

General Information

Name: Hon Paul L. Militello

CONFIDENTIAL

PID 263396

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (5Th)	Elected Constitutional Officer	County Judge

CANDIDATE FOR

Position	Agency Name	Position sought or held
County Judge	5th Judicial Circuit	County Court Judge of Sumter County, Group 1

Net WorthMy Net Worth as of December 31, 2023 was \$ 2,744,489.00.**Assets**

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

The aggregate value of my household goods and personal effect is \$ 60,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 02/28/2024

Description of Asset	Value of Asset
{REDACTED} (Personal Residence)	\$ 350,000.00
50% of 14 acres of Cropland. {REDACTED} Hernando Cty	\$ 181,772.50
50% of 9.5 acres of Cropland. {REDACTED} Hernando Cty	\$ 133,712.50
25% of 11.5 acres of Cropland.{REDACTED} Hernando Cty	\$ 305,250.00
PMSM Properties LLC. Building 107 W. Main St. Inverness, FL	\$ 244,098.00
Truist Bank accounts	\$ 17,547.32
Citibank account	\$ 41,149.94
Ally Bank account	\$ 104,638.94
Synchrony Bank account	\$ 130,351.00
Amazon stock	\$ 161,055.00
Apple stock	\$ 216,148.00
Pfizer Stock	\$ 78,060.00
Schwab savings account	\$ 65,673.00
Alphabet Stock	\$ 182,488.00
Chewy Stock	\$ 1,181.00
Invesco Aerospace Defense Stock	\$ 37,627.00
McDonalds Stock	\$ 30,230.00
Nike Inc Stock	\$ 17,811.00
Owens Corning Stock	\$ 15,444.00
Paypal Stock	\$ 1,228.00
United Health Stock	\$ 2,659.62
Gilead Sciences Stock	\$ 8,178.00
Nvidia Stock	\$ 30,230.00
Walt Disney Stock	\$ 13,543.00
TRowePr Scn Tech Fund	\$ 37,953.00
DE SmCap Val Fund	\$ 30,668.00
TRowePr health fund	\$ 7,300.00
TRowePr 2030 Trust Fund	\$ 66,711.00

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 02/28/2024

Description of Asset	Value of Asset
TRowePr 2035 Trust Fund	\$ 38,189.00
TRowePr 2040 Trust Fund	\$ 46,825.04
United States Savings Bonds	\$ 10,000.00
Broadcom Stock	\$ 7,813.00
Kraft Heinz Stock	\$ 3,698.00
Bank of America Stock	\$ 16,835.00
CVS Stock	\$ 7,997.00
DUKE Energy Stock	\$ 32,578.00
Johnson & Johnson Stock	\$ 7,896.00

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 2023 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 2023 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.

Paul L. Militello

Digitally signed: 02/28/2024

Filed with COE: 02/28/2024

IRS e-file Signature Authorization

OMB No. 1545-0074

- ERO must obtain and retain completed Form 8879.
► Go to www.irs.gov/Form8879 for the latest information.

Submission Identification Number (SID) ►

Taxpayer's name

Paul L Militello

Social security number

Spouse's name

Militello

Spouse's social security number

Part I Tax Return Information — Tax Year Ending December 31, 2023 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income	1	233,993.
2	Total tax	2	35,910.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	25,465.
4	Amount you want refunded to you	4	
5	Amount you owe	5	10,526.

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

- ☒ I authorize Lori G Maddox CPA PA to enter or generate my PIN  as my signature on the income tax return (original or amended) I am now authorizing.
ERO firm name
- ☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ► _____ Date ► _____

Spouse's PIN: check one box only

- ☒ I authorize Lori G Maddox CPA PA to enter or generate my PIN  as my signature on the income tax return (original or amended) I am now authorizing.
ERO firm name
- ☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box **only** if you are entering your own PIN **and** your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ► _____ Date ► _____

Practitioner PIN Method Returns Only—continue below**Part III Certification and Authentication — Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.




Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and **Pub. 1345**, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► _____ Date ► _____

ERO Must Retain This Form — See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____, 20		See separate instructions.
Your first name and middle initial Paul L	Last name Militello	Your social security number [redacted]
If joint return, spouse's first name and middle initial [redacted]	Last name Militello	Spouse's social security number [redacted]
Home address (number and street). If you have a P.O. box, see instructions. [redacted]		Apt. no. [redacted]
City, town, or post office. If you have a foreign address, also complete spaces below. [redacted]		State [redacted]
ZIP code [redacted]		Foreign postal code [redacted]
Foreign country name [redacted]	Foreign province/state/county [redacted]	Foreign postal code [redacted]

Filing Status ☐ Single ☐ Head of household (HOH)
☒ Married filing jointly (even if only one had income)
☐ Married filing separately (MFS) ☐ 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: _____

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

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

Age/Blindness You: ☐ Were born before January 2, 1959 ☐ Are blind Spouse: ☐ Was born before January 2, 1959 ☐ Is blind

Dependents (see instructions):

(1) First name	Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions): Child tax credit	Credit for other dependents
				☐	☐
				☐	☐
				☐	☐
				☐	☐

Income		1a Total amount from Form(s) W-2, box 1 (see instructions)	1a 188,490.	
		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 0.	
		i Nontaxable combat pay election (see instructions)	1i	
		z Add lines 1a through 1h	1z 188,490.	
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.	2a Tax-exempt interest	2a	2a	
	3a Qualified dividends	3a 4,443.	b Taxable interest	2b 16,567.
	4a IRA distributions	4a	b Ordinary dividends	3b 4,443.
	5a Pensions and annuities	5a	b Taxable amount	4b 10,300.
	6a Social security benefits	6a	b Taxable amount	5b
	c If you elect to use the lump-sum election method, check here (see instructions)		b Taxable amount	6b
	7 Capital gain or (loss). Attach Schedule D if required. If not required, check here			7 -3,000.
	8 Additional income from Schedule 1, line 10			8 17,193.
	9 Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income			9 233,993.
	10 Adjustments to income from Schedule 1, line 26			10
		11 Subtract line 10 from line 9. This is your adjusted gross income	11 233,993.	
		12 Standard deduction or itemized deductions (from Schedule A)	12 27,700.	
		13 Qualified business income deduction from Form 8995 or Form 8995-A	13	
		14 Add lines 12 and 13	14 27,700.	
		15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income	15 206,293.	

Tax and Credits		16 Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐ _____		16 35,910.														
		17 Amount from Schedule 2, line 3		17														
		18 Add lines 16 and 17		18 35,910.														
		19 Child tax credit or credit for other dependents from Schedule 8812		19														
		20 Amount from Schedule 3, line 8		20														
		21 Add lines 19 and 20		21														
		22 Subtract line 21 from line 18. If zero or less, enter -0-		22 35,910.														
		23 Other taxes, including self-employment tax, from Schedule 2, line 21		23 0.														
		24 Add lines 22 and 23. This is your total tax		24 35,910.														
Payments		25 Federal income tax withheld from:																
		a Form(s) W-2	25a 24,435.															
		b Form(s) 1099	25b 1,030.															
		c Other forms (see instructions)	25c															
		d Add lines 25a through 25c	25d 25,465.															
If you have a qualifying child, attach Sch. EIC.		26 2023 estimated tax payments and amount applied from 2022 return		26														
		27 Earned income credit (EIC)		27														
		28 Additional child tax credit from Schedule 8812		28														
		29 American opportunity credit from Form 8863, line 8		29														
		30 Reserved for future use		30														
		31 Amount from Schedule 3, line 15		31														
		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 25,465.														
Refund		34 If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid		34														
		35a Amount of line 34 you want refunded to you . If Form 8888 is attached, check here ☐		35a														
Direct deposit? See instructions.		b Routing number <table border="1" style="display: inline-table; text-align: center; font-size: x-small;"> <tr><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td></tr> </table> c Type: ☐ Checking ☐ Savings		X	X	X	X	X	X	X	X	X	X					
		X	X	X	X	X	X	X	X	X	X							
d Account number <table border="1" style="display: inline-table; text-align: center; font-size: x-small;"> <tr><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td></tr> </table>		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X			
		36 Amount of line 34 you want applied to your 2024 estimated tax		36														
Amount You Owe		37 Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions		37 10,526.														
		38 Estimated tax penalty (see instructions)		38 81.														
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 Lori G Maddox	Phone no. (352) 793-8885	Personal identification number (PIN) <table border="1" style="display: inline-table; text-align: center; font-size: x-small;"> <tr><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td><td>■</td></tr> </table>	■	■	■	■	■	■								
■	■	■	■	■	■													
Sign Here		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.																
Joint return? See instructions. Keep a copy for your records.		Your signature	Date	Your occupation County Court Judge	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) XXXXXXXXXX													
		Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation XXXXXXXXXX	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) XXXXXXXXXX													
		Phone no.	Email address															
		Preparer's name Lori G Maddox		Preparer's signature	Date 02/20/2024	PTIN XXXXXX Check if: ☐ Self-employed												
Paid Preparer Use Only		Firm's name Lori G Maddox CPA PA			Phone no. (352) 793-8885													
		Firm's address 1333 W C 48 Suite D Bushnell FL 33513			Firm's EIN XXXXXX													

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

2023

Attachment
Sequence No. **01**

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

Paul L & [REDACTED] Militello

Your social security number

[REDACTED]

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). Attach Form 4797	4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	5	17,193.
6	Farm income or (loss). Attach Schedule F	6	
7	Unemployment compensation	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	
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	17,193.

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

Schedule 1 (Form 1040) 2023

Part II Adjustments to Income

11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
c	Date of original divorce or separation agreement (see instructions): _____		
20	IRA deduction	20	
21	Student loan interest deduction	21	
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
a	Jury duty pay (see instructions)	24a	
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit	24b	
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m	24c	
d	Reforestation amortization and expenses	24d	
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974	24e	
f	Contributions to section 501(c)(18)(D) pension plans	24f	
g	Contributions by certain chaplains to section 403(b) plans	24g	
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions)	24h	
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations	24i	
j	Housing deduction from Form 2555	24j	
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041)	24k	
z	Other adjustments. List type and amount: _____	24z	
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your adjustments to income . Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	26	

**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

2023
Attachment
Sequence No. **08**

Name(s) shown on return

Paul L & [REDACTED] Militello

Your social security number

[REDACTED]

**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.

		Amount
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: <u>Synchrony Bank</u>	5,381.
	<u>TD Ameritrade</u>	23.
	<u>Ally</u>	9,071.
	<u>Citibank</u>	1,324.
	<u>Capital One</u>	19.
	<u>Achieva Credit Union</u>	13.
	<u>Charles Schwab</u>	152.
	<u>Dept of the Treasury</u>	492.
	<u>Robinhood</u>	57.
	<u>IRS</u>	58.
	<u>Subtotal</u>	16,590.
	<u>Accrued Interest</u>	-23.
	2 Add the amounts on line 1	2 16,567.
3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815	3
4	Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b	4 16,567.

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: <u>Pfizer - [REDACTED]</u>	780.
	<u>TD Ameritrade</u>	2,718.
	<u>Viatris</u>	27.
	<u>Charles Schwab</u>	909.
	<u>Robinhood - [REDACTED]</u>	9.
5		
6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6 4,443.

Note: If line 6 is over \$1,500, you must complete Part III.**Part III
Foreign
Accounts
and Trusts****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.

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.

	Yes	No
7a At any time during 2023, 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		X
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 2023, 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		X

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

2023Attachment
Sequence No. **12**

Name(s) shown on return

Paul L & [REDACTED] Militello

Your social security number

[REDACTED]

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 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	14,141.	15,638.		-1,497.
1b Totals for all transactions reported on Form(s) 8949 with Box A checked	3,954.	5,515.	1,491.	-70.
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C 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 -1,567.

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 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	18,273.	36,517.		-18,244.
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1				12
13 Capital gain distributions. See the instructions				13
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions				14 ()
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III on the back				15 -18,244.

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

Schedule D (Form 1040) 2023

Part III Summary

16 Combine lines 7 and 15 and enter the result • If line 16 is a gain , enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. 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 7. Then, go to line 22.	16	-19,811.
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 7, 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.		
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.	21	(3,000.)

Sales and Other Dispositions of Capital Assets

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

Go to www.irs.gov/Form8949 for instructions and the latest information.

Name(s) shown on return

Paul L & [REDACTED] Militello

Social security number or taxpayer identification number

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

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

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☒ **(A)** Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
☐ **(B)** Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
☐ **(C)** Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	Tetra Technologies Inc	various	10/13/23	1,250.	1,268.	W	18.	0.
	Tetra Technologies Inc	10/16/23	11/02/23	932.	1,248.	W	316.	0.
	Tetra Technologies Inc	various	11/10/23	1,772.	2,999.	W	1,157.	-70.
2 Totals.	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).			3,954.	5,515.		1,491.	-70.

Note: If you checked Box A 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.

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service

Supplemental Income and Loss

(From rental real estate, royalties, partnerships, S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

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

OMB No. 1545-0074

2023

Attachment
Sequence No. **13**

Name(s) shown on return

Paul L & Militello

Your social security number

Part I **Income or Loss From Rental Real Estate and Royalties**

Note: If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

A Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions ☐ **Yes** ☒ **No**

B If "Yes," did you or will you file required Form(s) 1099? ☐ **Yes** ☐ **No**

1a Physical address of each property (street, city, state, ZIP code)

A 107 W Main Street Inverness FL 34450

B

C

1b	Type of Property (from list below)	2	For each rental real estate property listed above, report the number of fair rental and personal use days. Check the QJV box only if you meet the requirements to file as a qualified joint venture. See instructions.	Fair Rental Days	Personal Use Days	QJV
A	4	A		365	0	☐
B		B				☐
C		C				☐

Type of Property:

- | | | | |
|---------------------------|------------------------------|-------------|--------------------------|
| 1 Single Family Residence | 3 Vacation/Short-Term Rental | 5 Land | 7 Self-Rental |
| 2 Multi-Family Residence | 4 Commercial | 6 Royalties | 8 Other (describe) _____ |

		Properties:		
		A	B	C
Income:				
3	Rents received	3	28,988.	
4	Royalties received	4		
Expenses:				
5	Advertising	5		
6	Auto and travel (see instructions)	6		
7	Cleaning and maintenance	7	209.	
8	Commissions	8		
9	Insurance	9	4,133.	
10	Legal and other professional fees	10		
11	Management fees	11		
12	Mortgage interest paid to banks, etc. (see instructions)	12		
13	Other interest	13		
14	Repairs	14	375.	
15	Supplies	15		
16	Taxes	16		
17	Utilities	17		
18	Depreciation expense or depletion	18	5,428.	
19	Other (list) <u>Sales Tax Paid</u>	19	1,650.	
20	Total expenses. Add lines 5 through 19	20	11,795.	
21	Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21	17,193.	
22	Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	() () ()	
23a	Total of all amounts reported on line 3 for all rental properties	23a	28,988.	
b	Total of all amounts reported on line 4 for all royalty properties	23b		
c	Total of all amounts reported on line 12 for all properties	23c		
d	Total of all amounts reported on line 18 for all properties	23d	5,428.	
e	Total of all amounts reported on line 20 for all properties	23e	11,795.	
24	Income. Add positive amounts shown on line 21. Do not include any losses	24		17,193.
25	Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25	()	
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV, and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5. Otherwise, include this amount in the total on line 41 on page 2	26		17,193.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2023

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Paul L & [REDACTED] Militello

Your social security number

[REDACTED]

Caution: The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.**Part II Income or Loss From Partnerships and S Corporations**

Note: If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you **must** check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which **any** amount is **not** at risk, you **must** check the box in column (f) on line 28 and attach **Form 6198**. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section ☐ Yes ☒ No

	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
28						
A			☐		☐	☐
B			☐		☐	☐
C			☐		☐	☐
D			☐		☐	☐

Passive Income and Loss			Nonpassive Income and Loss		
	(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss allowed (see Schedule K-1)	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A					
B					
C					
D					
29a Totals					
b Totals					
30	Add columns (h) and (k) of line 29a				30
31	Add columns (g), (i), and (j) of line 29b				31 ()
32	Total partnership and S corporation income or (loss). Combine lines 30 and 31				32

Part III Income or Loss From Estates and Trusts

	(a) Name	(b) Employer identification number
33		
A	Paul R Militello Intervivos Trust	[REDACTED]
B		

Passive Income and Loss			Nonpassive Income and Loss		
	(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1	
A					
B					
34a Totals					
b Totals					
35	Add columns (d) and (f) of line 34a				35
36	Add columns (c) and (e) of line 34b				36 ()
37	Total estate and trust income or (loss). Combine lines 35 and 36				37

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs)—Residual Holder

	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
38					
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5	41	
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AN; and Schedule K-1 (Form 1041), box 14, code F. See instructions	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

Passive Activity Loss Limitations

See separate instructions.
Attach to Form 1040, 1040-SR, or 1041.
Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

2023
Attachment
Sequence No. **858**

Name(s) shown on return

Paul L & Militello

Identifying number

Part I 2023 Passive Activity Loss

Caution: Complete Parts IV and V before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation, see **Special Allowance for Rental Real Estate Activities** in the instructions.)

1a Activities with net income (enter the amount from Part IV, column (a))	1a	17,193.		
b Activities with net loss (enter the amount from Part IV, column (b))	1b	(0.)		
c Prior years' unallowed losses (enter the amount from Part IV, column (c))	1c	()		
d Combine lines 1a, 1b, and 1c	1d		17,193.	

All Other Passive Activities

2a Activities with net income (enter the amount from Part V, column (a))	2a			
b Activities with net loss (enter the amount from Part V, column (b))	2b	()		
c Prior years' unallowed losses (enter the amount from Part V, column (c))	2c	()		
d Combine lines 2a, 2b, and 2c	2d			

3 Combine lines 1d and 2d and subtract any prior year unallowed CRD. See instructions. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used	3		17,193.	
--	----------	--	---------	--

If line 3 is a loss and: • Line 1d is a loss, go to Part II.
• Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II. Instead, go to line 10.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See instructions for an example.

4 Enter the smaller of the loss on line 1d or the loss on line 3	4			
5 Enter \$150,000. If married filing separately, see instructions	5			
6 Enter modified adjusted gross income, but not less than zero. See instructions Note: If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0- on line 9. Otherwise, go to line 7.	6			
7 Subtract line 6 from line 5	7			
8 Multiply line 7 by 50% (0.50). Do not enter more than \$25,000. If married filing separately, see instructions	8			
9 Enter the smaller of line 4 or line 8. If line 3 includes any CRD, see instructions	9		0.	

Part III Total Losses Allowed

10 Add the income, if any, on lines 1a and 2a and enter the total	10			
11 Total losses allowed from all passive activities for 2023. Add lines 9 and 10. See instructions to find out how to report the losses on your tax return	11			

Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions.

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
107 W Main Street	17,193.	0.		17,193.	
Total. Enter on Part I, lines 1a, 1b, and 1c	17,193.	0.			

For Paperwork Reduction Act Notice, see instructions.

REV 02/11/24 PRO

Form **8582** (2023)

Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 2a)	(b) Net loss (line 2b)	(c) Unallowed loss (line 2c)	(d) Gain	(e) Loss
Total. Enter on Part I, lines 2a, 2b, and 2c					

Part VI Use This Part if an Amount Is Shown on Part II, Line 9. See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a).
Total			1.00		

Part VII Allocation of Unallowed Losses. See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
Total			1.00	

Part VIII Allowed Losses. See instructions.

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
Total				

► Keep for your records

Name(s) Shown on Return

Paul L & [REDACTED] Militello

Social Security Number

[REDACTED]

Form W-2 Employer	SP	Wages	Federal Tax	State Wages	State Tax
State of Florida		136,064.	19,755.		
[REDACTED]	X	52,426.	4,680.		
Totals		188,490.	24,435.		

Form W-2 Summary

Box No.	Description	Taxpayer	Spouse	Total
1	Total wages, tips and compensation:			
a	W2 box 1 statutory wages reported on Sch C . . .			
b	W2 box 1 inmate or halfway house wages . . .			
c	All other W2 box 1 wages	136,064.	52,426.	188,490.
d	Foreign wages included in total wages			
e	Unreported tips	0.	0.	0.
2	Total federal tax withheld	19,755.	4,680.	24,435.
3 & 7	Total social security wages/tips	160,200.	65,471.	225,671.
4	Total social security tax withheld	9,932.	4,059.	13,991.
5	Total Medicare wages and tips	171,353.	65,471.	236,824.
6	Total Medicare tax withheld	2,485.	949.	3,434.
8	Total allocated tips			
9	Not used			
10 a	Total dependent care benefits			
b	Offsite dependent care benefits			
c	Onsite dependent care benefits			
11	Total distributions from nonqualified plans . . .			
12 a	Total from Box 12	51,973.	13,044.	65,017.
b	Elective deferrals to qualified plans		13,044.	13,044.
c	Roth contrib. to 401(k), 403(b), 457(b) plans . .			
d 1	Elective deferrals to government 457 plans . .			
2	Non-elective deferrals to gov't 457 plans			
e	Deferrals to non-government 457 plans			
f	Deferrals 409A nonqual deferred comp plan . .			
g	Income 409A nonqual deferred comp plan . . .			
h	Uncollected Medicare tax			
i	Uncollected social security and RRTA tier 1 . .			
j	Uncollected RRTA tier 2			
k	Income from nonstatutory stock options			
l	Non-taxable combat pay			
m	QSEHRA benefits			
n	Total other items from box 12	51,973.		51,973.
14 a	Total deductible mandatory state tax			
b	Total deductible charitable contributions			
c	Total state deductible employee expenses . . .			
d	Total RR Compensation			
e	Total RR Tier 1 tax			
f	Total RR Tier 2 tax			
g	Total RR Medicare tax			
h	Total RR Additional Medicare tax			
i	Total RRTA tips			
j	Total other items from box 14	4,962.		4,962.
k	Total sick leave subject to \$511 limit			
l	Total sick leave subject to \$200 limit			
m	Total emergency family leave wages			
16	Total state wages and tips			
17	Total state tax withheld			
19	Total local tax withheld			

Interest and Dividends Summary

2023

► Keep for your records

Name(s) Shown on Return

Paul L & [REDACTED] Militello

Social Security Number

[REDACTED]

Interest Summary	Total Interest	Tax-Exempt	U.S. Government	Priv Actvy Bond
1 Seller-financed mortgage . . .				
2 From Schedule B, Part I. . . .	16,590.		492.	
3 From Schedule B, Part II . . .				
4 From K-1 Worksheets				
5 Exempt-int.divs (net of adj.) . .				
6 From Forms 6252				
7 From Forms 8814				
8 Subtotal	16,590.		492.	
Less Adjustments:				
9 U.S. savings bond interest previously reported				
10 Nominee distribution				
11 OID adjustment				
12 ABP adjustment				
13 Accrued interest	23.			
14 Other adjustment				
15 Series EE & I bond exclusion .				
16 Total Adjustments	23.			
17 Total to Schedule B, line 2 ►	16,567.			
18 Total to Form 1040, line 2a ►				
19 Total U.S. govt. interest . . ►			492.	
20 Total to Form 6251, line 2g ►				

Dividends Summary	Ordinary	Qualified	Capital Gains	Nontaxable
1 From Schedule B	4,443.	4,443.		
2 From K-1 Worksheets				
Subtotal	4,443.	4,443.		
Less Adjustments:				
4 Nominee distribution				
5 Other adjustment				
6 Total Adjustments				
7 Total to Schedule B, line 6 ►	4,443.			
8 Total qualified dividends. . . ►		4,443.		
9 Total capital gains ►				
10 Total nontaxable dividends . ►				

Capital Gains Summary	28% rate	Sec. 1250	Sec. 1202 50%	Sec. 1202 60%
1 From Schedule B				
Less Adjustments:				
2 Nominee distribution				
3 Other adjustment				
4 Total Adjustments				
5 Total to Schedule D ►				

Capital Gains Summary	Sec. 1202 75%	Sec. 1202 100%
1 From Schedule B		
Less Adjustments:		
2 Nominee distribution		
3 Other adjustment		
4 Total Adjustments		
5 Total to Schedule D ►		

Form 1099-R Summary

► Keep for your records

2023

Name(s) Shown on Return Paul L & [REDACTED] Militello					Social Security No. [REDACTED]	
Payer	SP	Gross	Taxable	Federal Tax	State Tax	IRA
Charles Schwab & Co, Inc.		10,300.	10,300.	1,030.		X

Traditional IRA Distributions			Taxpayer	Spouse
Gross	1	Total gross distributions from box 1 of Form 1099-R . .	10,300.	
	a	Less: Amounts rolled over		
	b	Less: Inherited and treat as own		
	c	Less: Other inherited IRA amount		
	d	Less: Return of contributions		
	e	Less: Qualified charitable distributions		
	f	Less: HSA funding distributions		
	2	Balance of gross traditional IRA distributions	10,300.	
	a	Gross distribution transferred to Form 8915F2, 3(a) . .		
	b	Gross distribution transferred to Form 8915F1, 3(a) . .		
	c	Gross distribution transferred to Form 8915E, 3(a) . .		
	d	Gross distribution transferred to Form 8915E, 3(a) . .		
	e	Gross distribution transferred to Form 8915D, 3(a) . .		
	f	Gross distribution transferred to Form 8915C, 3(a) . .		
	g	Qualified disaster distributions		
Taxable	h	Less: Amount rolled over		
	i	Gross distribution transferred to Form 8915F2, 3(b) . .		
	j	Gross distribution transferred to Form 8915F1, 3(b) . .		
	k	Gross distribution transferred to Form 8915E, 3(b) . .		
	l	Gross distribution transferred to Form 8915E, 3(b) . .		
	m	Gross distribution transferred to Form 8915D, 3(b) . .		
	n	Gross distribution transferred to Form 8915C, 3(b) . .		
	o	Less: Amount rolled over		
	3	Amount of line 2 converted to a Roth IRA		
	4	Net amount of line 2 converted to a Roth IRA		
	5	Amount of line 2 not converted to a Roth IRA	10,300.	
	6	Earnings on return of contributions		
	7	Taxable amount of inherited IRAs on line 1c		
	8	Taxable amount not converted to Roth IRA	10,300.	
	9	Taxable amount of Roth IRA conversions		
10	Taxable amount included on Form 1040, line 4b	10,300.		
11	If checked, taxable amount calculated on Form 8606 . .	☐	☐	

Roth IRA Distributions				
Gross	12	Total gross distributions from box 1 of Form 1099-R . .		
	a	Less: Rollover to another Roth IRA		
	b	Less: Inherited and treat as own		
	c	Less: Other inherited Roth IRA amount		
	d	Less: Return of contributions		
Qualified	e	Qualified disaster distribution		
	13	Roth IRA distributions subject to distribution rules		
Taxable	14	Total gross qualified distributions		
	a	Less: Rollover to another Roth IRA		
	b	Less: Inherited and treat as own		
	c	Less: Other inherited Roth IRA amount		
Taxable	15	Qualified distributions subject to distribution rules		
	16	Net nonqualified distributions for Form 8606		
	17	Earnings on return of contributions		
	18	Taxable amount of inherited Roth IRAs on line 12c . . .		
Taxable	19	Taxable earnings on nonqualified distributions		
	20	Taxable amount included on Form 1040, line 4b		

IRA Qualified Disaster Distributions from Forms 8915 C, D, E, F				
Taxable	20 a	Qualified distributions on Form 1040, line 4b		

Recharacterizations (See Help)				
Gross	21 a	2023 form code N (included on Form 1040, line 4a) . . .		
	b	2024 form code R (not included on 1040, line 4a) . . .		

Pensions and Annuities			Taxpayer	Spouse
Gross	22	Total gross distributions from box 1 of Form 1099-R . . .		
	a	Less: Lump sum transferred to Form 4972		
	b	Less: Amount not reported on Form 1040, line 4c		
	c	Designated Roth distribution allocated to an IRR		
	23	Amount of line 22 converted to a Roth IRA		
	24	Distributions from Canada RRP Wks, line 7a		
	25	Gross distribution transferred to Form 1040, line 5a (if partially taxable) or line 5b (if fully taxable)		
	a	Less: Amount rolled over		
	b	Amount attributable to an in-plan Roth rollover		
	c	Gross distribution transferred to Form 8915F2, 2(a)		
	d	Gross distribution transferred to Form 8915F1, 2(a)		
	e	Gross distribution transferred to Form 8915E, 2(a)		
	f	Gross distribution transferred to Form 8915E, 2(a)		
	g	Gross distribution transferred to Form 8915D, 2(a)		
	h	Gross distribution transferred to Form 8915C, 2(a)		
	i	Qualified disaster distribution		
	j	Less: Amount rolled over		
	k	Gross distribution transferred to Form 8915F2, 2(b)		
	l	Gross distribution transferred to Form 8915F1, 2(b)		
	m	Gross distribution transferred to Form 8915E, 2(b)		
n	Gross distribution transferred to Form 8915E, 2(b)			
o	Gross distribution transferred to Form 8915D, 2(b)			
p	Gross distribution transferred to Form 8915C, 2(b)			
Taxable	26	Taxable amount in box 2a, Form 1099-R		
	a	Taxable amount rolled over		
	b	Non-taxable amount rolled over		
	c	Designated Roth contribution basis rolled to Roth IRA . . .		
	d	Insurance premiums for retired public safety officers . . .		
	e	Qualified disaster amount to Forms 8915 C, D, E, F		
	27	Lump sum amount transferred to Form 4972		
	28	Amount transferred to Form 1040, line 1		
	a	Disability before minimum retirement age		
	b	Return of contributions		
	c	Insurance premiums for retired public safety officers . . .		
	29	Nontaxable amount from Simplified Method		
	30	Capital gains from charitable gift annuities		
	a	Capital gain subject to the 28% rate		
	b	Unrecaptured section 1250 gain		
	31	Taxable amount of Roth IRA conversions		
	a	Taxable amount of in-plan Roth rollovers		
	32 a	Taxable amount of distributions		
	b	Taxable distributions from Canada RRP Wks, line 7b . . .		
	c	Taxable disaster distributions Forms 8915 C, D, E, F . . .		
d	Taxable amount transferred to Form 1040, line 5b			

Section 1035 Tax-free Exchange

Pensions IRAs	33	Total gross distributions from box 1 of Form 1099-R . . .		
	34	Total gross distributions from box 1 of Form 1099-R . . .		

Distributions on 2023 1099-Rs Not Reported on the 2023 Return

Code P	35	Distribution reported on 2022 tax return		
Code R	36	Recharacterizations of prior year contributions or conversions. Need not be reported on tax return.		

Tax Withholding

Box 4	37	Total federal tax withheld	1,030.	
Box 14	38	Total state tax withheld		
Box 17	39	Total local tax withheld		

Nontaxable Distributions for Sales Tax Deduction

	40	Nontaxable IRA distributions	0.	
	41	Nontaxable pension distributions		

Health Insurance Premiums

	42	Health insurance deductible on Schedule A		
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Taxable Distributions included in Net Investment Income

	43	Annuity payments and other distributions that may be subject to the net investment income tax		
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Tax Year 2023

- Keep for your records

Paul L & [REDACTED] Militello
Sch E - 107 W Main Street

[illegible]

* Code: S = Sold, A = Auto, L = Listed, V = Vine with SDA in Year Planted/Grafted, X = Non-depreciated asset, H = Home Office

Two-Year Comparison

2023

Name(s) Shown on Return

Paul L & [REDACTED] Militello

Social Security Number

Income	2022	2023	Difference	%
Wages, salaries, tips, etc	138,911.	188,490.	49,579.	35.69
Interest and dividend income	9,105.	21,010.	11,905.	130.75
State tax refund				
Business income (loss)				
Capital and other gains (losses)		-3,000.	-3,000.	
IRA distributions	11,901.	10,300.	-1,601.	-13.45
Pensions and annuities				
Rents and royalties	20,323.	17,193.	-3,130.	-15.40
Partnerships, S Corps, etc				
Farm income (loss)				
Social security benefits				
Income other than the above				
Total Income	180,240.	233,993.	53,753.	29.82
Adjustments to Income	1,419.		-1,419.	-100.00
Adjusted Gross Income	178,821.	233,993.	55,172.	30.85
Itemized Deductions				
Medical and dental	0.		0.	
Income or sales tax	1,460.	1,978.	518.	35.48
Real estate taxes	2,366.	2,286.	-80.	-3.38
Personal property and other taxes				
Interest paid				
Gifts to charity	3,095.	3,430.	335.	10.82
Casualty and theft losses				
Miscellaneous				
Total Itemized Deductions	6,921.	7,694.	773.	11.17
Standard or Itemized Deduction	25,900.	27,700.	1,800.	6.95
Qualified Business Income Deduction				
Taxable Income	152,921.	206,293.	53,372.	34.90
Income tax	24,576.	35,910.	11,334.	46.12
Additional income taxes				
Alternative minimum tax				
Total Income Taxes	24,576.	35,910.	11,334.	46.12
Nonbusiness credits				
Business credits				
Total Credits				
Self-employment tax				
Other taxes				
Total Tax After Credits	24,576.	35,910.	11,334.	46.12
Withholding	22,156.	25,465.	3,309.	14.94
Estimated and extension payments				
Earned income credit				
Additional child tax credit				
Other payments				
Total Payments	22,156.	25,465.	3,309.	14.94
Form 2210 penalty		81.	81.	
Applied to next year's estimated tax				
Refund				
Balance Due	2,420.	10,526.	8,106.	334.96

Current year effective tax rate 15.35 %

Schedule E Two-Year Comparison

2023

► Keep for your records

Name(s) Shown on Return Paul L & [REDACTED] Militello	Social Security Number [REDACTED]
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Property Location

107 W Main Street, Inverness, FL 34450

Note: Transferred data will not be displayed in the prior year column unless you have entered current year data on the Schedule E Worksheet.

	2022	2022 Percent of Income*	2023	2023 Percent of Income*	2022 to 2023 Comparison ☒ as amount ☐ as percent
Income:					
1 Rental income	34,288.	100.00	28,988.	100.00	-5300.00
2 Royalty income.					
Expenses:					
3 Advertising					
4 Auto.					
5 Travel					
6 Cleaning & maintenance			209.	0.72	209.00
7 Commissions.					
8 Insurance:					
a Mortgage Insur qualified.					
b Other insurance	3,136.	9.15	4,133.	14.26	997.00
9 Legal & professional. . .					
10 Management fees					
11 Mortgage interest:					
a Qualified					
b Other					
12 Other interest.					
13 Repairs	3,780.	11.02	375.	1.29	-3405.00
14 Supplies					
15 a Real estate taxes					
b Other taxes					
16 Utilities					
17 a Depreciation	5,429.	15.83	5,428.	18.72	-1.00
b Depletion					
c Depreciation carryover .					
18 a Other expenses	1,620.	4.72	1,650.	5.69	30.00
b Indirect operating exp . .					
c Operating exp carryover.					
d Vehicle rental.					
e Amortization					
19 Total expenses.	13,965.	40.73	11,795.	40.69	-2170.00
20 Income or (loss)	20,323.	59.27	17,193.	59.31	-3130.00
21 Deductible rental loss .					
Passive suspended losses:					
Schedule E					
Form 4797.					
Schedule D					

*Lines 1 through 20 as a percentage of income.

Tax History Report

2023

► Keep for your records

Name(s) Shown on Return

Paul L & [REDACTED] Militello

	Five Year Tax History:				
	2019	2020	2021	2022	2023
Filing status	Single	Single	MFJ	MFJ	MFJ
Total income	142,175.	164,465.	147,675.	180,240.	233,993.
Adjustments to income		300.		1,419.	
Adjusted gross income	142,175.	164,165.	147,675.	178,821.	233,993.
Tax expense	5,260.	5,562.	3,174.	3,826.	4,264.
Interest expense . . .	3,914.	2,191.			
Contributions	240.	446.	650.	3,095.	3,430.
Misc. deductions . . .					
Other itemized ded'ns					
Total itemized/ standard deduction . .	12,200.	12,400.	25,700.	25,900.	27,700.
QBI deduction					
Taxable income	129,975.	151,765.	121,975.	152,921.	206,293.
Tax	25,140.	29,208.	18,044.	24,576.	35,910.
Alternative min tax . .					
Total credits	500.	500.			
Other taxes					
Payments	20,698.	29,306.	23,632.	22,156.	25,465.
Form 2210 penalty . .	32.	26.			81.
Amount owed	3,974.			2,420.	10,526.
Applied to next year's estimated tax .					
Refund		572.	5,588.		
Effective tax rate % . .	17.33	17.49	12.22	13.74	15.35
**Tax bracket %	24.0	24.0	22.0	22.0	24.0

**Tax bracket % is based on Taxable income.