Nonqualified plans		12a See instructions for box 12 DD 10,818.37									
e Employee's first name, mi, and last name ANGELA J COWDEN [REDACTED]		13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b									
		14 Other 125 600.00		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**

OMB No. 1545-0046

Department of the Treasury - Internal Revenue Service

Copy C - For EMPLOYEE'S RECORDS

AA527W REV. 06/18/2025

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.