

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 06/05/2024

General Information

Name: Mrs Kimberly Mason

PID 299146

AGENCY INFORMATION

Organization	Suborganization	Title
Ponce De Leon	Town Council	Council Member

Net Worth

My Net Worth as of June 5, 2024 was \$ 3,000.00.

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, whether owned or leased.

The aggregate value of my household goods and personal effect is \$ 3,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
N/A	

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Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Avant	Box 25101, 2550 Cerrillos Road, Santa Fe, New Mexico 87504.	\$ 2,800.00
Merrick Bank	10705 S Jordan Gateway, South Jordan, UT 84095	\$ 1,500.00
Credit One	P.O. Box 60500, City of Industry, CA 91716-0500.	\$ 1,300.00
Aidvantage	P.O. Box 4450 Portland, OR 97208-4450	\$ 30,100.00

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
Exeter	P.O. Box 166008 Irving, TX 75016	\$ 15,000.00

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
Holmes County School Board	701 East Pennsylvania Ave. Bonifay FL 32425	\$ 19,899.45
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

This section applies only to a Constitutional or elected municipal officer, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

- ☒ I certify that I have completed the required training under Section 112.3142, F.S.
- ☐ Required training under Section 112.3142, F.S., not applicable to filer 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.

Kimberly Mason

Digitally signed: 06/05/2024

Filed with COE: 06/05/2024

Payrolls thru 12/31/2023
This statement is intended to explain how the
amounts on your W-2 form are calculated

Loc:
KIMBERLY E MASON
PO BOX 253

SS#: . .

PONCE DE LEON FL 32455

EIC:

Gross Earnings	25,747.21	---	VOLUNTARY DEDUCTIONS	---
- Retirement	0.00		FBLU_EMP ONLY	118.48
- Flex Benefit Plan	0.00		AMFIDELITY_PROD	157.24
- Other	0.00		TEXAS LIFE	762.00
- Deferred 401(k)	0.00	(Box 12/D)	WASHINGTON NATL	35.91
- Deferred 403(b)	792.00	(Box 12/E)	----- OTHER DEFERRED -----	
- Deferred 408(k) (6)	0.00	(Box 12/F)	AMFIDLTY_P_CAFE	268.80
- Deferred 457(b)	0.00	(Box 12/G)	DENTAL_EMP_CAFE	311.04
- Deferred 501(c) (18) (D)	0.00	(Box 12/H)	VISION-EMP_CAFE	80.40
- Emp Business Expenses	0.00	(Box 12/L)	FRS EMPL CONT	757.47
- Empr-provided Adopt Ben	0.00	(Box 12/T)		
- Health Savings Acct (HSA)	0.00	(Box 12/W)		
- Inc Qual Eqty Grnt S83(i)	0.00	(Box 12/GG)		
- AD S83(i) Elct Close Cal	0.00	(Box 12/HH)		
- Other Deferred	1,417.71			
+ Excess Life Insurance	0.00	(Box 12/C)		
+ Taxable Benefits	0.00			
= Taxable Wages	23,537.50	(Box 1)		
- Federal Tax	645.20	(Box 2)		
+ EIC	0.00	(Box 9)		
+ Reimburse/Reclass Deds	0.00			
+ Reimburse/Non Tax Travel	0.00			
- Social Security Tax	1,555.44	(Box 4)		
- Medicare Tax	363.78	(Box 6)		
- State Tax	0.00	(Box 17)		
- Voluntary Deductions	1,073.63			
- Excess Life Insurance	0.00	(Box 12/C)		
- Taxable Benefits	0.00			
= Net Pay	19,899.45			

** Employee Business Expense - The amount included in Box 1 is the excess amount of the per diem or allowance paid. This excess amount is subject to income tax withholding, social security, Medicare, and FUTA taxes. The amount shown in Box 12 (L) is the amount equal to the nontaxable portion that does not exceed the current IRS rates.

NOTICE OF POSSIBLE FEDERAL TAX REFUND DUE TO THE EARNED INCOME CREDIT (EIC)

You may be able to take the EIC for 2023 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You cannot take the EIC if your investment income is more than the specified amount for 2023 or if income is earned for services provided while you were an inmate at a penal institution. For 2023 income limits and more information, visit www.irs.gov/eitc. Also see Pub. 596, Earned Income Credit. ANY EIC THAT IS MORE