

2022 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 05/31/2023

General Information

Name: Hon A. Kathleen McNeilly **CONFIDENTIAL**
Address: Courthouse Annex 125 E. Orange Ave., Daytona Beach, FL 32114 **PID 266199**
County: Volusia

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (7Th)	Elected Constitutional Officer	Circuit Judge

Net Worth

My Net Worth as of May 31, 2023 was \$ 4,524,765.18.

Assets

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

The aggregate value of my household goods and personal effect is \$ 40,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
FIDELITY PORTFOLIO MUT FUNDS (BAL, DIV GROWTH, LPS)	\$ 680,023.22
T. ROWE PRICE PORTFOLIO MUT FUNDS (CAP APPREC, HEALTH SCIENCES)	\$ 988,897.74
VANGUARD PORTFOLIO MUTUAL FUNDS (HEALTH CARE ADMIRAL, WELLINGTON ADMIRAL)	\$ 1,529,930.63
VANGUARD VARIABLE ANNUITY NOW SERVICED BY TRANSAMERICA	\$ 513,509.78
FRS, 3 % ANNUAL CONTRIBUTION	\$ 31,427.94
FLA STATE DEFERRED INCOME (T ROWE PRICE CAP APPREC) SERVICED BY NATIONWIDE	\$ 180,863.45
TRUIST (FORMERLY SUNTRUST) BANK	\$ 111,884.41
WELLS FARGO BANK	\$ 30,000.00
TD BANK	\$ 18,228.01
PRIMARY RESIDENCE	\$ 200,000.00
SECONDARY RESIDENCE	\$ 200,000.00
AUTOMOBILE 2020 CHRYSLER 300 LX	\$ 25,000.00
HOME(S) CONTENTS	\$ 15,000.00

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.

☒ I elect to file a copy of my 2022 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
CIRCUIT JUDGE SALARY	STATE OF FLORIDA	\$ 165,509.00
See Attached		

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

Business Entity	Major Sources of Business Income	Address	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.

A. Kathleen McNeilly

Digitally signed: 05/31/2023

Filed with COE: 05/31/2023

Filing Status ☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying surviving spouse (QSS)
Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Your first name and middle initial **A. Kathleen McNeilly** Last name _____ Your social security number _____

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

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

Digital Assets At any time during 2022, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, gift, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

Standard Deduction Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: ☐ Were born before January 2, 1958 ☐ Are blind Spouse: ☐ Was born before January 2, 1958 ☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions):	
If more than four dependents, see instructions and check here... ☐	(1) First name Last name			Child tax credit	Credit for other dependents
				☐	☐
				☐	☐
				☐	☐
				☐	☐

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.	1 a	Total amount from Form(s) W-2, box 1 (see instructions).....	1a	140,971.
	b	Household employee wages not reported on Form(s) W-2.....	1b	
	c	Tip income not reported on line 1a (see instructions).....	1c	
	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions).....	1d	
	e	Taxable dependent care benefits from Form 2441, line 26.....	1e	
	f	Employer-provided adoption benefits from Form 8839, line 29.....	1f	
	g	Wages from Form 8919, line 6.....	1g	
	h	Other earned income (see instructions).....	1h	
	i	Nontaxable combat pay election (see instructions)..... 1i		
	z	Add lines 1a through 1h.....	1z	140,971.

Attach Sch. B if required.	2a	Tax-exempt interest	2a		b	Taxable interest	2b	11
	3a	Qualified dividends	3a	10,881.	b	Ordinary dividends	3b	14,346
	4a	IRA distributions	4a	7,000.	b	Taxable amount	4b	0
	5a	Pensions and annuities	5a		b	Taxable amount	5b	
Standard Deduction for — • Single or Married filing separately, \$12,950 • Married filing jointly or Qualifying surviving spouse, \$25,900 • Head of household, \$19,400 • If you checked any box under <i>Standard Deduction</i> , see instructions.	6a	Social security benefits	6a		b	Taxable amount	6b	
	c If you elect to use the lump-sum election method, check here (see instructions).....						☐	
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here	☐		7		71,450	
	8	Other income from Schedule 1, line 10			8			
	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income			9		226,778	
	10	Adjustments to income from Schedule 1, line 26			10			
	11	Subtract line 10 from line 9. This is your adjusted gross income			11		226,778	
	12	Standard deduction or itemized deductions (from Schedule A)			12		12,950	
	13	Qualified business income deduction from Form 8995 or Form 8995-A			13		17	
	14	Add lines 12 and 13			14		12,967	
	15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income			15		213,811	

Tax and Credits

16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814	16	37,741.
2	☐ 4972	3	☐
17	Amount from Schedule 2, line 3.	17	
18	Add lines 16 and 17.	18	37,741.
19	Child tax credit or credit for other dependents from Schedule 8812.	19	
20	Amount from Schedule 3, line 8.	20	
21	Add lines 19 and 20.	21	0.
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	37,741.
23	Other taxes, including self-employment tax, from Schedule 2, line 21.	23	1,018.
24	Add lines 22 and 23. This is your total tax .	24	38,759.

Payments

25	Federal income tax withheld from:		
a	Form(s) W-2.	25a	25,649.
b	Form(s) 1099.	25b	
c	Other forms (see instructions).	25c	
d	Add lines 25a through 25c.	25d	25,649.
26	2022 estimated tax payments and amount applied from 2021 return.	26	21,000.
27	Earned income credit (EIC).	27	
28	Additional child tax credit from Schedule 8812.	28	
29	American opportunity credit from Form 8863, line 8.	29	
30	Reserved for future use.	30	
31	Amount from Schedule 3, line 15.	31	
32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits .	32	
33	Add lines 25d, 26, and 32. These are your total payments .	33	46,649.

If you have a qualifying child, attach Sch. EIC.

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid .	34	7,890.
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here. ☐	35a	0.
b	Routing number.	c	Type: ☐ Checking ☐ Savings
d	Account number.		
36	Amount of line 34 you want applied to your 2023 estimated tax .	36	7,890.

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 **John A. Shelley** Phone no. **386-322-3787** Personal identification number (PIN) **[REDACTED]**

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 **[Signature]** Date **[Date]** Your occupation **Judge** 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. **(386) 736-4741**

Email address

Paid Preparer Use Only

Preparer's name **John A. Shelley** Preparer's signature **[Signature]** Date **[Date]** PTIN **P00129604** Check if: ☐ Self-employed

Firm's name **SHELLEY & SHELLEY CPA** Phone no. **386-322-3787**

Firm's address **1515 HERBERT ST STE 213** Firm's EIN **48-1290481**
PORT ORANGE, FL 32129

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

Form 1040 (2022)

