

2025 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 08/31/2026

General Information

Name: Hon Lawrence Vincent Johnston III

CONFIDENTIAL

PID 47959

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Senior Judges	Consent to be Assigned	Senior / Retired Judge

Net Worth

My Net Worth as of December 31, 2025 was \$ 3,991,000.00.

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.

The aggregate value of my household goods and personal effect is \$ 100,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Residence	\$ 500,000.00
Home	\$ 500,000.00
Mortgages	\$ 650,968.00
Stocks, Bonds, Def Comp	\$ 2,530,175.00
Cash	\$ 209,500.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

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

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.

Lawrence Vincent Johnston III

Digitally signed: 08/31/2026

Filed with COE: 08/31/2026

Form 1040

Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

2025

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

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

LAWRENCE V

Last name

JOHNSTON

Your social security number

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

Last name

JOHNSTON

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

Apt. no.

also complete spaces below.

State

ZIP code

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. ☐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

Filing Status

☐ Single

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:☐ Head of household (HOH)☐ Qualifying surviving spouse (QSS)

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

(see instructions)

If more than four dependents, see instructions and check here ☐

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.
(6) Check if	☐ 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

☐ 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	42,500
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	
i Nontaxable combat pay election (see instructions)	1i	
z Add lines 1a through 1h	1z	42,500
2a Tax-exempt interest	2a	
3a Qualified dividends	3a	1,188
c Check if your child's dividends are included in 1 ☐ Line 3a 2 ☐ Line 3b		
4a IRA distributions	4a	
c Check if (see instructions) 1 ☐ Rollover 2 ☐ QCD 3 ☐		
5a Pensions and annuities	5a	313,699
c Check if (see instructions) 1 ☐ Rollover 2 ☐ PSO 3 ☐		
6a Soc. sec. ben.	6a	36,096
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	-3,000
b Check if: ☐ Schedule D not required ☐ Includes child's capital gain or (loss)		
8 Additional income from Schedule 1, line 10	8	0
9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7a, and 8. This is your total income	9	246,007
10 Adjustments to income from Schedule 1, line 26	10	0
11a Subtract line 10 from line 9. This is your adjusted gross income	11a	246,007

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

Form 1040 (2025)

Tax and Credits

- 11b Amount from line 11a (adjusted gross income) **246,007**
- 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)**
- 13a Qualified business income deduction from Form 8995 or Form 8995-A
- b Additional deductions from Schedule 1-A, line 38
- 14 Add lines 12e, 13a, and 13b **33,100**
- 15 Subtract line 14 from line 11b. If zero or less, enter -0-. This is your **taxable income** **212,667**
- 16 **Tax** (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972
- 3 ☐
- 17 Amount from Schedule 2, line 3
- 18 Add lines 16 and 17 **36,627**
- 19 Child tax credit or credit for other dependents from Schedule 8812
- 20 Amount from Schedule 3, line 8
- 21 Add lines 19 and 20
- 22 Subtract line 21 from line 18. If zero or less, enter -0- **36,627**
- 23 Other taxes, including self-employment tax, from Schedule 2, line 21
- 24 Add lines 22 and 23. This is your **total tax** **36,627**

Standard Deduction for -

- Single or Married filing separately, \$15,750
- Married filing jointly or Qualifying surviving spouse, \$31,500
- Head of household, \$23,825
- If you checked a box on line 12a, 12b, 12c, or 12d, see instr.

Payments and Refundable Credits

- 25 Federal income tax withheld from:
- a Form(s) W-2 **25a 6,738**
- b Form(s) 1099 **25b 12,650**
- c Other forms (see instructions) **25c**
- d Add lines 25a through 25c **25d 19,388**
- 26 2025 estimated tax payments and amount applied from 2024 return **26 29,320**
- 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**
- 30 Refundable adoption credit from Form 8839, line 13 **30**
- 31 Amount from Schedule 3, line 15 **31**
- 32 Add lines 27a, 28, 29, 30, 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 48,708**

Refund

- 34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid** **34 12,081**
- 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 2026 estimated tax** **36 12,081**

Direct deposit?
See instructions.

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 **RETIRED JUDGE**

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 _____

Paid Preparer Use Only

Preparer's name **PHYLLIS D. SMITH** Preparer's signature **PHYLLIS D. SMITH** Date **04/01/26** PTIN **P00767232** Check if: ☐ Self-employed

Firm's name **PHYLLIS D. SMITH CPA, P.A.** Phone no. **772-589-2939**

Firm's address **1623 US HIGHWAY 1 STE B1 SEBASTIAN FL 32958** Firm's EIN **59-2508305**

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

2025Attachment
Sequence No. **01**

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

LAWRENCE V &

For 2025, 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). Check if any from Form(s): ☐ 4797 ☐ 4684	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	0
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation. If you repaid a 2025 overpayment (see instructions), check here ☐ and enter amount repaid: _____	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(l) 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	0

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

Schedule 1 (Form 1040) 2025

**SCHEDULE 1-A
(Form 1040)**Department of the Treasury
Internal Revenue Service**Additional Deductions**

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

2025Attachment
Sequence No. **1A**

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

LAWRENCE V

Your social security number

Part I Modified Adjusted Gross Income (MAGI) Amount

1 Enter the amount from Form 1040, 1040-SR, or 1040-NR, line 11b	1	246,007
2a Enter any income from Puerto Rico that you excluded	2a	
b Enter the amount from Form 2555, line 45	2b	
c Enter the amount from Form 2555, line 50	2c	
d Enter the amount from Form 4563, line 15	2d	
e Add lines 2a, 2b, 2c, and 2d	2e	
3 Add lines 1 and 2e	3	246,007

Part II No Tax on Tips

Caution: Fill out Part II only if you received qualified tips. These tips must have been received in an occupation listed at IRS.gov/TippedOccupations. You and/or your spouse who received qualified tips must have a valid social security number to claim the deduction. If married, you must file jointly to claim this deduction. See instructions.

4 Qualified tips received as an employee. If you received tips as an employee with respect to employment with more than one employer, enter -0- on lines 4a and 4b and see the instructions to determine the amount to enter on line 4c. If you received tips as an employee in more than one occupation, see the instructions.			
a Enter qualified tips included on Form W-2, box 7, but see the instructions if Form W-2, box 5 is more than \$176,100 or you received tips that are not subject to social security and Medicare taxes	4a	0	
b Qualified tips included on Form 4137, line 1, row A, column (c). If Form 4137 is not filed, enter -0-	4b	0	
c If you only received qualified tips as an employee with respect to employment with one employer, enter the larger of line 4a or line 4b. Otherwise, see the instructions to determine the amount to enter on line 4c. If you received tips as an employee in more than one occupation, see the instructions			4c
5 Qualified tips received in the course of a trade or business. Qualified tip amount included in Form 1099-NEC, box 1; Form 1099-MISC, box 3; or Form 1099-K, box 1a. Do not enter more than the net profit from the trade or business. If you received qualified tips in the course of more than one trade or business or in more than one occupation, see instructions			5
6 Add lines 4c and 5			6
7 Enter the smaller of the amount on line 6 or \$25,000			7
8 Enter the amount from line 3			8
9 Enter \$150,000 (\$300,000 if married filing jointly)			9
10 Subtract line 9 from line 8. If zero or less, enter the amount from line 7 on line 13			10
11 Divide line 10 by \$1,000. If the resulting number isn't a whole number, decrease the result to the next lower whole number. (For example, decrease 1.5 to 1, and decrease 0.05 to 0.)			11
12 Multiply line 11 by \$100			12
13 Qualified tips deduction. Subtract line 12 from line 7. If zero or less, enter -0-			13

Part III No Tax on Overtime

Caution: Fill out Part III only if you received qualified overtime compensation. You and/or your spouse who received the qualified overtime compensation must have a valid social security number to claim this deduction. If married, you must file jointly to claim this deduction. See instructions.

14a Qualified overtime compensation included in Form W-2, box 1. If you received qualified overtime compensation not reported on Form W-2, box 1, see instructions	14a		
b Qualified overtime compensation included in Form 1099-NEC, box 1, or Form 1099-MISC, box 3 (see instructions)	14b		
c Add lines 14a and 14b			14c
15 Enter the smaller of the amount on line 14c or \$12,500 (\$25,000 if married filing jointly)			15
16 Enter the amount from line 3			16
17 Enter \$150,000 (\$300,000 if married filing jointly)			17
18 Subtract line 17 from line 16. If zero or less, enter the amount from line 15 on line 21			18
19 Divide line 18 by \$1,000. If the resulting number isn't a whole number, decrease the result to the next lower whole number. (For example, decrease 1.5 to 1, and decrease 0.05 to 0.)			19
20 Multiply line 19 by \$100			20
21 Qualified overtime compensation deduction. Subtract line 20 from line 15. If zero or less, enter -0-			21

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

Schedule 1-A (Form 1040) 2025

Part IV No Tax on Car Loan Interest

Caution: Fill out Part IV only if you, or your spouse if married filing jointly, paid or accrued qualified passenger vehicle loan interest (QPVLI). Column (iii) is the total QPVLI paid in 2025 less the amounts reported in column (ii). See instructions.

22 Applicable passenger vehicle (see instructions). If more than two VINs, see instructions.

(i) Vehicle identification number (VIN)		Interest for this loan:	
		(ii) Deducted on Schedule C, Schedule E, or Schedule F	(iii) Schedule 1-A
a			
b			
23	Add lines 22a and 22b, column (iii)	23	
24	Enter the smaller of the amount on line 23 or \$10,000	24	
25	Enter the amount from line 3	25	
26	Enter \$100,000 (\$200,000 if married filing jointly)	26	
27	Subtract line 26 from line 25. If zero or less, enter the amount from line 24 on line 30	27	
28	Divide line 27 by \$1,000. If the resulting number isn't a whole number, increase the result to the next higher whole number. (For example, increase 1.5 to 2, and increase 0.05 to 1.)	28	
29	Multiply line 28 by \$200	29	
30	Qualified passenger vehicle loan interest deduction. Subtract line 29 from line 24. If zero or less, enter -0-	30	

Part V Enhanced Deduction for Seniors

Caution: You and/or your spouse must have a valid social security number. If married, you must file jointly to claim this deduction.

See instructions.

31	Enter the amount from line 3	31	246,007
32	Enter \$75,000 (\$150,000 if married filing jointly)	32	150,000
33	Subtract line 32 from line 31. If zero or less, enter \$6,000 on line 35	33	96,007
34	Multiply line 33 by 6% (0.06)	34	5,760
35	Subtract line 34 from \$6,000. If zero or less, enter -0-	35	240
36a	If you have a valid social security number (see instructions) and were born before January 2, 1961, enter the amount from line 35	36a	240
b	If you are married filing jointly, your spouse has a valid social security number (see instructions), and your spouse was born before January 2, 1961, enter the amount from line 35	36b	
37	Enhanced deduction for seniors. Add lines 36a and 36b	37	240

Part VI Total Additional Deductions

38	Add lines 13, 21, 30, and 37. Enter here and on Form 1040 or 1040-SR, line 13b, or on Form 1040-NR, line 13c	38	240
----	--	----	-----

Schedule 1-A (Form 1040) 2025

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

2025

Attachment
Sequence No. **08**

Name(s) shown on return

Your social security number

LAWRENCE V &

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.

- 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:

VICTORIA A MCKUNE
PO BOX 33155 INDIALANTIC FL 32903
SKARLETT'S LLC
PO BOX 52349 MERRIT ISLAND FL 32954
PERSHING LLC
PNC BANK
WELLS FARGO CLEARING SVCS
PERSHING LLC OID
PNC BANK
TRUIST INVESTMENT SERVICES

Amount

2,031

63,698

263

15

3

10,781

4,154

37

- 2 Add the amounts on line 1

80,982

- 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

80,982

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.

- 5 List name of payer:
WELLS FARGO CLEARING SERVICES
TRUIST INVESTMENT SERVICES

2,343

1,188

- 6 Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b

3,531

Note: If line 6 is over \$1,500, you must complete Part III.

Part III

Foreign Accounts and Trusts

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 2025, 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

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.

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

- 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 2025, 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

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

Schedule B (Form 1040) 2025

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

2025

Attachment
Sequence No. 12

Name(s) shown on return

LAWRENCE V

Your social security number

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				
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 0

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	260,122	270,546	0	-10,424
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	4,500	0	0	4,500
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 -5,924

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

Schedule D (Form 1040) 2025

LAWRENCE V & LISA B JOHNSTON

Schedule D (Form 1040) 2025

Page **2****Part III Summary**

16 Combine lines 7 and 15 and enter the result	16	-5,924
• 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) Note: When figuring which amount is smaller, treat both amounts as positive numbers.	21	(3,000)
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.		

Schedule D (Form 1040) 2025

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

Social security number or taxpayer identification number

LAWRENCE V

Before you check Box D, E, F, J, K, or L 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 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 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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You **must** check Box D, E, F, J, K, or L 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 was not reported to the IRS
- ☐ (F) Long-term transactions, other than digital asset transactions, not reported to you on Form 1099-B or Form 1099-DA
- ☐ (J) Long-term transactions reported on Form(s) 1099-DA showing basis was reported to the IRS (see Note above)
- ☐ (K) Long-term transactions reported on Form(s) 1099-DA showing basis was not reported to the IRS
- ☐ (L) Long-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 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	
	244,000.000 SH HSBC BK	01/26/24	04/30/25	248,880	259,396			-10,516
	98.000 SH RIGEL PHARMACEUTICAL S INC COM	06/09/21	08/05/25	2,173	4,028			-1,855
	430.000 SH SOFI TECHNOLOGIES INC COM	VARIOUS	08/05/25	9,069	7,122			1,947
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 or Box J above is checked), line 9 (if Box E or Box K (if Box E above is checked), or line 10 (if Box F or Box L above is checked)				260,122	270,546		0	-10,424

Note: If you checked Box D or Box J 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

Social security number or taxpayer identification number

LAWRENCE V

Before you check Box D, [REDACTED] any Form(s) 1099-B, Form(s) [REDACTED] 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 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 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 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, F, J, K, or L 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 was not reported to the IRS
- ☒ (F) Long-term transactions, other than digital asset transactions, not reported to you on Form 1099-B or Form 1099-DA
- ☐ (J) Long-term transactions reported on Form(s) 1099-DA showing basis was reported to the IRS (see Note above)
- ☐ (K) Long-term transactions reported on Form(s) 1099-DA showing basis was not reported to the IRS
- ☐ (L) Long-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 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	
	LT GAIN ON EXCESS DISTRIBUTIONS			4,500	0			4,500
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 or Box J above is checked), line 9 (if Box E or Box K (if Box E above is checked), or line 10 (if Box F or Box L above is checked)			4,500	0		0	4,500

Note: If you checked Box D or Box J 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.

Form **1040****Tax Return Reconciliation Worksheet, Page 2****2025**Name **LAWRENCE V**

Tp TIN

Tax and Credits
(Schedules 2, 3)**Standard Deduction for—**

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:

Single or Married filing separately, \$15,750

Married filing jointly or Qualifying widow(er), \$31,500

Head of household, \$23,625

38	Amount from line 37 (adjusted gross income)	38	246,007
39a	Check ☒ You were born before January 2, 1961, ☐ Blind. ☐ Spouse was born before January 2, 1961, ☐ Blind. Total boxes checked 1	39a	1
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ☐	39b	
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	33,100
40b		40b	
41	Subtract line 40 and 40b from line 38	41	212,907
42	Qualified business income deduction (see instructions) Sch 1-A 240	42	
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	212,667
44	Tax (see instr.). Check if any from: a ☐ Form(s) 9814 b ☐ Form 4972 c ☐	44	36,627
45	Alternative minimum tax (see instructions). Attach Form 6251	45	
46	Additions to tax (Excess advance premium tax credit repayment and clean vehicle repayment)	46	
47	Add lines 44, 45, and 46	47	36,627
48	Foreign tax credit. Attach Form 1116 if required	48	
49	Credit for child and dependent care expenses. Attach Form 2441	49	
50	Education credits from Form 8863, line 19	50	
51	Retirement savings contributions credit. Attach Form 8880	51	
52	Child tax credit/credit for other dependents	52	
53	Residential energy credits. Attach Form 5695	53	
54	Other credits from Form: a ☐ 3800 b ☐ 8801 c ☐	54	
55	Add lines 48 through 54. These are your total credits	55	
56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	36,627
57	Self-employment tax. Attach Schedule SE	57	
58	Unreported social security and Medicare tax from Form: a ☐ 4137 b ☐ 8919	58	
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
60a	Household employment taxes from Schedule H	60a	
b	Reserved for future use	60b	
61	Taxes from: a ☐ Form 9959 b ☐ Form 8960 c ☐ Instructions, enter code(s)	61	
62	Section 965 net tax liability installment from Form 965-A	62	
63	Add lines 56 through 61. This is your total tax	63	36,627
64	Federal income tax withheld from:		
a	Form(s) W-2	64a	6,738
b	Form(s) 1099	64b	12,650
c	Other forms	64c	
65	2025 estimated tax payments and amount applied from 2024 return	65	29,320
66	Earned income credit (EIC)	66	
67	Additional child tax credit. Attach Schedule 8812	67	
68	American opportunity credit from Form 8863, line 8	68	
69	Recovery rebate credit	69	
70	Net premium tax credit. Attach Form 8962	70	
71	Amount paid with request for extension to file	71	
72	Excess social security and tier 1 RRTA tax withheld	72	
73	Credit for federal tax on fuels. Attach Form 4136	73	
74	Other payments and refundable credits	74	
75	Total pymts. Add lines 64 - 74.	75	48,708

Refund	76	If line 75 is more than line 63, subtract line 63 from line 75. This is the amount you overpaid	76	12,081
	77a	Amount of line 76 you want refunded to you. If Form 8888 is attached, check here ☐	77a	
	b	Routing number	c	Type: ☐ Checking ☐ Savings
	d	Account number		
	78	Amount of line 76 you want applied to your 2026 estimated tax	78	12,081

Amount You Owe	79	Amount you owe. Subtract line 75 from line 63. For details on how to pay, see instructions	79	
	80	Estimated tax penalty (see instructions)	80	

Int/Pen	Date filed	Int	Fail to file	Fail to pay	Total
Third Party Designee	Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ Yes. Complete below. ☐ No. Personal identification no. (PIN) ☐				
	Designee's Name				Phone no.

Other Info	Taxpayer Daytime phone number	Taxpayer: Occupation RETIRED JUDGE	IRS Identity Protection PIN
		Spouse: Occupation	IRS Identity Protection PIN
	☐ Taxpayer ☐ Spouse	Email address	

Form **1040****Capital Loss Carryover Worksheets****2025**

Name

LAWRENCE V

Taxpayer Identification Number

2025 to 2026 Capital Loss Carryover Worksheet

Use this worksheet to figure your capital loss carryovers from 2025 to 2026 if Schedule D, Line 21, is a loss and (a) that loss is a smaller loss than the loss on Schedule D, line 16, or (b) Form 1040, line 15, is less than zero. Otherwise, you do not have any carryovers.

1. Enter the amount from Form 1040, line 15. If a loss, enclose the amount in parentheses	1.	<u>212,667</u>
2. Enter the loss from Schedule D, line 21, as a positive amount	2.	<u>3,000</u>
3. Combine lines 1 and 2. If zero or less, enter -0-	3.	<u>215,667</u>
4. Enter the smaller of line 2 or line 3	4.	<u>3,000</u>
If line 7 of Schedule D is a loss, go to line 5; otherwise, enter -0- on line 5 and go to line 9.		
5. Enter the loss from Schedule D, line 7, as a positive amount	5.	<u>0</u>
6. Enter any gain from Schedule D, line 15. If a loss, enter -0-	6.	
7. Add lines 4 and 6	7.	
8. Short-term capital loss carryover to 2026. Subtract line 7 from line 5. If zero or less, enter -0-	8.	
If line 15 of Schedule D is a loss, go to line 9; otherwise, skip lines 9 through 13.		
9. Enter the loss from Schedule D, line 15, as a positive amount	9.	<u>5,924</u>
10. Enter any gain from Schedule D, line 7	10.	
11. Subtract line 5 from line 4. If zero or less, enter -0-	11.	<u>3,000</u>
12. Add lines 10 and 11	12.	<u>3,000</u>
13. Long-term capital loss carryover to 2026. Subtract line 12 from line 9. If zero or less, enter -0-	13.	<u>2,924</u>

2025 to 2026 Capital Loss Carryover Worksheet, AMT

Use this worksheet to figure AMT capital loss carryovers from 2025 to 2026 if AMT Schedule D, Line 21, is a loss and (a) that loss is a smaller loss than the loss on AMT Schedule D, line 16 or (b) Form 6251, line 4 is a loss. Otherwise, you do not have any carryovers.

1. Enter the amount from Form 6251, line 4. If a loss, enclose the amount in parentheses	1.	<u>246,007</u>
2. Enter the loss from AMT Schedule D, line 21 as a positive amount	2.	<u>3,000</u>
3. Combine lines 1 and 2. If zero or less, enter -0-	3.	<u>249,007</u>
4. Enter the smaller of line 2 or line 3	4.	<u>3,000</u>
If line 7 of AMT Schedule D is a loss, go to line 5; otherwise, enter -0- on line 5 and go to line 9.		
5. Enter the loss from AMT Schedule D, line 7 as a positive amount	5.	
6. Enter the gain, if any, from AMT Schedule D, line 15	6.	
7. Add lines 4 and 6	7.	
8. AMT Short-term capital loss carryover to 2026. Subtract line 7 from line 5. If zero or less, enter -0-	8.	
If line 15 of AMT Schedule D is a loss, go to line 9; otherwise, skip lines 9 through 13.		
9. Enter the loss from AMT Schedule D, line 15, as a positive amount	9.	<u>5,949</u>
10. Enter the gain, if any, from AMT Schedule D, line 7	10.	<u>25</u>
11. Subtract line 5 from line 4. If zero or less, enter -0-	11.	<u>3,000</u>
12. Add lines 10 and 11	12.	<u>3,025</u>
13. AMT Long-term capital loss carryover to 2026. Subtract line 12 from line 9. If zero or less, enter -0-	13.	<u>2,924</u>

Form 982 Reduction of Capital Loss Carryovers to 2026

	Regular	AMT
1. Subtract 2025 to 2026 Capital Loss Carryover Worksheet, line 7 from line 5	1.	
2. Form 982 line 9 reduction of tax attributes applied to short-term capital loss carryover	2.	
3. Adjusted Short-term capital loss carryover to 2026. Subtract line 2 from line 1. Enter this amount on line 8 in the 2025 to 2026 Capital Loss Carryover Worksheet	3.	
4. Subtract 2025 to 2026 Capital Loss Carryover Worksheet, line 12 from line 9	4.	
5. Form 982 line 9 reduction of tax attributes applied to long-term capital loss carryover	5.	
6. Adjusted Long-term capital loss carryover to 2026. Subtract line 5 from line 4. Enter this amount on line 13 in the 2025 to 2026 Capital Loss Carryover Worksheet	6.	

Form **1040****Standard Deduction & Dependent MAGI Worksheets****2025**

Name

LAWRENCE V

Taxpayer Identification Number

Standard Deduction Worksheet

1. Enter the amount shown below for your filing status.

- Single or Married filing separately - \$15,750
- Married filing jointly or qualifying widow(er) - \$31,500
- Head of household - \$23,625

1. 31,500

2. Can you (or your spouse if married, filing jointly) be claimed as a dependent?

- ☒ No. Skip line 3; enter the amount from line 1 on line 4.
☐ Yes. Go to line 3.

3. Is your
- earned income**
- more than \$900?

- ☐ Yes. Add \$450 to your earned income. Enter the total.
☐ No. Enter \$1,350

3. _____

4. Enter the
- smaller**
- of line 1 or line 3. If under 65 and not blind, continue to line 6. Otherwise, go to line 5.

4. 31,500

5. Check if:
- ☒
- You were 65 or older,
- ☐
- Blind;
- ☐
- Spouse was 65 or older,
- ☐
- Blind. Total boxes checked
- 1**

If 65 or older or blind, multiply \$1,600 (\$2,000 if single or head of household) by the number in the box above

5. 1,600

6. Add lines 4 and 5. Enter the total here and on Form 1040 or 1040-SR, line 12

6. 33,100**Dependent Modified Adjusted Gross Income Worksheet**

1. Are you required to file a tax return?

- ☐ No. Do not include Dependent's modified adjusted gross income in Claiming Taxpayer's household income.
☐ Yes. Include Modified Adjusted Gross Income in claiming taxpayer's household income.

- 2.
- Adjusted Gross Income.**
- Enter the amount from Form 1040, Line 11

2. _____

3. Enter tax-exempt interest from Form 1040, line 2a

3. _____

4. Enter any amounts from your Form 2555, lines 45 and 50

4. _____

- 5.
- Subtotal.**
- Combine lines 2 through 4

5. _____

6. Enter the total Social Security benefits from Form 1040, line 6a

6. _____

7. Enter the taxable Social Security benefits from Form 1040, line 6b

7. _____

8. Nontaxable Social Security benefits. Subtract line 7 from line 6

8. _____

- 9.
- Dependent Modified Adjusted Gross Income for Claiming Taxpayer's Form 8962.**

Add lines 5 and 8

9. _____

Performance Select Statement

PNC Bank



PO Box 609
Pittsburgh, PA 15230-9738

For the period 12/31/2025 to 01/29/2026

LAWRENCE V JOHNSTON III
JOHNSTON

Primary account number: [REDACTED]

Page 1 of 2

Number of enclosures: 0

- For 24-hour banking, and transaction or interest rate information, sign-on to
- PNC Bank Online Banking at pnc.com

For customer service call 1-888-762-2265

PNC accepts Telecommunications Relay Service (TRS) calls.

Para servicio en español, 1-866-465-2762

Moving? Please contact us at 1-888-762-2265

- PO Box 609
Pittsburgh, PA 15230-9738
- Visit us at pnc.com

PNC accepts Telecommunications Relay Service (TRS) calls.

Performance Select Interest Checking Account Summary

Account number: [REDACTED]

LAWRENCE V JOHNSTON III

Overdraft Protection has not been established for this account.

Please contact us if you would like to set up this service.

Overdraft Coverage

- Your account is currently

Opted-Out.

Balance Summary

Beginning balance	Deposits and other additions	Checks and other deductions	Ending balance
151,791.39	13,673.80	22,659.30	142,805.89
		Average monthly balance	Charges and fees
		147,092.21	.00

Transaction Summary

Checks paid/withdrawals	Debit Card POS signed transactions	Debit Card/Bankcard POS PIN transactions
1	0	0
Total ATM transactions	PNC Bank ATM transactions	Other Bank ATM transactions
0	0	0

Interest Summary

Annual Percentage Yield Earned (APYE)	Number of days in interest period	Average collected balance for APYE	Interest Earned this period
0.01%	30	147,085.11	1.21

As of 01/29, a total of \$1.21 in interest was paid this year.

Activity Detail

Deposits and Other Additions

Date	Amount	Description
12/31	4,354.71	Direct Deposit - Retirement
		STATE OF FLORIDA [REDACTED]
01/12	6,210.75	Mobile Deposit Reference No. [REDACTED]

There were 5 Deposits and Other Additions totaling \$13,673.80.

Deposits and Other Additions continued on next page

Performance Select Statement

For 24-hour information, sign on to PNC Bank Online Banking
on pnc.com

Account Number: [REDACTED] - continued

For the period 12/31/2025 to 01/29/2026

LAWRENCE V JOHNSTON III

Primary account number: XX-XXX [REDACTED]

Page 2 of 2

Deposits and Other Additions

I- continued

Date	Amount	Description
01/12	313.63	Mobile Deposit Reference No. [REDACTED]
01/21	2,793.50	Direct Deposit - Xxsoc Sec SSA TREAS [REDACTED]
01/29	1.21	Interest Payment

Online and Electronic Banking Deductions

There were 12 Online or Electronic
Banking Deductions totaling
\$17,659.30.

Date	Amount	Description
12/31	3,684.46	Web Pmt- Cpc-Client State Farm Ro 08 19 F [REDACTED]
01/05	1,835.64	Web Pmt- Cpc-Client State Farm Ro 08 19 A [REDACTED]
01/05	709.01	Web Pmt- Cpc-Client State Farm Ro 08 19 A [REDACTED]
01/05	390.43	Web Pmt- Cpc-Client State Farm Ro 08 19 A [REDACTED]
01/08	45.70	Web Pmt- Syf Paymnt Lowes [REDACTED]
01/14	300.00	Online Transfer To [REDACTED]
01/16	193.58	Web Pmt- Web Pmts Hirequest Direct Q72Lqr
01/22	7,330.00	Payment,E-Check Payment US Treasury IRS [REDACTED]
01/23	150.00	Online Transfer [REDACTED]
01/26	2,167.91	Web Pmt- Epay Chase Credit Crd [REDACTED]
01/26	850.56	Web Pmt- Payment Citi Card Online [REDACTED]
01/26	2.01	Web Pmt- Epay Chase Credit Crd [REDACTED]

Other Deductions

There was 1 Other Deduction
totaling \$5,000.00.

Date	Amount	Description
12/31	5,000.00	Withdrawal Reference No. [REDACTED]

Daily Balance Detail

Date	Balance	Date	Balance	Date	Balance	Date	Balance
12/31	147,461.64	01/12	151,005.24	01/21	153,305.16	01/26	142,804.68
01/05	144,526.56	01/14	150,705.24	01/22	145,975.16	01/29	142,805.89
01/08	144,480.86	01/16	150,511.66	01/23	145,825.16		

LAWRENCE V. JOHNSTON

Please review your statement carefully. Corrections may not be accepted more than 45 days after the closing date of the statement.

Account statement
Account number: [REDACTED] Plan(s): [REDACTED]
Dates: 1/1/2024 - 3/31/2024

Balance and performance

Total account balance **\$413,312.82**

Personal rate of return

	Quarterly	1-year
457(b) Plan	0.70%	3.05%

Personal rate of return is an estimate for your account. For the period shown, the calculation considers deposits, withdrawals and performance of the investments (net of fees) in your core account. Past performance is not a guarantee of future success.

Quarterly activity

Previous quarter ending balance	\$410,459.61
Contributions	\$0.00
Rollovers/Transfers In	\$0.00
Dividends*	\$0.00
Investment gain/loss and interest	\$2,937.75
Fees/Charges	-\$84.54
Withdrawals/Transfers Out	\$0.00
Current quarter ending balance	\$413,312.82

* May include dividends, fund reimbursements and/or capital gains

Current investments by asset class

This chart shows how the money in your account is divided among the different asset classes.

Note: Due to rounding, percentages may not equal 100%.



■ Short term

100%

Balance history



Account balances are rounded to the nearest dollar and are the balances at the time your original statement was produced.

April is Financial Literacy Month

We care passionately about helping you plan for a secure retirement. For Financial Literacy Month (April) and America Saves Week (April 8-12) we have created resources to help you get into the spirit and boost your knowledge. This is a great time to acknowledge that we all have room to grow when it comes to financial matters - so let's take advantage of this special month and commit to learning more.

Visit www.nrsflorida.com to learn more.

NRQ-1517FL (03/24)



Lincoln
Financial Group®

Lincoln Financial Group
PO Box 7876
Fort Wayne, IN 46801-7876

Your Retirement Account

01/01/2024 - 03/31/2024

Lincoln Alliance® program

Account Information

Name: LAWRENCE V JOHNSTON
Company Name: FLORIDA INSTITUTE OF TECHNOLOGY
Plan Name: RETIREMENT PLAN
Plan ID: FIT-001

Current Contribution Amounts

(as of 04/02/2024)

Pretax: 100.00%

Your Personal Rate of Return* (as of 03/31/2024)

3-Month	YTD	1-Year	3-Year	5-Year
2.68 %	2.68%	10.13%	2.84%	N/A

*Personalized rate of return represents the individual performance of the investment(s) you have selected for your portfolio. The calculation includes activity in your account (such as contributions, exchanges among investment options, etc.) using daily share price in effect when the activity occurred. Other performance calculations shown on this statement are different. Because the timing of your investments and withdrawals will vary, your personal investment results will generally not be the same as the investment returns quoted for the individual funds you have selected. Quoted performance data represents past performance. Past performance does not guarantee nor predict future performance. Current performance may be lower or higher than the performance data quoted.

Total Account Value (as of 03/31/2024)

\$28,801.07

Account Summary

Balance (as of 01/01/2024)	\$27,035.76
Contributions	
Total Employee	\$1,034.32
Investment Earnings	665.77
Dividends	76.52
Fees and Expenses	-\$11.30
Balance (as of 03/31/2024)	\$28,801.07
Total Account Value	\$28,801.07
Vested Balance	\$28,801.07

Contact Information



Customer Service:

Our customer service representatives are available at
800-234-3500, Monday - Friday, from 8:00 am to 8:00 pm ET.



Online Service:

For your updated detailed account information, fund
performance and to access education/planning tools, visit
LincolnFinancial.com.



Representative:

Home Office Agent

March 1, 2024 - March 31, 2024
Account Number [REDACTED]

LAWRENCE V JOHNSTON III
TOD DTD 03/08/2020

Portfolio at a Glance

	This Period	Year-to-Date
BEGINNING ACCOUNT VALUE	\$511,803.13	\$250,316.72
Deposits (Cash & Securities)	544.99	283,019.98
Dividends, Interest and Other Income	49.81	235.03
Other Transactions	-1.50	-1.50
Net Change in Portfolio¹	11,280.50	-9,893.30
ENDING ACCOUNT VALUE	\$523,676.93	\$523,676.93

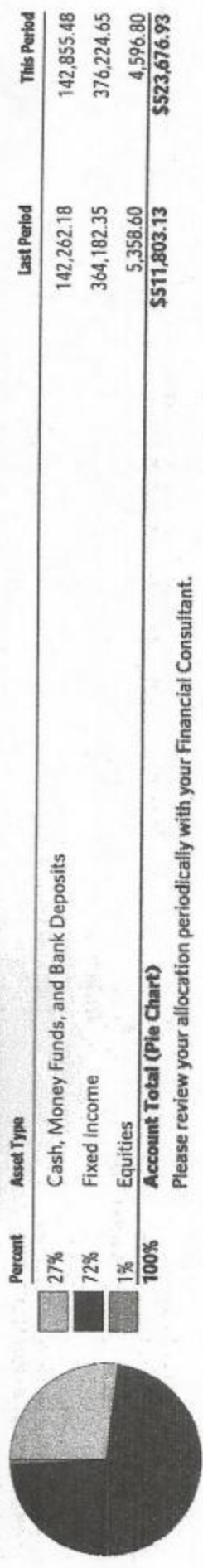
¹ Net Change in Portfolio is the difference between the ending account value and beginning account value after activity.

Your Financial Consultant:
ASHTON GREEN
(770) 982-0012

The Bank Deposits in your account are not eligible for SIPC coverage.

Bank Deposit Sweep Products automatically deposit the available balance in your account into Federal Deposit Insurance Corporation (FDIC) member insured depository institutions (IDIs), where swept balances receive pass through FDIC insurance coverage through those IDIs. Balances in Bank Deposit Sweep Products are not considered securities and are not eligible for coverage by the Securities Investor Protection Corporation (SIPC).

Asset Summary



Please review your allocation periodically with your Financial Consultant.



COMBINED SNAPSHOT

LARRY JOHNSTON

March 1, 2024 - March 31, 2024
PRIMARY ACCOUNT NUMBER

Your Financial Advisor

PFLEUGER/HALL
Phone: 321-255-2330

Please visit us at: www.wellsfargoadvisors.com

What's inside your Combined Snapshot ...

ACCOUNT NAME	STATEMENT ENCLOSED	ACCOUNT NUMBER	TAX STATUS	PREVIOUS VALUE ON FEB 29	NET CHANGE	CURRENT VALUE ON MAR 31
LAWRENCE V JOHNSTON TOD	Yes		Taxable	559,346.96	2,732.84	562,079.80
LAWRENCE V JOHNSTON WFCS CUSTODIAN ROTH IRA	Yes		Retirement	21,388.78	1,643.08	23,031.86
LAWRENCE V JOHNSTON WFCS CUSTODIAN TRAD IRA	Yes		Retirement	32,798.05	455.62	33,253.67
Total				\$613,533.79	\$4,831.54	\$618,365.33

If an account is closed or de-linked from a statement linked relationship, then the account's Year to Date values will no longer display as part of the Combined Snapshot values.
^ IMPORTANT NOTE: Please review your current open trade orders listed in the Open orders section of your statement(s).

ENV# CEBQCPVWBBHDNW_BBBBB
TRUIST INVESTMENT SERVICES INC
P.O. BOX 596
RICHMOND, VA 23286

TRUIST

Investment Services Group
Truist Investment Services, Inc.
Securities, brokerage accounts and insurance (including annuities) are offered by Truist Investment Services, Inc., a
SEC registered broker-dealer, member FINRA, SIPC, and a licensed insurance agency. Investment advisory
services are offered by Truist Advisory Services, Inc., a SEC registered investment adviser.

LAWRENCE V JOHNSTON
TOD BENE ON FILE

STATEMENT FOR THE PERIOD MARCH 1, 2024 TO MARCH 31, 2024

LAWRENCE V JOHNSTON - Individual TOD
Account Number

BEGINNING VALUE OF YOUR PORTFOLIO	
Total Value of Your Account	\$690,102.55
Total Value of Insurance and Annuities (Not held by NIS)	\$25,638.11
TOTAL VALUE OF YOUR PORTFOLIO	\$665,606.97
Information for assets not held by NIS is provided by outside parties and is included for informational purposes only. Refer to the Holdings Section in this statement for more information.	
	\$691,245.08

YOUR FINANCIAL ADVISOR IS:
PHILLIP MARGY
RR#: 7EV
For questions about your accounts:
Local: 321 426 9640

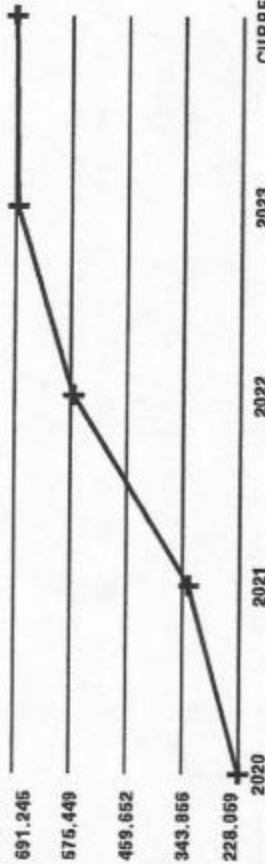
FOR YOUR INFORMATION

Visit www.truist.com/wealth/tis-disclosure for Truist Investment Services clear,
easy-to-understand information related to its products, accounts, and services, including
disclosures relating to the SEC Regulation Best Interest and Volatile Markets.

Should you have any questions about your account statement, please contact your representative
at the phone number above or call 1-866-486-3215.

CHANGE IN VALUE OF YOUR PORTFOLIO

\$ thousands



Change In Value Of Your Portfolio information can be found in Miscellaneous Footnotes at the end of this
statement.

Truist Investment Services, Inc.

Account carried with National Financial Services LLC, Member
NYSE, SIPC

P



Lincoln
Financial Group

Lincoln Financial Group
PO Box 7876
Fort Wayne, IN 46801-7876

Account Confirmation

03/22/2024

LAWRENCE V JOHNSTON

Florida Institute Of Technology
150 West University Blvd.
Melbourne FL 32901

Retirement Plan



Plan ID: FIT-001

Representative: HOME OFFICE AGENT
1301 S HARRISON ST
FORT WAYNE IN



Customer Service:

Our customer service representatives are
available at 800-234-3500 from
8:00 a.m. to 8:00 p.m. Eastern.



Online Service: LincolnFinancial.com

Important Information

This confirmation has been generated as a result of an automated change, such as account/model rebalancing initiated by you or your plan. Please review this confirmation carefully and call our Customer Contact Center if you have any questions.

Your plan rebalances: QUARTERLY

Your next scheduled rebalance date is: 06/23/2024

Investment mix: RETIREMENT INCOME DI

Financial Activity

Effective Date	Transaction Description	Dollar Amount	Unit Value	Units This Transaction	Total Units Owned	Dollar Amount Market Value
	Baird Core Plus Bond					
	Beginning Balance		\$10.0400		656.3423	\$6,589.68
03/22/2024	Reallocated Oa Purchase	\$85.00	\$10.0700	8.4409		
03/22/2024	Reallocated Oa Purchase	\$27.52	\$10.0700	2.7329		
03/22/2024	Reallocated Oa Purchase	\$5.26	\$10.0700	0.5223		
03/22/2024	Reallocated Oa Purchase	\$10.93	\$10.0700	1.0854		
03/22/2024	Reallocated Oa Purchase	\$12.42	\$10.0700	1.2334		

Affiliates of Lincoln National Corporation include, but are not limited to, The Lincoln National Life Insurance Company, Lincoln Life & Annuity Company of New York, and Lincoln Retirement Services Company, LLC, herein separately and collectively referred to as "Lincoln". Lincoln Financial Group is the marketing name for Lincoln National Corporation and its affiliates. Affiliates are separately responsible for their own financial and contractual obligations.

PAD-2082040-040918 LAP-DSTCF-CPY001



Advisors

SNAPSHOT

LAWRENCE V JOHNSTON
WFCS CUSTODIAN TRAD IRA

Progress summary

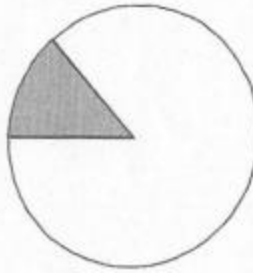
opening value
cash deposited
securities deposited
cash withdrawn
securities withdrawn
change in value

THIS PERIOD	THIS YEAR
\$33,926.15	\$36,469.14
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
2,659.33	116.34
\$36,585.48	\$36,585.48

Closing value

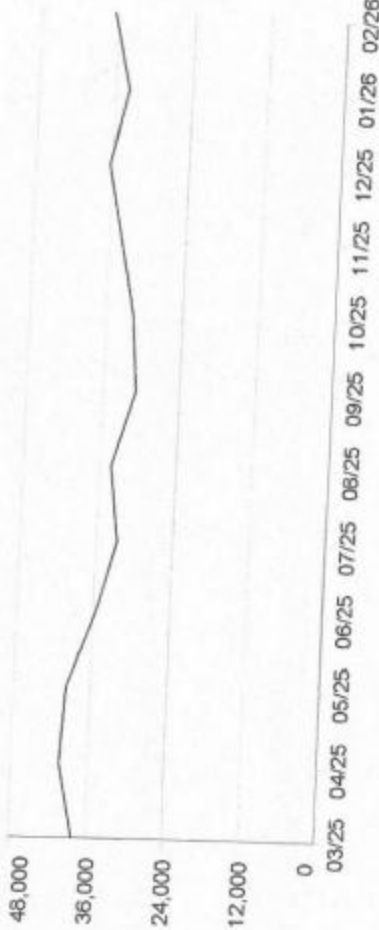
Portfolio summary

CURRENT



ASSETS	ASSET TYPE	PREVIOUS VALUE ON JAN 31	%	VALUE ON FEB 28	%	ESTIMATED ANN. INCOME
	Cash and sweep balances	4,768.31	14.05	4,797.84	13.11	5
	Stocks, options & ETFs	29,157.84	85.95	31,787.64	86.89	117
	Fixed income securities	0.00	0.00	0.00	0.00	0
	Mutual funds	0.00	0.00	0.00	0.00	0
	Asset value	\$33,926.15	100%	\$36,585.48	100%	\$122

Value over time



FEBRUARY 1, 2026 - FEBRUARY 28, 2026
ACCOUNT NUMBER [REDACTED]

Opening value of cash and sweep balances

	THIS PERIOD	THIS YEAR
Income and distributions	\$4,768.31	
Net additions to cash	29.53	29.94
Net subtractions from cash	\$29.53	\$29.94
Closing value of cash and sweep balances	\$0.00	\$0.00
	\$4,797.84	

Money market/sweep funds

	THIS PERIOD	THIS YEAR
Dividends and short term capital gains	0.37	0.78
Total income	29.16	29.16
	\$29.53	\$29.94

* Certain distributions made in the current year are reported as prior year income according to IRS regulations. This may cause a difference between Cash Flow and Income Summary totals.



Advisors

SNAPSHOT

LAWRENCE V JOHNSTON
WFCS CUSTODIAN TRAD IRA

FEBRUARY 1, 2026 - FEBRUARY 28, 2026
ACCOUNT NUMBER [REDACTED]

Retirement summary

IRA Plan Current Value \$36,585.48

A portion of these assets may not be covered by SIPC.

CERTAIN INHERITED IRAS THAT ARE SUBJECT TO THE 10-YEAR RULE MAY BE SUBJECT TO REQUIRED MINIMUM DISTRIBUTIONS (RMD) THROUGHOUT THE 10 YEARS. LEARN ABOUT THE RMD RULES FOR INHERITED IRAS BY CONTACTING YOUR FINANCIAL ADVISOR.

The Required Minimum Distribution (RMD) amount displayed is recalculated each year and may yield a different result. In accordance with IRS instructions, we will report to the IRS if you are required to receive an RMD for that calendar year. The RMD provided below is estimated based on the information we have on file. You are ultimately responsible for the proper calculation and timely removal of the correct required minimum distribution. Please contact us if you need assistance calculating your RMD or explanation of the figures below.

ACCOUNT INFORMATION

Account Holder Birthdate: 06/12/47
Attained Age as of 12/31/26: 79
Required Minimum Distribution for 2026: \$1,728.39
RMD Deadline for 2026: 12/31/2026

Your Required Minimum Distribution for 2026 has not been satisfied for this IRA. If this account has a scheduled distribution, this status will be updated in the month when the distribution is satisfied. If you have multiple IRA accounts, you may have fulfilled your RMD requirement in another IRA.

RETIREMENT TRANSACTIONS

CONTRIBUTION SUMMARY	AMOUNT
Contributions	\$0.00
2026 FOR 2026	
2026 DISTRIBUTION SUMMARY	AMOUNT
Gross Distributions	\$0.00
2025 DISTRIBUTION SUMMARY	AMOUNT
Gross Distributions	-\$2,035.76

LAWRENCE V JOHNSTON
WFCS CUSTODIAN TRAD IRA

FEBRUARY 1, 2026 - FEBRUARY 28, 2026
ACCOUNT NUMBER: [REDACTED]

Your Financial Advisor

PFLEUGER/HALL
Phone: 321-255-2330

Account profile

Full account name:

Account type:

Brokerage account number:

Tax status:

Investment objective/Risk tolerance:*

Time horizon:*

Liquidity needs:*

Cost Basis Election:

Sweep option:

*For more information, please visit us at: www.wellsfargoadvisors.com/disclosures

LAWRENCE V JOHNSTON
WFCS CUSTODIAN TRAD IRA
Individual Retirement Account

Retirement

CONSERVATIVE GROWTH & INCOME
LONG TERM (10+ YEARS)
NONE

First In, First out

BANK DEPOSIT SWEEP

Please visit us at: www.wellsfargoadvisors.com

For your consideration

Go paperless. Accessing your account documents online is easy, secure, and costs nothing. Sign on at wellsfargoadvisors.com, go to **Portfolio** and select **Statements & Docs**, and then click on the **Delivery Preferences** link. Choose **Paperless - All Docs** or view your Delivery Settings details to select specific account documents for paperless delivery. If you do not have a Username and Password, visit wellsfargoadvisors.com/signup or call 1-877-879-2495 for enrollment assistance.

Document delivery status

Statements:
Trade confirmations:
Tax documents:
Shareholder communications:
Other documents:

Paper	Electronic
X	
X	
X	
X	
X	

alances

we the right, in the course of normal business operations, to withdraw balances in the Bank Deposit Sweep Program or redeem shares of the money market sweep, subject to any open commitments in any of your accounts and have the proceeds returned to your accounts or remitted to you. The money market reserve the right to require one or more day's prior notice before permitting withdrawals.

nsists of monies generally first held at Wells Fargo Bank, N.A. and (if amounts exceed \$250,000) at a Wells Fargo affiliated bank as described in the Bank Consists of monies held at Wells Fargo Bank N.A., as described in the Brokered Liquid Deposit Disclosure.

it Sweep Program and Brokered Liquid Deposit are not covered by SIPC, but are instead eligible for FDIC insurance of up to \$250,000 per depositor, per with FDIC rules. Insurance is subject to FDIC rules, including for pass-through coverage, which require certain conditions to be satisfied for deposit, per apply. Wells Fargo Clearing Services, LLC is not an FDIC-insured depository institution, FDIC deposit insurance only protects against the failure of an insured banking products and services provided by affiliated banks and Wells Fargo Bank, N.A. Member FDIC. For additional information, please contact Your Financial

	% OF ACCOUNT	ANNUAL PERCENTAGE YIELD EARNED*	CURRENT MARKET VALUE	ESTIMATED ANNUAL INCOME
02/28/26	13.11	0.101	4,797.84	5.00

Balances

al amount of the interest paid on an account based on the interest rate and the frequency of the compounding during the interest period. The annual is expressed as an annualized rate, based on a 365 day year.

ocation

ch bank are eligible for FDIC insurance of up to \$250,000 per depositor, per bank in accordance with FDIC rules. Insurance is subject to FDIC rules, including the, which require certain conditions to be satisfied for deposit insurance coverage to apply. Wells Fargo Clearing Services, LLC is not an FDIC-insured FDIC deposit insurance only protects against the failure of an insured depository institution. Banking products and services provided by affiliated banks and Member FDIC. In those instances where deposit balances exceed the maximum FDIC insurance limits, those deposits will be uninsured. Deposits at each portfolio detail section due to activity that occurs after 2pm ET on the last business day of the month. For additional information, please contact Your Financial

	FDIC CERT NUMBER	CURRENT VALUE	AS OF VALUE DATE
A.	3511	4,797.84	02/27
		\$4,797.84	

DESCRIPTION	ACCOUNT	% OF ACCOUNT	QUANTITY	CURRENT PRICE	CURRENT MARKET VALUE	ESTIMATED	
						ANNUAL INCOME	ANNUAL YIELD (%)
CSW INDUSTRIALS INC	86.89	86.89	108	294.3300	31,787.64	117	0.36
CSW INDUSTRIALS INC	86.89	86.89			\$31,787.64	\$117	0.37
CSW INDUSTRIALS INC	86.89	86.89			\$31,787.64	\$117	0.37

activity detail

DATE	ACCOUNT TYPE	TRANSACTION/CHECK NUMBER	QUANTITY	DESCRIPTION	PRICE	AMOUNT	CASH AND SWEEP BALANCES
01/13	Cash	DIVIDEND		BEGINNING BALANCE			
02/27	Cash	INTEREST		CSW INDUSTRIALS INC 021326 108		29.16	4,768.31
				BANK DEPOSIT SWEEP 022726 4,797		0.37	4,797.47
							4,797.84

cash sweep activity

Our Cash Sweep program allows you to earn a return on the idle cash balances in your account by automatically investing such balances into one of our cash sweep options. These sweep transactions may represent a net amount for the day and occur on settlement date. The following section displays transfers into and out of your sweep option. These transactions are displayed here as Transfer To, Transfer From and Reinvested Dividends and Interest. These transaction amounts are not included in your cash flow summary.

DATE	TRANSACTION	DESCRIPTION	AMOUNT	AMOUNT
02/27	REINVEST INT	BANK DEPOSIT SWEEP	4,768.31	0.37
02/28		ENDING BALANCE	29.16	4,797.84

ity Statement

Power Index 5 Plus Index Annuity Annual Statement February 12, 2025 to February 12, 2026

HNSTON
DR
32934-7606

If you have any questions,
please call your Agent:

PHILLIP MARGY

Telephone: (321) 426-9640

Summary



1-800-445-7862



www.corebridgefinancial.com/annuities

Owner: LAWRENCE V JOHNSTON

Contract [REDACTED]

Annuitant: LAWRENCE V JOHNSTON

Contract Type: Non-Qualified

	Since Issue Date 02/12/2021	This Statement Period
Contract Value as of 02/12/2025		\$107,092.80
Premium	\$100,000.00	\$0.00
Withdrawals/Charges ¹	\$0.00	\$0.00
Interest Credited	\$10,303.03	\$3,210.23
Contract Value as of 02/12/2026		\$110,303.03

¹Withdrawals/Charges represents the withdrawals and associated charges applied to your contract value and includes any rider fees, if applicable to your contract.

Please read your statement carefully. It is important that you report promptly any discrepancy in your annual statement or your annuity contract by calling your agent. In addition to contacting your agent, you may report any discrepancy to us by contacting us at the Annuity Service Center phone number that appears on this annual statement. It is also recommended that you retain a copy of any written communications.

nuity Statement

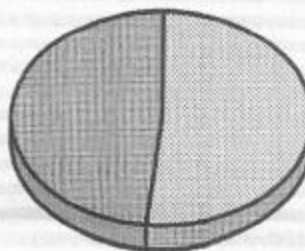
Power Index 5 Plus
Index Annuity
Annual Statement
February 12, 2025 to February 12, 2026

by Interest Crediting Account as of 02/12/2026

vides a
your
allocated.
he
or
ation
ig your
mong the
t crediting
contact
termine
crediting
opriate
l

	% Allocation	Interest Crediting Option
☒	51.51%	S&P Annual PTP with Cap
☒	48.49%	1 Year Fixed

Percentages may not be exact due to rounding.



st Crediting Account Summary as of 02/12/2026

	End of Current Index Term Value ¹	x	Index Interest Percentage ²	=	Interest Credited	Contract Value ³	% Allocation ³
with Cap	\$54,496.80		4.25%		\$2,316.11	\$56,812.91	51.51%

	Contract Value As of 02/12/2025	Interest Rate	Interest Credited	Contract Value ³	% Allocation ³
	\$52,596.00	1.70%	\$894.12	\$53,490.12	48.49%

Total Contract Value **\$110,303.03⁴**

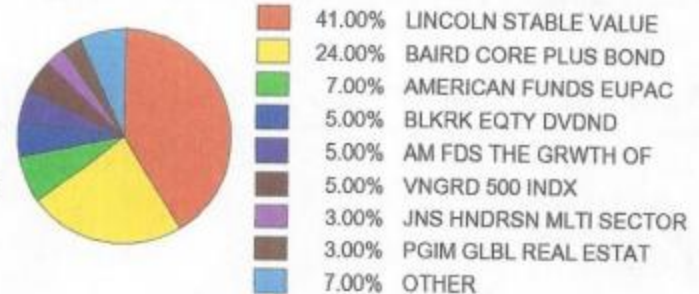
¹Term Value is determined by deducting the total amount of withdrawals taken in the prior contract year from the contract value Interest Account(s) at the beginning of the applicable index term. This value does not include any applicable fees and interest t contract year. It is the value used to calculate the interest credited to your contract value allocated to each Interest Crediting

centage is the percent of interest calculated based on the Index Interest Account and the return in the index and is adjusted by te Cap or Spread. See the following pages for specifics.

Your Fund Allocation Profile - RETIREMENT INCOME DI PORTFOLIO

Existing Balance Allocation (as of 03/31/2026)

Current Investment Election (as of 04/02/2026)



Activity by Investment

Beginning Balance	Money In	Investment Earnings	Revenue Share Credit	Fees and Expenses	Money Out	Unit value	Number of Units	Closing Balance
BAIRD CORE PLUS BOND 24%								
\$8,721.92	\$127.08	-\$102.74	\$0.00	-\$3.48	\$0.00	\$10.1900	857.9761	\$8,742.78
CLMBA SMCP VALUE II 1%								
\$362.90	\$0.00	\$20.40	\$0.00	-\$0.14	-\$27.70	\$14.9900	23.7129	\$355.46
EMRG MRKTS CORE EQTY 2 PORT 2%								
\$740.07	\$1.26	\$22.75	\$0.00	-\$0.29	-\$51.16	\$29.9000	23.8337	\$712.63
NOMURA MIDCP GRWTH 1%								
\$352.79	\$12.94	-\$25.63	\$0.00	-\$0.14	\$0.00	\$25.7400	13.2074	\$339.96
JNS HNDRSN MLTI SECTOR INCM 3%								
\$1,092.62	\$24.75	-\$20.22	\$0.00	-\$0.44	\$0.00	\$8.6300	127.0813	\$1,096.71
BLKRK EQTY DVDND 5%								
\$1,843.06	\$0.00	-\$19.89	\$0.00	-\$0.70	-\$65.64	\$20.5600	85.4490	\$1,756.83
MFS MIDCP VALUE 1%								
\$362.64	\$0.00	\$5.01	\$0.00	-\$0.14	-\$18.00	\$31.6000	11.0605	\$349.51
PGIM GLBL REAL ESTAT 3%								
\$1,084.46	\$0.00	\$40.14	\$0.00	-\$0.41	-\$92.82	\$21.1700	48.7184	\$1,031.37
AMERICAN FUNDS EUPAC FUND 7%								
\$2,590.26	\$0.00	-\$70.23	\$0.00	-\$0.95	-\$66.25	\$58.8600	41.6722	\$2,452.83
AM FDS THE GRWTH OF AMER 5%								
\$1,808.42	\$76.57	-\$149.10	\$0.00	-\$0.69	\$0.00	\$74.1300	23.4075	\$1,735.20
VNGRD 500 INDX 5%								
\$1,811.49	\$29.75	-\$85.43	\$0.00	-\$0.69	\$0.00	\$602.4700	2.9132	\$1,755.12
VNGRD MIDCP INDX 1%								
\$360.73	\$1.30	-\$3.08	\$0.00	-\$0.14	-\$7.85	\$355.7600	0.9865	\$350.96
VNGRD SMCP INDX 1%								
\$360.58	\$1.30	\$6.35	\$0.00	-\$0.14	-\$15.94	\$125.4600	2.8069	\$352.15
LINCOLN STABLE VALUE ACCOUNT -Z273 41%								
\$14,891.50	-\$184.58	\$84.04	\$0.00	-\$6.06	\$0.00	\$1.2641	11,987.8902	\$15,154.06
TOTALS								
\$36,383.44	\$459.53	-\$297.63	\$0.00	-\$14.41	-\$345.36			\$36,185.57

Vesting and Sources (as of 03/31/2026)

Source Type	Current Balance	Vested Balance	Vested Percentage**	Plan YTD Contributions
EE Pre-Tax 403B	\$36,185.57	\$36,185.57	100%	\$0.00
ER Match 403B	\$0.00	\$0.00	100%	\$0.00
TOTALS	\$36,185.57	\$36,185.57		\$0.00

Vesting and Sources (as of 03/31/2026) (continued)

Source Type	Current Balance	Vested Balance	Vested Percentage**	Plan YTD Contributions
-------------	-----------------	----------------	---------------------	------------------------

** Vested Percentage is as of the date the statement was generated

Account Activity by Source

Source	Beginning Balance	Money In (including credits)	Money Out (including fees)	Investment Earnings	Closing Balance
EE Pre-Tax 403B	\$36,383.44	\$114.17	-\$14.41	-\$297.63	\$36,185.57
ER Match 403B	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTALS	\$36,383.44	\$114.17	-\$14.41	-\$297.63	\$36,185.57

Fee and Expense Summary

Fee Description	This period	Year-to-Date
Program And Administration Fee	-\$14.41	-\$14.41
Totals	-\$14.41	-\$14.41

In addition to the fees and expenses disclosed in this statement, some of the plan's administrative expenses may have been paid from the total annual operating expenses of one or more of the plan's designated investment alternatives.



Lincoln
Financial Group®

Lincoln Financial
PO Box 7876

Fort Wayne, IN 46801-7876

Your Retirement Account

01/01/2026 - 03/31/2026

Lincoln Alliance® program

Account Information

Name: LAWRENCE V JOHNSTON
Company Name: FLORIDA INSTITUTE OF TECHNOLOGY
Plan Name: RETIREMENT PLAN
Plan ID: FIT-001

Total Account Value (as of 03/31/2026)

\$36,185.57

Account Summary

Balance (as of 01/01/2026)	\$36,383.44
Investment Earnings	-297.63
Dividends	114.17
Fees and Expenses	-\$14.41
Balance (as of 03/31/2026)	\$36,185.57
Total Account Value	\$36,185.57
Vested Balance	\$36,185.57

Current Contribution Amounts

(as of 04/02/2026)

Pretax: 100.00%

Your Personal Rate of Return* (as of 03/31/2026)

3-Month	YTD	1-Year	3-Year	5-Year
-0.50 %	-0.50%	7.60%	6.83%	4.35%

*Personalized rate of return represents the individual performance of the investment(s) you have selected for your portfolio. The calculation includes activity in your account (such as contributions, exchanges among investment options, etc.) using daily share price in effect when the activity occurred. Other performance calculations shown on this statement are different. Because the timing of your investments and withdrawals will vary, your personal investment results will generally not be the same as the investment returns quoted for the individual funds you have selected. Quoted performance data represents past performance. Past performance does not guarantee nor predict future performance. Current performance may be lower or higher than the performance data quoted.

Contact Information

Customer Service:

Our customer service representatives are available at 800-234-3500, Monday - Friday, from 8:00 am to 8:00 pm ET.

Online Service:

For your updated detailed account information, fund performance and to access education/planning tools, visit LincolnFinancial.com.

Representative:

Home Office Agent

ENV# CEBTJRBFBBGWZ_BBBB
TRUIST INVESTMENT SERVICES INC
P.O. BOX 596
RICHMOND, VA 23286

LAWRENCE V JOHNSTON
TOD BENE ON FILE

TRUIST

Investment Services Group
Truist Investment Services, Inc.
Securities, brokerage accounts and insurance (including annuities) are offered by Truist Investment Services, Inc., a
SEC registered broker-dealer, member FINRA, SIPC, and a licensed insurance agency. Investment advisory
services are offered by Truist Advisory Services, Inc., a SEC registered investment adviser.

STATEMENT FOR THE PERIOD APRIL 1, 2026 TO JUNE 30, 2026

LAWRENCE V JOHNSTON - Individual TOD
Account Number

YOUR FINANCIAL ADVISOR IS:
ALFRED CRAKE
RR#: C42
For questions about your accounts:
Local: 321 254 2633

BEGINNING VALUE OF YOUR PORTFOLIO

Total Value of Your Account \$1,040,175.73
Total Value of Insurance and Annuities (Not held by NFS) \$19,729.75
TOTAL VALUE OF YOUR PORTFOLIO \$1,028,776.73

\$1,048,506.48
Information for assets not held by NFS is provided by outside parties and is included for informational purposes only.
Refer to the Holdings Section in this statement for more information.

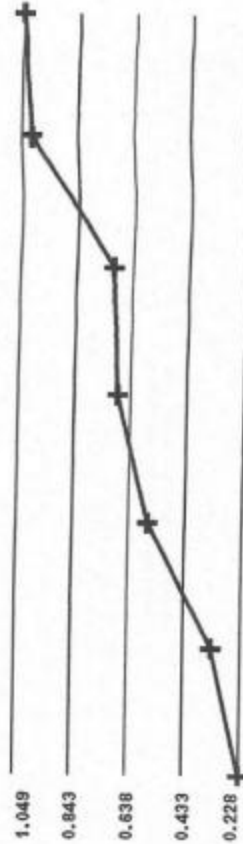
FOR YOUR INFORMATION

Visit www.truist.com/wealth/is-disclosure for Truist Investment Services clear,
easy-to-understand information related to its products, accounts, and services, including
disclosures relating to Client Agreements, SEC Regulation Best Interest and Volatile Markets.
Should you have any questions about your account statement, please contact your representative
at the phone number above or call 1-866-486-3215.

Truist Investment Services, Inc.

CHANGE IN VALUE OF YOUR PORTFOLIO

\$ millions



Change in Value of Your Portfolio information can be found in Miscellaneous Footnotes at the end of this statement.

Account carried with National Financial Services LLC, Member
NYSE, SIPC

Statement for the Period April 1, 2026 to June 30, 2026

LAWRENCE V JOHNSTON - Individual TOD
Account Number [REDACTED]



Investment Services Group
Truist Investment Services, Inc.
Securities, brokerage accounts and insurance (including annuities) are offered by Truist Investment Services, Inc., a
SEC registered broker-dealer, member FINRA, SIPC, and a licensed insurance agency. Investment advisory
services are offered by Truist Advisory Services, Inc., a SEC registered investment adviser.

Account Overview

CHANGE IN ACCOUNT VALUE	Current Period	Year-to-Date
BEGINNING VALUE	\$19,062.86	\$19,835.98
Additions and Withdrawals	\$0.00	\$0.00
Misc. & Corporate Actions	\$0.00	\$0.00
Income	\$296.89	\$593.77
Taxes, Fees and Expenses	\$0.00	\$0.00
Change in Value	\$370.00	(\$700.00)
ENDING VALUE (AS OF 06/30/26)	\$19,729.75	\$19,729.75

Refer to Miscellaneous Footnotes for more information on Change in Value.

INCOME	Current Period	Year-to-Date
TAXABLE		
Taxable Dividends	\$296.88	\$593.76
Taxable Interest	\$0.01	\$0.01
TOTAL TAXABLE	\$296.89	\$593.77
TOTAL INCOME	\$296.89	\$593.77

Taxable income is determined based on information available to NPS at the time the statement was prepared, and is subject to change. Final information on taxation of interest and dividends is available on Form 1099-Div, which is mailed in February of the subsequent year.

MESSAGES AND ALERTS

*NOT FDIC INSURED*NO BANK GUARANTEE*MAY LOSE VALUE
Services provided by the following affiliates of Truist Financial Corporation. Securities, brokerage accounts and insurance-including annuities-are offered by Truist Investment Services, Inc., a SEC registered broker-dealer, member FINRA, SIPC, and a licensed insurance agency. Investment advisory services are offered by Truist Advisory Services, Inc., a SEC registered investment adviser.

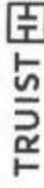
Truist Investment Services, Inc.

Account carried with National Financial Services LLC, Member
NYSE, SIPC

P

Statement for the Period April 1, 2026 to June 30, 2026

LAWRENCE V JOHNSTON - Individual TOD
Account Number [REDACTED]



Investment Services Group
Truist Investment Services, Inc.
Securities, brokerage accounts and insurance (including annuities) are offered by Truist Investment Services, Inc., a
SEC registered broker-dealer. Truist Investment Services, Inc. is a member of the Financial Industry Regulatory Authority (FINRA).
Services are offered by Truist Advisory Services, Inc., a SEC registered investment adviser.

HOLDINGS > EQUITIES *continued*

Description	Symbol/Cusip Account Type	Quantity	Price on 06/30/26	Current Market Value	Estimated Annual Income	Original/Adjusted Cost Basis	Unrealized Gain (Loss)
TRUIST FINL CORP DP SH RP PFD R 4.750000%	TFCPRR	<i>continued</i>					
Client Investment				\$18,500.00	\$1,187.50	\$25,000.00	(\$6,500.00)
Total Equities							
Total Equities Client Investment		\$25,000.00					
Total Securities							
				\$18,500.00	\$1,187.50	\$25,000.00	(\$6,500.00)
TOTAL ACCOUNT VALUE				\$19,729.75	\$1,187.50	\$25,000.00	(\$6,500.00)

HOLDINGS > INSURANCE AND ANNUITIES (Not held by NFS)

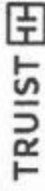
Information regarding Assets Held Away is provided solely as a courtesy for informational purposes. NFS is not responsible for, and is unable to verify the existence of, Assets Held Away. Further, as information regarding Assets Held Away is derived from external sources, NFS is not responsible for the accuracy or timeliness of the information reported for Assets Held Away. Assets Held Away are not part of your brokerage or investment advisory account carried by NFS and therefore are not covered by the SIPC protection afforded to your NFS account.

Total Annualized Amount is not included in Total Portfolio Value.

Description	Issue Date	Valuation Date	Current Market Value	Total Premiums
Deferred Annuities				
AMERICAN GENERAL LIFE INS/CRBG POWER INDEX 5 PLUS (5-YEAR PRODUCT) INDEXED ANNUITY CONTRACT A26G1534459 PLAN TYPE: NON-QUALIFIED	03/30/2022	06/29/2026	\$136,790.36	\$117,324.63
Owner(s)				
LAWRENCE V JOHNSTON				
Annuitant(s)				
LAWRENCE V JOHNSTON				
Sub Account(s)				
MLSB Annual PTP Participation Rate				
S&P Annual PTP with Cap				
Allocation				
\$0.00				
\$136,790.36				

Statement for the Period April 1, 2026 to June 30, 2026

LAWRENCE V JOHNSTON - Individual TOD
Account Number: [REDACTED]



Investment Services Group
Truist Investment Services, Inc.
Securities, brokerage accounts and insurance (including annuities) are offered by Truist Investment Services, Inc., a
SEC registered broker-dealer, member FINRA, SIPC, and a licensed insurance agency. Investment advisory
services are offered by Truist Advisory Services, Inc., a SEC registered investment adviser.

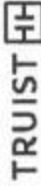
HOLDINGS > INSURANCE AND ANNUITIES (Not held by NFS) *continued*

Description	Issue Date	Valuation Date	Current Market Value	Total Premiums
DELAWARE LIFE INS CO/DLIC	02/12/2024 <i>continued</i>	06/29/2026	\$159,735.29	\$132,445.00
DELAWARE LIFE INS CO/DLIC				
DELAWARE LIFE TRUMAX 5 FIXED INDEX ANNUITY				
INDEXED ANNUITY				
CONTRACT TMF50003122				
PLAN TYPE: NON-QUALIFIED				
Owner(s)				
LAWRENCE V JOHNSTON				
Annuitant(s)				
LAWRENCE V JOHNSTON				
Sub Account(s)				
S&P 500 Annual Performance Trigger				
S&P 500 1-Year Term Point-to-Point with				
		Allocation		
		\$77,958.78		
		\$81,776.51		
DELAWARE LIFE INS CO/DLIC	07/22/2025	06/29/2026	\$503,400.01	\$479,834.44
DELAWARE LIFE TRUSELECT FIXED ANNUITY				
FIXED ANNUITY				
CONTRACT TSMY0076055				
PLAN TYPE: NON-QUALIFIED				
Owner(s)				
LAWRENCE V JOHNSTON				
Annuitant(s)				
LAWRENCE V JOHNSTON				
Sub Account(s)				
TruSelect 7 Yr				
		Allocation		
		\$503,400.01		
ATHENE ANNUITY AND LIFE COMPANY	02/24/2023	06/29/2026	\$118,669.05	\$100,000.00
ATHENE MYG 5 MVA				
FIXED ANNUITY				
CONTRACT 3300370524				
PLAN TYPE: NON-QUALIFIED				
Owner(s)				
LAWRENCE V JOHNSTON				
Annuitant(s)				
LAWRENCE V JOHNSTON				

Statement for the Period April 1, 2026 to June 30, 2026

LAWRENCE V JOHNSTON - Individual TOD

Account Number: [REDACTED]



Investment Services Group
 Truist Investment Services, Inc.
 Securities, brokerage accounts and insurance (including annuities) are offered by Truist Investment Services, Inc., a
 SEC registered broker-dealer, member FINRA, SIPC, and a licensed insurance agency. Investment advisory
 services are offered by Truist Advisory Services, Inc., a SEC registered investment advisor.

HOLDINGS > INSURANCE AND ANNUITIES (Not held by NFS) *continued*

Description	Issue Date	Valuation Date	Current Market Value	Total Premiums
ATHENE ANNUITY AND LIFE COMPANY				
Sub Account(s)		Allocation		
5 Year Fixed		\$118,669.05		
ATHENE ANNUITY AND LIFE COMPANY	04/27/2026	06/29/2026	\$110,182.02	\$110,458.17
ATHENE ASCENT PRO 7				
INDEXED ANNUITY				
CONTRACT 3301113517				
PLAN TYPE: NON-QUALIFIED				
Owner(s)				
LAWRENCE V JOHNSTON				
Annuitant(s)				
LAWRENCE V JOHNSTON				
Sub Account(s)		Allocation		
1-Yr Point-to-Point (SPX)		\$110,182.02		
Total Deferred Annuities			\$1,028,776.73	
Total Insurance and Annuities			\$1,028,776.73	
TOTAL PORTFOLIO VALUE				
(INCLUDES INVESTMENTS AND INSURANCE AND ANNUITIES)			\$1,048,506.48	\$25,000.00
TOTAL CLIENT INVESTMENT			\$1,187.50	\$6,500.00

Statement for the Period April 1, 2026 to June 30, 2026

LAWRENCE V JOHNSTON - Individual TOD
Account Number: [REDACTED]



Investment Services Group
Truist Investment Services, Inc.
Securities, brokerage accounts and insurance (including annuities) are offered by Truist Investment Services, Inc., a
SEC registered broker-dealer, member FINRA, SIPC, and a licensed insurance agency. Investment advisory
services are offered by Truist Advisory Services, Inc., a SEC registered investment adviser.

Activity

NFS-provided cost basis, realized gain (loss) and holding period information may not reflect all adjustments necessary for tax purposes. Please refer to Footnotes and Cost Basis Information at the end of this statement for more information.

CORE FUND ACTIVITY

For more information about the operation of your core account, please refer to your Customer Agreement.

Settlement Date	Account Type	Transaction	Description	Quantity	Amount
06/01/26	CASH	YOU BOUGHT	TIERED RATE MULTIBANK SWEEP NON-MANAGED MORNING TRADE @ 1	296.88	(\$296.88)
06/30/26	CASH	REINVESTMENT	TIERED RATE MULTIBANK SWEEP NON-MANAGED NET INT REINVEST	0.01	(\$0.01)
TOTAL CORE FUND ACTIVITY					(\$296.89)

ACTIVITY > INCOME > TAXABLE INCOME

Settlement Date	Account Type	Transaction	Description	Quantity	Amount
Taxable Dividends					
06/01/26	CASH	DIVIDEND RECEIVED	TRUIST FINL CORP DP SH RP PFD R 4.75000%		\$296.88
Total Taxable Dividends					\$296.88
Taxable Interest					
06/30/26	CASH	INTEREST RECEIVED	TIERED RATE MULTIBANK SWEEP NON-MANAGED		\$0.01
Total Taxable Interest					\$0.01
Total Taxable Income					\$296.89

Truist Investment Services, Inc.

Account carried with National Financial Services LLC, Member
NYSE, SIPC

P

Statement for the Period April 1, 2026 to
LAWRENCE V JOHNSTON - Individual TOD
Account Number



Investment Services Group
Truist Investment Services, Inc.
Securities, brokerage accounts and insurance (including annuities) are offered by Truist Investment Services, Inc., a
SEC registered investment adviser, SIPC, and a licensed insurance agency. Investment advisory
services are offered by Truist Advisory Services, Inc., a SEC registered investment adviser.

ACTIVITY continued

	Amount
TOTAL INCOME	\$296.89

ACTIVITY > BANK DEPOSIT DETAIL

Bank Deposits are not securities and are not covered by the Securities Investor Protection Corporation (SIPC). Funds are not FDIC insured until swept to a Program Bank. Customers are responsible for monitoring their total deposits at each Program Bank to determine the extent of available FDIC insurance. Your ending balance at each Program Bank as of the end of this statement period is shown below. If you participate in the Bank Deposit Sweep Program, the Bank Deposit Detail section lists banks and ending balances. Funds pending settlement reflect deposits to (credit) or withdrawals from (debit) to a Program Bank. Please refer to the Program Disclosure document for additional details that may impact the program.

Bank	Beginning Balance	Ending Balance
Goldman Sachs Bank	\$0.80	\$0.80
Truist Bank	\$932.05	\$1,228.95
Total Bank Deposits	\$932.85	\$1,229.75

Unrealized Gain (Loss) Lot Detail

NFS-provided cost basis, realized gain (loss) and holding period information may not reflect all adjustments necessary for tax purposes. Please refer to Footnotes and Cost Basis Information at the end of this statement for more information.

EQUITIES

Description	Account Type	Date Acquired	Symbol/ Cusip	Price on 06/30/26	Unit Cost	Quantity	Market Value	Original/Adjusted Cost Basis	Unrealized Gain (Loss)	Holding Period
TRUIST FINL CORP DP SH RP PFD R 4.75000% PERP TL MTY	CASH	07/30/20	TFCPRR	\$18.50	\$25.00	1,000	\$18,500.00	\$25,000.00	(\$6,500.00)	LT
Total Equities						1,000	\$18,500.00	\$25,000.00	(\$6,500.00)	