

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 05/01/2024

General Information

Name: Hon A Kathleen McNeilly

CONFIDENTIAL

PID 266199

AGENCY INFORMATION

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

Net Worth

My Net Worth as of April 30, 2024 was \$ 5,088,973.11.

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 \$ 37,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
FIDELITY PORTFOLIO MUTUAL FUNDS (BAL, DIV GROWTH, LPS)	\$ 795,491.19
T. ROWE PRICE PORTFOLIO MUTUAL FUNDS (CAP APPREC, HEALTH SCIENCES)	\$ 1,137,362.59
VANGUARD PORTFOLIO MUTUAL FUNDS (HEALTHCARE ADMIRAL, WELLINGTON ADMIRAL)	\$ 1,659,476.05
VANGUARD VARIABLE ANNUITY now serviced by TRANSAMERICA	\$ 587,924.96
FRS, 3% CONTRIBUTION	\$ 36,662.19
FL STATE DEFERRED INCOME (T. ROWE PRICE CAP APPREC) now serviced by NATIONWIDE	\$ 235,950.80
TRUIST accounts total	\$ 104,757.52
WELLS FARGO accounts total	\$ 30,000.00
TD account total	\$ 14,347.81
PRIMARY RESIDENCE	\$ 250,000.00
SECONDARY RESIDENCE	\$ 200,000.00
AUTOMOBILE 2020 CHRYSLER 300 LX	\$ 22,000.00
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. 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
CIRCUIT JUDGE SALARY see attached	State of Florida	\$ 191,163.00
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
N/A			

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: 05/01/2024

Filed with COE: 05/01/2024

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning _____, ending _____, See separate instructions.

Your first name and middle initial A. Kathleen McNeilly		Last name	Your social security number [REDACTED]
If joint return, spouse's first name and middle initial		Last name	Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. [REDACTED]			Apt. no.
City, town, or post office. If you have a foreign address, also complete spaces below. [REDACTED]			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

Filing Status ☒ Single ☐ Head of household (HOH)
Check only one box. ☐ Married filing jointly (even if only one had income) ☐ Married filing separately (MFS) ☐ Qualifying surviving spouse (QSS)
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):		(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.	1a Total amount from Form(s) W-2, box 1 (see instructions).....	1a	150,395.
	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	150,395.
Attach Sch. B if required.	2a Tax-exempt interest.....	2a	
	2b Taxable interest.....	2b	114.
	3a Qualified dividends.....	3a	13,908.
	3b Ordinary dividends.....	3b	20,886.
	4a IRA distributions.....	4a	7,506.
	4b Taxable amount.....	4b	6.
	5a Pensions and annuities.....	5a	
	5b Taxable amount.....	5b	
	6a Social security benefits.....	6a	
	6b Taxable amount.....	6b	
Standard Deduction for — • Single or Married filing separately, \$13,850 • Married filing jointly or Qualifying surviving spouse, \$27,700 • Head of household, \$20,800 • If you checked any box under Standard Deduction, see instructions.	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	70,957.
	8 Additional 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	242,358.
	10 Adjustments to income from Schedule 1, line 26.....	10	
	11 Subtract line 10 from line 9. This is your adjusted gross income	11	242,358.
	12 Standard deduction or itemized deductions (from Schedule A).....	12	13,850.
	13 Qualified business income deduction from Form 8995 or Form 8995-A.....	13	13.
	14 Add lines 12 and 13.....	14	13,863.
	15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income	15	228,495.

Tax and Credits

16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814	16	40,601.
2	☐ 4972	3	☐
17	Amount from Schedule 2, line 3.	17	
18	Add lines 16 and 17.	18	40,601.
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	40,601.
23	Other taxes, including self-employment tax, from Schedule 2, line 21.	23	1,610.
24	Add lines 22 and 23. This is your total tax .	24	42,211.

Payments

25	Federal income tax withheld from:		
a	Form(s) W-2.	25a	27,203.
b	Form(s) 1099.	25b	
c	Other forms (see instructions).	25c	
d	Add lines 25a through 25c.	25d	27,203.
26	2023 estimated tax payments and amount applied from 2022 return.	26	17,200.
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	44,403.

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	2,192.
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 2024 estimated tax .	36	2,192.

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

Joint return?
See instructions.
Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
Phone no. (386) [REDACTED]	Email address		

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed
John A. Shelley			P00129604	
Firm's name	Firm's address		Phone no.	Firm's EIN
SHELLEY & SHELLEY CPA PA	1515 Herbert St, Ste 213 Port Orange, FL 32129		386-322-3787	48-1290481

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

Form 1040 (2023)

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

Your social security number

A. Kathleen McNeilly

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:

Wells Fargo Bank, N.A.

Amount

114.

1

- 2** Add the amounts on line 1. **2** **114.**
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** **114.**

Note: If line 4 is over \$1,500, you must complete Part III.

Amount

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:

Fidelity Balanced

2,298.

Fidelity Dividend Growth

1,204.

Fidelity Low Priced Stock

1,654.

T Rowe Price-Capital Apprec

7,012.

Vanguard Marketing Corp

7,483.

Vanguard-Health Care Fund

336.

Vanguard-Wellington Fund Admiral

899.

5

- 6** Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b. **6** **20,886.**

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.

- 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. **Yes** **No**

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. **X**

- 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: **X**

- 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**