

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 07/01/2024

General Information

Name: Hon Chad Keflin Alvaro

CONFIDENTIAL

PID 273888

AGENCY INFORMATION

Organization	Suborganization	Title
Judicial Circuit (9Th)	Elected Constitutional Officer	

Net Worth

My Net Worth as of June 30, 2024 was \$ 634,388.43.

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 \$ 10,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
Primary Residence	\$ 1,100,000.00
PNC Bank Accounts (3)	\$ 12,736.43
Investment Product Ending {REDACTED}	\$ 26,945.72
Investment Product Ending {REDACTED}	\$ 5,319.12
Investment Product Ending {REDACTED}	\$ 5,174.73
Estate of Fred Alvaro	\$ 1,500.00
Auto - 2016 BMW	\$ 16,214.00
Auto - 2019 Subaru	\$ 27,334.00
See Attached	

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 07/01/2024

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
PennyMac (Primary Real Property Mortgage)	3043 Townsgate Rd, Suite 200, Westlake Village, CA 91361	\$ 498,818.16
Sloan Servicing (Educational Loans)	P.O. Box 82561 Lincoln, NE 68501-2561	\$ 22,705.27
PNC Bank (Home Equity LOC)	500 First Ave, Mailstop P7-PFSC-01-S, Pittsburgh, PA 15219	\$ 48,092.11
PNC Bank (Unsecured LOC)	500 First Ave, Mailstop P7-PFSC-01-S, Pittsburgh, PA 15219	\$ 1,220.03
See Attached		

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.

Chad Keflin Alvaro

Digitally signed: 07/01/2024

Filed with COE: 07/01/2024

SCHEDULE A**ASSETS¹**

Description	Value
Residential Real Property (primary homestead; [REDACTED])	\$1,100,000.00
Auto – 2016 BMW 528i (mileage: approx. 45,000)	\$16,214.00
Auto – 2019 Subaru Ascent (mileage: approx. 25,000)	\$27,334.00
PNC Bank Accounts (Savings, Checking, Checking)	\$12,736.43
Investment Products Contained in IRA Account No. ending [REDACTED] (detail below)	\$26,945.72
Investment Products Contained in Brokerage Account No. ending [REDACTED] (detail below)	\$5,319.12
Investment Products Contained in Brokerage Account No. ending [REDACTED] (detail below)	\$5,174.73
Other Household Goods and Personal Effects	\$10,000.00
Estate of Fred Alvaro (estimated; estate not finally administered)	\$1,500
Total	\$1,205,224.00

DETAIL: INVESTMENT PRODUCTS CONTAINED IN IRA ACCOUNT NO. ENDING 2133

Description	Qty.	Price Per	Value
[REDACTED] BRIDGEWATER BANK BLOOMINGTON MN CD FDIC	60	99.226	\$5,953.56
ISHARES CORE S&P 500 ETF	37.548	\$547.74	20,566.54
Cash and Cash Equiv.	n/a	n/a	\$425.62
Total			\$26,945.72

DETAIL: INVESTMENT PRODUCTS CONTAINED IN BROKERAGE ACCOUNT NO. ENDING 0133

Description	Qty.	Price Per	Value
FUTURE SCHOLAR 529 COLUMBIA AGGRESSIVE TRACK AGES 8-9 CL A	136.698	\$38.180	\$5,219.12
Cash and Cash Equiv.	n/a	n/a	\$100.00
Total			\$5,319.12

DETAIL: INVESTMENT PRODUCTS CONTAINED IN IRA ACCOUNT NO. ENDING 1133

Description	Qty.	Price Per	Value
FUTURE SCHOLAR 529 COLUMBIA AGGRESSIVE TRACK AGES 10-11 CL A	152.532	\$33,270	\$5,074.73
Cash and Cash Equiv.	n/a	n/a	\$100
Total			\$5,174.73

¹Valuation as of June 30, 2024.

SCHEDULE B

LIABILITIES¹

Description	Value
PennyMac Mortgage re Residential Real Property	\$498,818.16
Educational Loans	\$22,705.27
Home Equity Line of Credit	\$48,092.11
Unsecured Credit Line Account No. ending [REDACTED]	\$1,220.03
Total	\$570,835.57

¹Valuation as of June 30, 2024.

MCDIRMIT DAVIS LLC
934 NORTH MAGNOLIA AVENUE
SUITE 100
ORLANDO, FL 32803

APRIL 17, 2024

CHAD K. & [REDACTED] ALVARO
[REDACTED]

DEAR MR. & MRS. ALVARO:

ENCLOSED IS YOUR 2023 INCOME TAX RETURN, AS FOLLOWS...

2023 U.S. INDIVIDUAL INCOME TAX RETURN

PLEASE REVIEW THE RETURN FOR COMPLETENESS AND ACCURACY.

BEGINNING JANUARY 1, 2024, THE FINANCIAL CRIMES ENFORCEMENT NETWORK (FINCEN) BEGAN IMPLEMENTING A BENEFICIAL OWNERSHIP INFORMATION REPORTING RULE FOR CERTAIN ENTITIES. THE REPORTING RULE REQUIRES "REPORTING COMPANIES" TO FILE BENEFICIAL OWNERSHIP INFORMATION REPORTS CONTAINING INFORMATION ABOUT THE ENTITY ITSELF AND CERTAIN CLASSIFICATIONS OF INDIVIDUALS INVOLVED IN THE BUSINESS. BOI REPORTS MUST BE FILED ELECTRONICALLY USING FINCEN'S SECURE FILING SYSTEM. FOR ENTITIES REGISTERED TO DO BUSINESS BEFORE JANUARY 1, 2024, THESE REPORTS WILL BE DUE JANUARY 1, 2025.

THE REPORTING RULE REQUIRES THAT ALL "REPORTING COMPANIES" FILE BOI REPORTS WITH FINCEN. A REPORTING COMPANY IS ANY ENTITY THAT MEETS THE "REPORTING COMPANY" DEFINITION AND DOES NOT QUALIFY FOR ONE OF THE 23 LISTED EXEMPTIONS. THE EXEMPTIONS COVER MANY TAXPAYERS. IF YOU DETERMINE THAT YOUR BUSINESS IS A "REPORTING COMPANY", YOU WILL NEED TO REPORT THE REQUIRED INFORMATION INCLUDING INFORMATION ON YOUR BENEFICIAL OWNERS AND COMPANY APPLICANTS.

ASSISTING YOU WITH YOUR COMPLIANCE WITH THE BOI REPORTING IS NOT WITHIN THE SCOPE OF THIS ENGAGEMENT. YOU HAVE SOLE RESPONSIBILITY FOR YOUR COMPLIANCE WITH THE BOI REPORTING REQUIREMENTS AND THE COLLECTION OF RELEVANT OWNERSHIP INFORMATION. MCDIRMIT DAVIS SHALL HAVE NO LIABILITY RESULTING FROM YOUR FAILURE TO COMPLY WITH THE BOI REPORTING. INFORMATION REGARDING THE BOI REPORTING REQUIREMENTS CAN BE FOUND AT [FINCEN.GOV/BOI](https://www.fincen.gov/boi). CONSIDER CONSULTING WITH LEGAL COUNSEL IF YOU HAVE QUESTIONS REGARDING THE APPLICABILITY OF THE BOI REPORTING REQUIREMENTS AND ISSUES SURROUNDING THE COLLECTION OF RELEVANT OWNERSHIP INFORMATION.

WE PREPARED THE RETURNS FROM INFORMATION YOU FURNISHED US WITHOUT VERIFICATION. UPON EXAMINATION OF THE RETURNS BY TAXING AUTHORITIES, REQUESTS MAY BE MADE FOR UNDERLYING DATA. WE THEREFORE RECOMMEND THAT YOU PRESERVE ALL RECORDS WHICH YOU MAY BE CALLED UPON TO PRODUCE IN CONNECTION WITH SUCH AN EXAMINATION.

INSTRUCTIONS FOR FILING THE ABOVE FORMS ARE FURNISHED FOR EASY REFERENCE.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX RETURNS.

VERY TRULY YOURS,

MARIA NOVOTNY, CPA

2023 TAX RETURN FILING INSTRUCTIONS

U.S. INDIVIDUAL INCOME TAX RETURN

FOR THE YEAR ENDING
DECEMBER 31, 2023

PREPARED FOR:

CHAD K. & [REDACTED] ALVARO
[REDACTED]

PREPARED BY:

MCDIRMIT DAVIS LLC
934 N. MAGNOLIA AVE.
ORLANDO, FL 32803

AMOUNT OF TAX:

TOTAL TAX	\$	56,771
LESS: PAYMENTS AND CREDITS	\$	46,824
PLUS: INTEREST AND PENALTIES	\$	83
BALANCE DUE	\$	10,030

OVERPAYMENT:

NOT APPLICABLE

MAKE CHECK PAYABLE TO:

UNITED STATES TREASURY

DUE TO IRS PROCESSING DELAYS, WE HIGHLY RECOMMEND USING DIRECT PAY OR PAYING BY CREDIT CARD THROUGH THE IRS WEBSITE. YOU CAN SUBMIT YOUR PAYMENT USING THESE OPTIONS BY VISITING [HTTPS://WWW.IRS.GOV/PAYMENTS](https://www.irs.gov/payments) .

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING AND THE PRACTITIONER PIN PROGRAM HAS BEEN ELECTED. AFTER REVIEWING THE RETURN, PLEASE SIGN AND RETURN FORM 8879 TO OUR OFFICE. WE WILL THEN TRANSMIT YOUR RETURN ELECTRONICALLY TO THE IRS.

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE IRS.

YOUR CHECK FOR \$10,030, PAYABLE TO THE UNITED STATES TREASURY, MUST BE PAID BY APRIL 30, 2024. BE SURE TO INCLUDE YOUR PAYMENT WITH FORM 1040-V, FORM 1040 PAYMENT VOUCHER. INCLUDE YOUR SOCIAL SECURITY NUMBER, DAYTIME PHONE NUMBER, AND THE WORDS "2023 FORM 1040" ON YOUR CHECK. OR YOU CAN GO TO THE IRS WEBSITE.

INTERNAL REVENUE SERVICE
P.O. BOX 1214
CHARLOTTE, NC 28201-1214

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

CHAD K. ALVARO

Social security number

*** **

Spouse's name

ALVARO

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	289,121.
2	Total tax	2	56,771.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	46,824.
4	Amount you want refunded to you	4	
5	Amount you owe	5	9,947.

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 * INCLUDES LATE PENALTIES AND INTEREST: 10,030.

☒ I authorize MCDIRMIT DAVIS LLC to enter or generate my PIN as my signature on the income tax return (original or amended) I am now authorizing. Enter five digits, but don't enter all zeros

☐ 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 ► 04/17/2024

Spouse's PIN: check one box only

☒ I authorize MCDIRMIT DAVIS LLC to enter or generate my PIN as my signature on the income tax return (original or amended) I am now authorizing. Enter five digits, but don't enter all zeros

☐ 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 ► 04/17/2024

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 ►

04-01-23

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

**Tax Year 2023 e-file Jurat/Disclosure
for Form 1040 or 1040NR
using Practitioner PIN method
(with or without Electronic Funds Withdrawal)**

ERO Declaration

I declare that the information contained in this electronic tax return is the information furnished to me by the taxpayer. If the taxpayer furnished me a completed tax return, I declare that the information contained in this electronic tax return is identical to that contained in the return provided by the taxpayer. If the furnished return was signed by a paid preparer, I declare I have entered the paid preparer's identifying information in the appropriate portion of this electronic return. If I am the paid preparer, under the penalties of perjury I declare that I have examined this electronic return, and to the best of my knowledge and belief, it is true, correct, and complete. This declaration is based on all information of which I have any knowledge.

ERO Signature

I am signing this Tax Return by entering my PIN below.

ERO's PIN

██████████

(enter EFIN plus 5 self-selected numerics)

Taxpayer Declarations

Perjury Statement

Perjury Statement (1040 and 1040NR)

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 the taxpayer) is based on all information of which the preparer has any knowledge.

Perjury Statement (104X)

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

Consent to Disclosure

I consent to allow my Intermediate Service Provider, transmitter, or Electronic Return Originator (ERO) to send my return/form to IRS and to receive the following information from IRS: a) an acknowledgment of receipt or reason for rejection of transmission; b) the reason for any delay in processing or refund; and, c) the date of any refund.

Electronic Funds Withdrawal Consent

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 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 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 am signing this Tax Return and Electronic Funds Withdrawal Consent, if applicable, by entering my Self-Select PIN below.

Taxpayer's PIN:

██████████

Date 04172024

Spouse's PIN:

██████████

2023

Form 1040-V

Department of the Treasury
Internal Revenue Service

Paperwork Reduction Act Notice.

We ask for the information on Form 1040-V to help us carry out the Internal Revenue laws of the United States. If you use Form 1040-V, you must provide the requested information. Your cooperation will help us ensure that we are collecting the right amount of tax.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Internal Revenue Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For the estimated averages, see the instructions for your income tax return. If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

05-01-23

LHA

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

▼ DETACH HERE ▼

Form **1040-V** (2023)

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0074

2023

Form 1040-V Payment Voucher

- ▶ Use this voucher when making a payment with Form 1040
- ▶ Do not staple this voucher or your payment to Form 1040
- ▶ Make your check or money order payable to the "United States Treasury."
- ▶ Write your social security number (SSN) on your check or money order.

Enter the amount of your payment ▶	Dollars	Cents
	10,030	

1019

CHAD K. & [REDACTED] ALVARO

P.O. BOX 1214
CHARLOTTE, NC 28201-1214

05-01-23

▼ DETACH HERE ▼

Form

4868

Department of the Treasury
Internal Revenue Service (99)

For calendar year 2023, or other tax year beginning

, 2023, ending

1019

2023

Part I Identification

1 Your name(s)

CHAD K. ALVARO & [REDACTED] ALVARO

2 Your social security number

*** - ** - [REDACTED]

3 Spouse's social security number

*** - ** - [REDACTED]

Part II Individual Income Tax

4 Estimate of total tax liability for 2023 \$ 0.

5 Total 2023 payments 0.

6 Balance due. Subtract line 5
from line 4 0.

7 Amount you are paying 0.

8 Check here if you are "out of the country" and a U.S.
citizen or resident ☐

9 Check here if you file Form 1040NR or 1040NR-EZ and did not receive
wages as an employee subject to U.S. income tax withholding ☐

For the year Jan. 1 - Dec. 31, 2023, or other tax year beginning _____, ending _____

See separate instructions.

Your first name and middle initial
CHAD K.

Last name
ALVARO

Your social security number
***** - ** - [REDACTED]**

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

Last name
ALVARO

Spouse's social security number
***** - ** - [REDACTED]**

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

Apt. no.
[REDACTED]

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

City, town, or post office. If you have a foreign address, also complete spaces below.
[REDACTED]

State
[REDACTED]

ZIP code
[REDACTED]

Foreign country name
[REDACTED]

Foreign province/state/county
[REDACTED]

Foreign postal code
[REDACTED]

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 instr.):	
(1) First name Last name				Child tax credit	Credit for other dependents
[REDACTED] ALVARO		*** - ** - [REDACTED]	SON	☒	
[REDACTED] ALVARO		*** - ** - [REDACTED]	DAUGHTER	☒	
If more than four dependents, see instr. and check here ☐					

Income

1a Total amount from Form(s) W-2, box 1 (see instructions) **STMT 1** 1a **176,621.**

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 **176,621.**

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

Attach Sch. B if required.

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.

2a Tax-exempt interest 2a

3a Qualified dividends 3a

4a IRA distributions 4a

5a Pensions and annuities 5a

6a Social security benefits 6a

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 ☐

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 **289,121.**

10 Adjustments to income from Schedule 1, line 26 10

11 Subtract line 10 from line 9. This is your **adjusted gross income** 11 **289,121.**

12 **Standard deduction or itemized deductions** (from Schedule A) 12 **27,782.**

13 Qualified business income deduction from Form 8995 or Form 8995-A 13

14 Add lines 12 and 13 14 **27,782.**

15 Subtract line 14 from line 11. If zero or less, enter -0-. This is your **taxable income** 15 **261,339.**

b Taxable interest 2b

b Ordinary dividends 3b

b Taxable amount 4b **112,500.**

b Taxable amount 5b

b Taxable amount 6b

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

Form **1040** (2023)

12-04-23

5

Tax and Credits

16	Tax (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐	16	49,521.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	49,521.
19	Child tax credit or credit for other dependents from Schedule 8812	19	4,000.
20	Amount from Schedule 3, line 8	20	
21	Add lines 19 and 20	21	4,000.
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	45,521.
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	11,250.
24	Add lines 22 and 23. This is your total tax	24	56,771.

Payments

25	Federal income tax withheld from:		
a	Form(s) W-2	SEE STATEMENT 3	25a 24,324.
b	Form(s) 1099	SEE STATEMENT 7	25b 22,500.
c	Other forms (see instructions)		25c
d	Add lines 25a through 25c		25d 46,824.
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	46,824.

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	
b	Routing number	c Type: ☐ Checking ☐ Savings	
d	Account number		
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	9,947.
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 **MARIA NOVOTNY, CPA** Phone no. **407-843-5406** Personal identification number (PIN) [REDACTED]

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.

Sign Here

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		JUDGE	[REDACTED]
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.)
		HOMEMAKER	[REDACTED]

Phone no. [REDACTED] Email address **CHADKEFLIN@ME.COM**

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed
MARIA NOVOTNY, CPA			P01037824	

Firm's name	Phone no.
MCDIRMIT DAVIS LLC	407-843-5406
934 N. MAGNOLIA AVE.	Firm's EIN
ORLANDO, FL 32803	** - ***4117

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

Form 1040 (2023)

SEE STMT FOR INT AND PEN NOT INCLUDED. TOTAL DUE \$10030

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

CHAD K. & [REDACTED] ALVARO

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	
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	

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 8i 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 1 (Form 1040) 2023

SCHEDULE 2
(Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Taxes

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. **02**

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

CHAD K. & [REDACTED] ALVARO

Your social security number

***** - ** - [REDACTED]**

Part I Tax

1	Alternative minimum tax. Attach Form 6251	1	0.
2	Excess advance premium tax credit repayment. Attach Form 8962	2	
3	Add lines 1 and 2. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 17	3	0.

Part II Other Taxes

4	Self-employment tax. Attach Schedule SE	4	
5	Social security and Medicare tax on unreported tip income. Attach Form 4137	5	
6	Uncollected social security and Medicare tax on wages. Attach Form 8919	6	
7	Total additional social security and Medicare tax. Add lines 5 and 6	7	
8	Additional tax on IRAs or other tax-favored accounts. Attach Form 5329 if required If not required, check here ☒	8	11,250.
9	Household employment taxes. Attach Schedule H	9	
10	Repayment of first-time homebuyer credit. Attach Form 5405 if required	10	
11	Additional Medicare Tax. Attach Form 8959	11	
12	Net investment income tax. Attach Form 8960	12	
13	Uncollected social security and Medicare or RRTA tax on tips or group-term life insurance from Form W-2, box 12	13	
14	Interest on tax due on installment income from the sale of certain residential lots and timeshares	14	
15	Interest on the deferred tax on gain from certain installment sales with a sales price over \$150,000	15	
16	Recapture of low-income housing credit. Attach Form 8611	16	

(continued on page 2)

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

Schedule 2 (Form 1040) 2023

Part II Other Taxes (continued)

17	Other additional taxes:			
a	Recapture of other credits. List type, form number, and amount	17a		
b	Recapture of federal mortgage subsidy, if you sold your home see instructions	17b		
c	Additional tax on HSA distributions. Attach Form 8889	17c		
d	Additional tax on an HSA because you didn't remain an eligible individual. Attach Form 8889	17d		
e	Additional tax on Archer MSA distributions. Attach Form 8853	17e		
f	Additional tax on Medicare Advantage MSA distributions. Attach Form 8853	17f		
g	Recapture of a charitable contribution deduction related to a fractional interest in tangible personal property	17g		
h	Income you received from a nonqualified deferred compensation plan that fails to meet the requirements of section 409A	17h		
i	Compensation you received from a nonqualified deferred compensation plan described in section 457A	17i		
j	Section 72(m)(5) excess benefits tax	17j		
k	Golden parachute payments	17k		
l	Tax on accumulation distribution of trusts	17l		
m	Excise tax on insider stock compensation from an expatriated corporation	17m		
n	Look-back interest under section 167(g) or 460(b) from Form 8697 or 8866	17n		
o	Tax on non-effectively connected income for any part of the year you were a nonresident alien from Form 1040-NR	17o		
p	Any interest from Form 8621, line 16f, relating to distributions from, and dispositions of, stock of a section 1291 fund	17p		
q	Any interest from Form 8621, line 24	17q		
z	Any other taxes. List type and amount:	17z		
18	Total additional taxes. Add lines 17a through 17z		18	
19	Reserved for future use		19	
20	Section 965 net tax liability installment from Form 965-A	20		
21	Add lines 4, 7 through 16, and 18. These are your total other taxes . Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b		21	11,250.

Schedule 2 (Form 1040) 2023

SCHEDULE A
(Form 1040)

Department of the Treasury
Internal Revenue Service

Itemized Deductions

Attach to Form 1040 or 1040-SR.
Go to www.irs.gov/ScheduleA for instructions and the latest information.
Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

OMB No. 1545-0074

2023
Attachment
Sequence No. **07**

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

Your social security number

CHAD K. & [REDACTED] ALVARO

*** ** [REDACTED]

Medical and Dental Expenses

Caution: Do not include expenses reimbursed or paid by others.

- | | | | |
|---|---|---|---|
| 1 | Medical and dental expenses (see instructions) | 1 | |
| 2 | Enter amount from Form 1040 or 1040-SR, line 11 2 | | |
| 3 | Multiply line 2 by 7.5% (0.075) | 3 | |
| 4 | Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- | | 4 |

Taxes You Paid

- | | | | |
|---|---|----|---------|
| 5 | State and local taxes. | | |
| a | State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, check this box SEE STATEMENT 11 ☒ | 5a | 2,220. |
| b | State and local real estate taxes (see instructions) | 5b | 12,634. |
| c | State and local personal property taxes | 5c | |
| d | Add lines 5a through 5c | 5d | 14,854. |
| e | Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing separately) | 5e | 10,000. |
| 6 | Other taxes. List type and amount: | 6 | |
| 7 | Add lines 5e and 6 | 7 | 10,000. |

Interest You Paid

Caution: Your mortgage interest deduction may be limited. See instructions.

- | | | | |
|----|---|----|---------|
| 8 | Home mortgage interest and points. If you didn't use all of your home mortgage loan(s) to buy, build, or improve your home, see instructions and check this box ☐ | | |
| a | Home mortgage interest and points reported to you on Form 1098. See instructions if limited SEE STATEMENT 9 | 8a | 17,382. |
| b | Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address | 8b | |
| c | Points not reported to you on Form 1098. See instructions for special rules | 8c | |
| d | Reserved for future use | 8d | |
| e | Add lines 8a through 8c | 8e | 17,382. |
| 9 | Investment interest. Attach Form 4952 if required. See instructions | 9 | |
| 10 | Add lines 8e and 9 | 10 | 17,382. |

Gifts to Charity

Caution: If you made a gift and got a benefit for it, see instructions.

- | | | | |
|----|---|----|------|
| 11 | Gifts by cash or check. If you made any gift of \$250 or more, see instructions | 11 | |
| 12 | Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500 STMT 10 | 12 | 400. |
| 13 | Carryover from prior year | 13 | |
| 14 | Add lines 11 through 13 | 14 | 400. |

Casualty and Theft Losses

- | | | | |
|----|--|----|--|
| 15 | Casualty and theft loss(es) from a federally declared disaster (other than net qualified disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See instructions | 15 | |
|----|--|----|--|

Other Itemized Deductions

- | | | | |
|----|--|----|--|
| 16 | Other - from list in instructions. List type and amount: | 16 | |
|----|--|----|--|

Total Itemized Deductions

- | | | | |
|----|--|----|---------|
| 17 | Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Form 1040 or 1040-SR, line 12 | 17 | 27,782. |
| 18 | If you elect to itemize deductions even though they are less than your standard deduction, check this box ☐ | | |

Form **6251**Department of the Treasury
Internal Revenue Service**DOES NOT APPLY**
Alternative Minimum Tax - IndividualsAttach to Form 1040, 1040-SR, or 1040-NR.
Go to www.irs.gov/Form6251 for instructions and the latest information.

OMB No. 1545-0074

2023
Attachment
Sequence No. **32**

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

Your social security number

CHAD K. & [REDACTED] ALVARO

*** ** [REDACTED]

Part I Alternative Minimum Taxable Income

1 Enter the amount from Form 1040 or 1040-SR, line 15, if more than zero. If Form 1040 or 1040-SR, line 15, is zero, subtract line 14 of Form 1040 or 1040-SR from line 11 of Form 1040 or 1040-SR and enter the result here. (If less than zero, enter as a negative amount.)	1	261,339.
2a If filing Schedule A (Form 1040), enter the taxes from Schedule A, line 7; otherwise, enter the amount from Form 1040 or 1040-SR, line 12	2a	10,000.
b Tax refund from Schedule 1 (Form 1040), line 1 or line 8z	2b	
c Investment interest expense (difference between regular tax and AMT)	2c	
d Depletion (difference between regular tax and AMT)	2d	
e Net operating loss deduction from Schedule 1 (Form 1040), line 8a. Enter as a positive amount	2e	
f Alternative tax net operating loss deduction	2f	
g Interest from specified private activity bonds exempt from the regular tax	2g	
h Qualified small business stock, see instructions	2h	
i Exercise of incentive stock options (excess of AMT income over regular tax income)	2i	
j Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	2j	
k Disposition of property (difference between AMT and regular tax gain or loss)	2k	
l Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	2l	
m Passive activities (difference between AMT and regular tax income or loss)	2m	
n Loss limitations (difference between AMT and regular tax income or loss)	2n	
o Circulation costs (difference between regular tax and AMT)	2o	
p Long-term contracts (difference between AMT and regular tax income)	2p	
q Mining costs (difference between regular tax and AMT)	2q	
r Research and experimental costs (difference between regular tax and AMT)	2r	
s Income from certain installment sales before January 1, 1987	2s	
t Intangible drilling costs preference	2t	
3 Other adjustments, including income-based related adjustments	3	
4 Alternative minimum taxable income. Combine lines 1 through 3. (If married filing separately and line 4 is more than \$831,150, see instructions.)	4	271,339.

Part II Alternative Minimum Tax (AMT)

5 Exemption. <table><thead><tr><th>IF your filing status is ...</th><th>AND line 4 is not over ...</th><th>THEN enter on line 5 ...</th></tr></thead><tbody><tr><td>Single or head of household</td><td>\$578,150</td><td>\$81,300</td></tr><tr><td>Married filing jointly or qualifying surviving spouse</td><td>1,156,300</td><td>126,500</td></tr><tr><td>Married filing separately</td><td>578,150</td><td>63,250</td></tr></tbody></table> If line 4 is over the amount shown above for your filing status, see instructions.	IF your filing status is ...	AND line 4 is not over ...	THEN enter on line 5 ...	Single or head of household	\$578,150	\$81,300	Married filing jointly or qualifying surviving spouse	1,156,300	126,500	Married filing separately	578,150	63,250	5	126,500.
IF your filing status is ...	AND line 4 is not over ...	THEN enter on line 5 ...												
Single or head of household	\$578,150	\$81,300												
Married filing jointly or qualifying surviving spouse	1,156,300	126,500												
Married filing separately	578,150	63,250												
6 Subtract line 5 from line 4. If more than zero, go to line 7. If zero or less, enter -0- here and on lines 7, 9, and 11, and go to line 10	6	144,839.												
7 • If you are filing Form 2555, see instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040 or 1040-SR, line 7; you reported qualified dividends on Form 1040 or 1040-SR, line 3a; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on the back and enter the amount from line 40 here. • All others: If line 6 is \$220,700 or less (\$110,350 or less if married filing separately), multiply line 6 by 26% (0.26). Otherwise, multiply line 6 by 28% (0.28) and subtract \$4,414 (\$2,207 if married filing separately) from the result.	7	37,658.												
8 Alternative minimum tax foreign tax credit (see instructions)	8													
9 Tentative minimum tax. Subtract line 8 from line 7	9	37,658.												
10 Add Form 1040 or 1040-SR, line 16 (minus any tax from Form 4972), and Schedule 2 (Form 1040), line 2. Subtract from the result Schedule 3 (Form 1040), line 1 and any negative amount reported on Form 8978, line 14 (treated as a positive number). If zero or less, enter -0-. If you used Schedule J to figure your tax on Form 1040 or 1040-SR, line 16, refigure that tax without using Schedule J before completing this line. See instructions	10	49,521.												
11 AMT. Subtract line 10 from line 9. If zero or less, enter -0-. Enter here and on Schedule 2 (Form 1040), line 1	11	0.												

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

12-09-23

Form 6251 (2023)

Part III Tax Computation Using Maximum Capital Gains Rates

Complete Part III only if you are required to do so by line 7 or by the Foreign Earned Income Tax Worksheet in the instructions.

12 Enter the amount from Form 6251, line 6. If you are filing Form 2555, enter the amount from line 3 of the worksheet in the instructions for line 7	12	
13 Enter the amount from line 4 of the Qualified Dividends and Capital Gain Tax Worksheet in the Instructions for Form 1040 or the amount from line 13 of the Schedule D Tax Worksheet in the Instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, necessary). See instructions. If you are filing Form 2555, see instructions for the amount to enter	13	
14 Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary). See instructions. If you are filing Form 2555, see instructions for the amount to enter	14	
15 If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 13. Otherwise, add lines 13 and 14, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555, see instructions for the amount to enter	15	
16 Enter the smaller of line 12 or line 15	16	
17 Subtract line 16 from line 12	17	
18 If line 17 is \$220,700 or less (\$110,350 or less if married filing separately), multiply line 17 by 26% (0.26). Otherwise, multiply line 17 by 28% (0.28) and subtract \$4,414 (\$2,207 if married filing separately) from the result	18	
19 Enter: • \$89,250 if married filing jointly or qualifying surviving spouse, • \$44,625 if single or married filing separately, or • \$59,750 if head of household.	19	
20 Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 14 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter	20	
21 Subtract line 20 from line 19. If zero or less, enter -0-	21	
22 Enter the smaller of line 12 or line 13	22	
23 Enter the smaller of line 21 or line 22. This amount is taxed at 0%	23	
24 Subtract line 23 from line 22	24	
25 Enter: • \$492,300 if single, • \$276,900 if married filing separately, • \$553,850 if married filing jointly or qualifying surviving spouse, or • \$523,050 if head of household.	25	
26 Enter the amount from line 21	26	
27 Enter the amount from line 5 of the Qualified Dividends and Capital Gain Tax Worksheet or the amount from line 21 of the Schedule D Tax Worksheet, whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter the amount from Form 1040 or 1040-SR, line 15; if zero or less, enter -0-. If you are filing Form 2555, see instructions for the amount to enter	27	
28 Add line 26 and line 27	28	
29 Subtract line 28 from line 25. If zero or less, enter -0-	29	
30 Enter the smaller of line 24 or line 29	30	
31 Multiply line 30 by 15% (0.15)	31	
32 Add lines 23 and 30	32	
If lines 32 and 12 are the same, skip lines 33 through 37 and go to line 38. Otherwise, go to line 33.		
33 Subtract line 32 from line 22	33	
34 Multiply line 33 by 20% (0.20)	34	
If line 14 is zero or blank, skip lines 35 through 37 and go to line 38. Otherwise, go to line 35.		
35 Add lines 17, 32, and 33	35	
36 Subtract line 35 from line 12	36	
37 Multiply line 36 by 25% (0.25)	37	
38 Add lines 18, 31, 34, and 37	38	
39 If line 12 is \$220,700 or less (\$110,350 or less if married filing separately), multiply line 12 by 26% (0.26). Otherwise, multiply line 12 by 28% (0.28) and subtract \$4,414 (\$2,207 if married filing separately) from the result	39	
40 Enter the smaller of line 38 or line 39 here and on line 7. If you are filing Form 2555, do not enter this amount on line 7. Instead, enter it on line 4 of the worksheet in the instructions for line 7	40	

SCHEDULE 8812
(Form 1040)

Department of the Treasury
Internal Revenue Service

**Credits for Qualifying Children
and Other Dependents**

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

Go to www.irs.gov/Schedule8812 for instructions and the latest information.

OMB No. 1545-0074

2023

Attachment
Sequence No. **47**

Name(s) shown on return

CHAD K. & [REDACTED] ALVARO

Your social security number

*** - ** - [REDACTED]

Part I Child Tax Credit and Credit for Other Dependents

1	Enter the amount from line 11 of your Form 1040, 1040-SR, or 1040-NR	1	289,121.
2a	Enter income from Puerto Rico that you excluded	2a	
b	Enter the amounts from lines 45 and 50 of your Form 2555	2b	
c	Enter the amount from line 15 of your Form 4563	2c	
d	Add lines 2a through 2c	2d	
3	Add lines 1 and 2d	3	289,121.
4	Number of qualifying children under age 17 with the required social security number	4	2
5	Multiply line 4 by \$2,000	5	4,000.
6	Number of other dependents, including any qualifying children who are not under age 17 or who do not have the required social security number	6	
Caution: Do not include yourself, your spouse, or anyone who is not a U.S. citizen, U.S. national, or U.S. resident alien. Also, do not include anyone you included on line 4.			
7	Multiply line 6 by \$500	7	
8	Add lines 5 and 7	8	4,000.
9	Enter the amount shown below for your filing status. • Married filing jointly - \$400,000 • All other filing statuses - \$200,000	9	400,000.
10	Subtract line 9 from line 3. • If zero or less, enter -0-. • If more than zero and not a multiple of \$1,000, enter the next multiple of \$1,000. For example, if the result is \$425, enter \$1,000; if the result is \$1,025, enter \$2,000, etc.	10	0.
11	Multiply line 10 by 5% (0.05)	11	0.
12	Is the amount on line 8 more than the amount on line 11? ☐ No. STOP. You cannot take the child tax credit, credit for other dependents, or additional child tax credit. Skip Parts II-A and II-B. Enter -0- on lines 14 and 27. ☒ Yes. Subtract line 11 from line 8. Enter the result.	12	4,000.
13	Enter the amount from Credit Limit Worksheet A STMT 13	13	49,521.
14	Enter the smaller of line 12 or line 13. This is your child tax credit and credit for other dependents	14	4,000.

Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 19.

If the amount on line 12 is more than the amount on line 14, you may be able to take the **additional child tax credit** on Form 1040, 1040-SR, or 1040-NR, line 28. Complete your Form 1040, 1040-SR, or 1040-NR through line 27 (also complete Schedule 3, line 11) before completing Part II-A.

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

Schedule 8812 (Form 1040) 2023

Part II-A Additional Child Tax Credit for All Filers**Caution:** If you file Form 2555, you cannot claim the additional child tax credit.

15 Check this box if you do not want to claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27 ☐			
16a Subtract line 14 from line 12. If zero, stop here ; you cannot take the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27	16a		0.
b Number of qualifying children under 17 with the required social security number: _____ x \$1,600. Enter the result. If zero, stop here ; you cannot claim the additional child tax credit. Skip Parts II-A and II-B. Enter -0- on line 27	16b		
TIP: The number of children you use for this line is the same as the number of children you used for line 4.			
17 Enter the smaller of line 16a or line 16b	17		
18a Earned income (see instructions)	18a		
b Nontaxable combat pay (see instructions)	18b		
19 Is the amount on line 18a more than \$2,500? ☐ No. Leave line 19 blank and enter -0- on line 20. ☐ Yes. Subtract \$2,500 from the amount on line 18a. Enter the result	19		
20 Multiply the amount on line 19 by 15% (0.15) and enter the result Next. On line 16b, is the amount \$4,800 or more? ☐ No. If you are a bona fide resident of Puerto Rico, go to line 21. Otherwise, skip Part II-B and enter the smaller of line 17 or line 20 on line 27. ☐ Yes. If line 20 is equal to or more than line 17, skip Part II-B and enter the amount from line 17 on line 27. Otherwise, go to line 21.	20		

Part II-B Certain Filers Who Have Three or More Qualifying Children and Bona Fide Residents of Puerto Rico

21 Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, or if you are a bona fide resident of Puerto Rico, see instructions			
22 Enter the total of the amounts from Schedule 1 (Form 1040), line 15; Schedule 2 (Form 1040), line 5; Schedule 2 (Form 1040), line 6; and Schedule 2 (Form 1040), line 13	22		
23 Add lines 21 and 22	23		
24 1040 and 1040-SR filers: Enter the total of the amounts from Form 1040 or 1040-SR, line 27, and Schedule 3 (Form 1040), line 11. 1040-NR filers: Enter the amount from Schedule 3 (Form 1040), line 11.	24		
25 Subtract line 24 from line 23. If zero or less, enter -0-	25		
26 Enter the larger of line 20 or line 25 Next, enter the smaller of line 17 or line 26 on line 27.	26		

Part II-C Additional Child Tax Credit

27 This is your additional child tax credit. Enter this amount on Form 1040, 1040-SR, or 1040-NR, line 28			0.
--	--	--	----

Schedule 8812 (Form 1040) 2023

Paid Preparer's Due Diligence Checklist

Earned Income Credit (EIC), American Opportunity Tax Credit (AOTC), Child Tax Credit (CTC) (including the Additional Child Tax Credit (ACTC) and Credit for Other Dependents (ODC)), and Head of Household (HOH) Filing Status

**To be completed by preparer and filed with Form 1040, 1040-SR, 1040-NR, 1040-PR, or 1040-SS.
Go to www.irs.gov/Form8867 for instructions and the latest information.**

OMB No. 1545-0074

2023

Attachment
Sequence No. **70**

Taxpayer name(s) shown on return CHAD K. & [REDACTED] ALVARO	Taxpayer identification number *** - ** - [REDACTED]
Preparer's name MARIA NOVOTNY, CPA	Preparer tax identification number *****

Part I Due Diligence Requirements

Please check the appropriate box for the credit(s) and/or HOH filing status claimed on the return and complete the related Parts I-V for the benefit(s) claimed (check all that apply).

	Yes	No	N/A
1 Did you complete the return based on information for the applicable tax year provided by the taxpayer or reasonably obtained by you?	☒	☐	☐
2 If credits are claimed on the return, did you complete the applicable EIC and/or CTC/ACTC/ODC worksheets found in the Form 1040, 1040-SR, 1040-NR, 1040-PR, 1040-SS or Schedule 8812 (Form 1040) instructions, and/or the AOTC worksheet found in the Form 8863 instructions, or your own worksheet(s) that provides the same information, and all related forms and schedules for each credit claimed?	☒	☐	☐
3 Did you satisfy the knowledge requirement? To meet the knowledge requirement, you must do both of the following. • Interview the taxpayer, ask questions, and contemporaneously document the taxpayer's responses to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status. • Review information to determine that the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of any credit(s)	☒	☐	☐
4 Did any information provided by the taxpayer or a third party for use in preparing the return, or information reasonably known to you, appear to be incorrect, incomplete, or inconsistent? (If "Yes," answer questions 4a and 4b. If "No," go to question 5.)	☐	☒	☐
a Did you make reasonable inquiries to determine the correct, complete, and consistent information?	☐	☐	☐
b Did you contemporaneously document your inquiries? (Documentation should include the questions you asked, whom you asked, when you asked, the information that was provided, and the impact the information had on your preparation of the return.)	☐	☐	☐
5 Did you satisfy the record retention requirement? To meet the record retention requirement, you must keep a copy of your documentation referenced in question 4b, a copy of this Form 8867, a copy of any applicable worksheet(s), a record of how, when, and from whom the information used to prepare Form 8867 and any applicable worksheet(s) was obtained, and a copy of any document(s) provided by the taxpayer that you relied on to determine eligibility for the credit(s) and/or HOH filing status or to figure the amount(s) of the credit(s)	☒	☐	☐
List those documents provided by the taxpayer, if any, that you relied on: _____ _____ _____			
6 Did you ask the taxpayer whether he/she could provide documentation to substantiate eligibility for the credit(s) and/or HOH filing status and the amount(s) of any credit(s) claimed on the return if his/her return is selected for audit?	☒	☐	☐
7 Did you ask the taxpayer if any of these credits were disallowed or reduced in a previous year?	☒	☐	☐
(If credits were disallowed or reduced, go to question 7a; if not, go to question 8.)			
a Did you complete the required recertification Form 8862?	☐	☐	☐
8 If the taxpayer is reporting self-employment income, did you ask questions to prepare a complete and correct Schedule C (Form 1040)?	☐	☐	☒

For Paperwork Reduction Act Notice, see separate instructions.

Form **8867** (Rev. 11-2023)

Part II Due Diligence Questions for Returns Claiming EIC (If the return does not claim EIC, go to Part III.)

	Yes	No	N/A
9a Have you determined that the taxpayer is eligible to claim the EIC for the number of qualifying children claimed, or is eligible to claim the EIC without a qualifying child? (If the taxpayer is claiming the EIC and does not have a qualifying child, go to question 10.)	☐	☐	☐
b Did you ask the taxpayer if the child lived with the taxpayer for over half of the year, even if the taxpayer has supported the child the entire year?	☐	☐	☐
c Did you explain to the taxpayer the rules about claiming the EIC when a child is the qualifying child of more than one person (tiebreaker rules)?	☐	☐	☐

Part III Due Diligence Questions for Returns Claiming CTC/ACTC/ODC (If the return does not claim CTC, ACTC, or ODC, go to Part IV.)

	Yes	No	N/A
10 Have you determined that each qualifying person for the CTC/ACTC/ODC is the taxpayer's dependent who is a citizen, national, or resident of the United States?	☒	☐	☐
11 Did you explain to the taxpayer that he/she may not claim the CTC/ACTC if the child has not lived with the taxpayer for over half of the year, even if the taxpayer has supported the child, unless the child's custodial parent has released a claim to exemption for the child?	☒	☐	☐
12 Did you explain to the taxpayer the rules about claiming the CTC/ACTC/ODC for a child of divorced or separated parents (or parents who live apart), including any requirement to attach a Form 8332 or similar statement to the return?	☐	☐	☒

Part IV Due Diligence Questions for Returns Claiming AOTC (If the return does not claim AOTC, go to Part V.)

	Yes	No
13 Did the taxpayer provide substantiation for the credit, such as a Form 1098-T and/or receipts for the qualified tuition and related expenses for the claimed AOTC?	☐	☐

Part V Due Diligence Questions for Claiming HOH (If the return does not claim HOH filing status, go to Part VI.)

	Yes	No
14 Have you determined that the taxpayer was unmarried or considered unmarried on the last day of the tax year and provided more than half of the cost of keeping up a home for the year for a qualifying person?	☐	☐

Part VI Eligibility Certification

You will have complied with all due diligence requirements for claiming the applicable credit(s) and/or HOH filing status on the return of the taxpayer identified above if you:

- A. Interview the taxpayer, ask adequate questions, contemporaneously document the taxpayer's responses on the return or in your notes, review adequate information to determine if the taxpayer is eligible to claim the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s);
- B. Complete this Form 8867 truthfully and accurately and complete the actions described in this checklist for any applicable credit(s) claimed and HOH filing status, if claimed;
- C. Submit Form 8867 in the manner required; **and**
- D. Keep all five of the following records for 3 years from the latest of the dates specified in the Form 8867 instructions under *Document Retention*.
 1. A copy of this Form 8867.
 2. The applicable worksheet(s) or your own worksheet(s) for any credit(s) claimed.
 3. Copies of any documents provided by the taxpayer on which you relied to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).
 4. A record of how, when, and from whom the information used to prepare this form and the applicable worksheet(s) was obtained.
 5. A record of any additional information you relied upon, including questions you asked and the taxpayer's responses, to determine the taxpayer's eligibility for the credit(s) and/or HOH filing status and to figure the amount(s) of the credit(s).

If you have not complied with all due diligence requirements, you may have to pay a penalty for each failure to comply related to a claim of an applicable credit or HOH filing status (see instructions for more information).

	Yes	No
15 Do you certify that all of the answers on this Form 8867 are, to the best of your knowledge, true, correct, and complete?	☒	☐

**Net Investment Income Tax -
Individuals, Estates, and Trusts**

Attach to your tax return.

Go to www.irs.gov/Form8960 for instructions and the latest information.**2023**Attachment
Sequence No. **72**

Name(s) shown on your tax return

CHAD K. & [REDACTED] ALVARO

Your social security number or EIN

*** - ** - [REDACTED]

Part I Investment Income

- ☐ Section 6013(g) election (see instructions)
- ☐ Section 6013(h) election (see instructions)
- ☐ Regulations section 1.1411-10(g) election (see instructions)

1	Taxable interest (see instructions)	1	
2	Ordinary dividends (see instructions)	2	
3	Annuities (see instructions)	3	
4a	Rental real estate, royalties, partnerships, S corporations, trusts, trades or businesses, etc. (see instructions)	4a	
b	Adjustment for net income or loss derived in the ordinary course of a non-section 1411 trade or business (see instructions)	4b	
c	Combine lines 4a and 4b	4c	
5a	Net gain or loss from disposition of property (see instructions)	5a	
b	Net gain or loss from disposition of property that is not subject to net investment income tax (see instructions)	5b	
c	Adjustment from disposition of partnership interest or S corporation stock (see instructions)	5c	
d	Combine lines 5a through 5c	5d	
6	Adjustments to investment income for certain CFCs and PFICs (see instructions)	6	
7	Other modifications to investment income (see instructions)	7	
8	Total investment income. Combine lines 1, 2, 3, 4c, 5d, 6, and 7	8	

Part II Investment Expenses Allocable to Investment Income and Modifications

9a	Investment interest expenses (see instructions)	9a	
b	State, local, and foreign income tax (see instructions)	9b	
c	Miscellaneous investment expenses (see instructions)	9c	
d	Add lines 9a, 9b, and 9c	9d	
10	Additional modifications (see instructions)	10	
11	Total deductions and modifications. Add lines 9d and 10	11	

Part III Tax Computation

12	Net investment income. Subtract Part II, line 11, from Part I, line 8. Individuals, complete lines 13-17. Estates and trusts, complete lines 18a - 21. If zero or less, enter -0- Individuals:	12	
13	Modified adjusted gross income (see instructions)	13	289,121.
14	Threshold based on filing status (see instructions)	14	250,000.
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	39,121.
16	Enter the smaller of line 12 or line 15	16	
17	Net investment income tax for individuals. Multiply line 16 by 3.8% (0.038). Enter here and include on your tax return (see instructions)	17	
18a	Net investment income (line 12 above)	18a	
b	Deductions for distributions of net investment income and charitable deductions (see instructions)	18b	
c	Undistributed net investment income. Subtract line 18b from line 18a (see instructions). If zero or less, enter -0-	18c	
19a	Adjusted gross income (see instructions)	19a	
b	Highest tax bracket for estates and trusts for the year (see instructions)	19b	
c	Subtract line 19b from line 19a. If zero or less, enter -0-	19c	
20	Enter the smaller of line 18c or line 19c	20	
21	Net investment income tax for estates and trusts. Multiply line 20 by 3.8% (0.038). Enter here and include on your tax return (see instructions)	21	

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

Form **8960** (2023)

FORM 1040		WAGES RECEIVED AND TAXES WITHHELD				STATEMENT 1	
T S	EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
T	STATE OF FLORIDA CFO	176,621.	24,324.			9,932.	2,642.
TOTALS		176,621.	24,324.			9,932.	2,642.

FORM 1040		IRA DISTRIBUTIONS		STATEMENT 2	
NAME OF PAYER		GROSS DISTRIBUTION		TAXABLE AMOUNT	
AMERIPRISE TRUST COMPANY		112,500.		112,500.	
TOTAL TO FORM 1040, LINES 4A AND 4B		112,500.		112,500.	

FORM 1040		FEDERAL INCOME TAX WITHHELD - FORM(S) W-2		STATEMENT 3	
T					
S	DESCRIPTION				AMOUNT
-					
T	STATE OF FLORIDA CFO				24,324.
TOTAL TO FORM 1040, LINE 25A					24,324.

FORM 1040		TOTAL DUE WITH INTEREST AND PENALTIES		STATEMENT 4	
AMOUNT DUE				9,947.	
INTEREST NOT INCLUDED				33.	
PENALTY NOT INCLUDED				50.	
TOTAL DUE				10,030.	

FORM 1040		LATE PAYMENT INTEREST			STATEMENT 5	
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST
TAX DUE	04/15/24	9,947.	9,947.	.0800	15	33.
DATE FILED	04/30/24		9,980.			
TOTAL LATE PAYMENT INTEREST						33.

FORM 1040		LATE PAYMENT PENALTY			STATEMENT 6	
DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENALTY	
TAX DUE	04/15/24	9,947.	9,947.	1	50.	
DATE FILED	04/30/24					
TOTAL LATE PAYMENT PENALTY						50.

FORM 1040		FEDERAL INCOME TAX WITHHELD - FORM(S) 1099			STATEMENT 7	
T S DESCRIPTION					AMOUNT	
T AMERIPRISE TRUST COMPANY					22,500.	
TOTAL TO FORM 1040, LINE 25B					22,500.	

SCHEDULE 1	STUDENT LOAN INTEREST DEDUCTION	STATEMENT 8
1.	ENTER THE TOTAL INTEREST PAID IN 2023 ON QUALIFIED STUDENT LOANS. DON'T ENTER MORE THAN \$2500.	2,500.
2.	ENTER THE AMOUNT FROM FORM 1040, LINE 9	289,121.
3.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE 1, LINES 11 THROUGH 20, AND 23 AND 25	
4.	SUBTRACT LINE 3 FROM LINE 2	289,121.
5.	ENTER THE AMOUNT SHOWN BELOW FOR YOUR FILING STATUS. * SINGLE, HEAD OF HOUSEHOLD, OR QUALIFYING SURVIVING SPOUSE-\$75000. * MARRIED FILING JOINTLY-\$155000.	155,000.
6.	IS THE AMOUNT ON LINE 4 MORE THAN THE AMOUNT ON LINE 5? [] NO. SKIP LINES 6 AND 7, ENTER -0- ON LINE 8, AND GO TO LINE 9 [X] YES. SUBTRACT LINE 5 FROM LINE 4	134,121.
7.	DIVIDE LINE 6 BY \$15,000 (\$30,000 IF MARRIED FILING JOINTLY). ENTER THE RESULT AS A DECIMAL (ROUNDED TO AT LEAST THREE PLACES). IF THE RESULT IS 1.000 OR MORE, ENTER 1.000	1.000
8.	MULTIPLY LINE 1 BY LINE 7	2,500.
9.	STUDENT LOAN INTEREST DEDUCTION. SUBTRACT LINE 8 FROM LINE 1. ENTER THE RESULT HERE AND ON SCHEDULE 1, LINE 21. DON'T INCLUDE THIS AMOUNT IN FIGURING ANY OTHER DEDUCTION ON YOUR RETURN (SUCH AS ON SCHEDULE A, C, E, ETC.)	0.

SCHEDULE A	MORTGAGE INTEREST AND POINTS REPORTED ON FORM 1098	STATEMENT 9
DESCRIPTION		AMOUNT
PNC BANK		3,914.
PENNYMAC LOAN SERVICES LLC		13,468.
TOTAL TO SCHEDULE A, LINE 8A		17,382.

SCHEDULE A	CONTRIBUTIONS OTHER THAN CASH OR CHECK			STATEMENT 10
DESCRIPTION	AMOUNT 100% LIMIT	AMOUNT 50% LIMIT	AMOUNT 30% LIMIT	AMOUNT 20% LIMIT
ONE HEART FOR WOMEN AND CHILDREN		400.		
SUBTOTALS		400.		
TOTAL TO SCHEDULE A, LINE 12				400.

SCHEDULE A	STATE AND LOCAL GENERAL SALES TAXES	STATEMENT 11
DESCRIPTION		AMOUNT
STATE SALES TAX		2,050.
LOCAL SALES TAX		170.
TOTAL TO SCHEDULE A, LINE 5A		2,220.

SCHEDULE A

GENERAL SALES TAX DEDUCTION WORKSHEET

STATEMENT 12

1	ENTER YOUR STATE GENERAL SALES TAXES FROM THE APPLICABLE TABLE.	2,050.
	FLORIDA	
	IF, FOR ALL OF 2023, YOU LIVED ONLY IN CONNECTICUT, THE DISTRICT OF COLUMBIA, INDIANA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, MICHIGAN, NEW JERSEY, OR RHODE ISLAND, SKIP LINES 2 THROUGH 5, ENTER -0- ON LINE 6, AND GO TO LINE 7.	
	OTHERWISE, GO TO LINE 2.	
2	DID YOU LIVE IN ALABAMA, ALASKA, ARIZONA, ARKANSAS, COLORADO, GEORGIA, ILLINOIS, KANSAS, LOUISIANA, MISSISSIPPI, MISSOURI, NEW YORK, NORTH CAROLINA, SOUTH CAROLINA, TENNESSEE, UTAH, OR VIRGINIA IN 2023?	
	IF NO, ENTER -0-.	
	IF YES, ENTER YOUR LOCAL GENERAL SALES TAXES FROM THE APPLICABLE TABLE.	0.
3	DID YOUR LOCALITY IMPOSE A LOCAL GENERAL SALES TAX IN 2023? RESIDENTS OF CALIFORNIA AND NEVADA SEE INSTRUCTIONS.	
	IF NO, SKIP LINES 3 THROUGH 5, ENTER -0- ON LINE 6 AND GO TO LINE 7.	
	IF YES, ENTER YOUR LOCAL GENERAL SALES TAX RATE, BUT OMIT THE PERCENTAGE SIGN.	.5000
	ORLANDO	
4	DID YOU ENTER -0- ON LINE 2 ABOVE?	
	IF NO, SKIP LINES 4 AND 5 AND GO TO LINE 6.	
	IF YES, ENTER YOUR STATE GENERAL SALES TAX RATE, BUT OMIT THE PERCENTAGE SIGN.	6.0000
5	DIVIDE LINE 3 BY LINE 4. ENTER THE RESULT AS A DECIMAL (ROUNDED TO AT LEAST THREE PLACES).	.0830
6	DID YOU ENTER -0- ON LINE 2 ABOVE?	
	IF NO, MULTIPLY LINE 2 BY LINE 3.	
	IF YES, MULTIPLY LINE 1 BY LINE 5.	170.
6A	ADD LINE 1 AND LINE 6.	2,220.
6B	PART-YEAR DAYS RATE.	1.000000
6C	MULTIPLY LINE 6A BY LINE 6B.	2,220.
7	ENTER YOUR GENERAL SALES TAXES PAID ON SPECIFIED ITEMS, IF ANY.	
8	DEDUCTION FOR GENERAL SALES TAXES. ADD LINES 6C AND 7. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 5A AND CHECK BOX.	2,220.

SCHEDULE 8812

CREDIT LIMIT WORKSHEET A

STATEMENT 13

1. ENTER THE AMOUNT FROM LINE 18 OF FORM 1040 OR FORM 1040-NR 49,521.

2. ADD THE FOLLOWING AMOUNTS (IF APPLICABLE) FROM:

SCHEDULE 3, LINE 1
SCHEDULE 3, LINE 2
SCHEDULE 3, LINE 3
SCHEDULE 3, LINE 4
SCHEDULE 3, LINE 5B
SCHEDULE 3, LINE 6D
SCHEDULE 3, LINE 6F
SCHEDULE 3, LINE 6L
SCHEDULE 3, LINE 6M
ENTER THE TOTAL

3. SUBTRACT LINE 2 FROM LINE 1 49,521.

COMPLETE THE CREDIT LIMIT WORKSHEET B ONLY IF YOU MEET ALL OF THE FOLLOWING:

1. YOU ARE CLAIMING ONE OR MORE OF THE FOLLOWING CREDITS:

- A. MORTGAGE INTEREST CREDIT, FORM 8396
- B. ADOPTION CREDIT, FORM 8839
- C. RESIDENTIAL CLEAN ENERGY CREDIT, FORM 5695, PART I
- D. DISTRICT OF COLUMBIA FIRST-TIME HOMEBUYER CREDIT, FORM 8859

2. YOU ARE NOT FILING FORM 2555

3. LINE 4 OF SCHEDULE 8812 IS MORE THAN ZERO

4. IF YOU ARE NOT COMPLETING CREDIT LIMIT WORKSHEET B, ENTER -0-; OTHERWISE, ENTER THE AMOUNT FROM THE CREDIT LIMIT WORKSHEET B.

0.

5. SUBTRACT LINE 4 FROM LINE 3. ENTER THIS AMOUNT ON SCHEDULE 8812, LINE 13.

49,521.

		a Employee's social security number [REDACTED]		Payroll organization code 22-20-09-00-110		Intradepartment number 0000000042					
b Employer identification number (EIN) 59-6001874				1 Wages, tips, other compensation 176,621.16		2 Federal income tax withheld 24,323.64					
c Employer's name, address, and ZIP code State of Florida Jimmy Patronis, Chief Financial Officer 200 E Gaines Street Tallahassee, Florida 32399-0356				3 Social security wages 160,200.00		4 Social security tax withheld 9,932.40					
				5 Medicare wages and tips 182,219.52		6 Medicare tax withheld 2,642.18					
				7 Social security tips		10 Dependent care benefits					
d Control number 015424 01/05				11 Nonqualified plans		12a See instructions for box 12 DD 22,122.96					
e Employee's first name, mi, and last name CHAD K ALVARO [REDACTED]				13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b					
				14 Other 125 4,392.00		12c					
						12d					
						12e					
f Employee's address and ZIP code											
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

FORM **W-2** **WAGE AND TAX STATEMENT** **2023**

OMB No. 1545-0008
Department of the Treasury - Internal Revenue Service

Copy B - To Be Filed With Employee's FEDERAL Tax Return
This information is being furnished to the Internal Revenue Service

		a Employee's social security number [REDACTED]		Payroll organization code 22-20-09-00-110		Intradepartment number 0000000042					
b Employer identification number (EIN) 59-6001874				1 Wages, tips, other compensation 176,621.16		2 Federal income tax withheld 24,323.64					
c Employer's name, address, and ZIP code State of Florida Jimmy Patronis, Chief Financial Officer 200 E Gaines Street Tallahassee, Florida 32399-0356				3 Social security wages 160,200.00		4 Social security tax withheld 9,932.40					
				5 Medicare wages and tips 182,219.52		6 Medicare tax withheld 2,642.18					
				7 Social security tips		10 Dependent care benefits					
d Control number 015424 01/05				11 Nonqualified plans		12a See instructions for box 12 DD 22,122.96					
e Employee's first name, mi, and last name CHAD K ALVARO [REDACTED]				13 Statutory employee Retirement plan Third-party sick pay ☐ ☒ ☐		12b					
				14 Other 125 4,392.00		12c					
						12d					
						12e					
f Employee's address and ZIP code											
15 State Employer's state ID number		16 State wages, tips, etc.		17 State income tax		18 Local wages, tips, etc.		19 Local income tax		20 Locality name	

FORM **W-2** **WAGE AND TAX STATEMENT** **2023**

Department of the Treasury - Internal Revenue Service

Copy C - For EMPLOYEE'S RECORDS
AA327W Rev. 06/09/2023

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.