

2025 FEB 5 AM 9:53

DIVISION OF ELECTIONS
TALLAHASSEE, FL**General Information**

Name: Mr Juan Jose Hinojosa

Organization	Suborganization	Title
N/A		

CANDIDATE FOR

Position	Agency Name	Position sought or held
State Representative	Florida House	District 32

Net WorthMy Net Worth as of December 31, 2024 was \$ 1,508,800.00.

2024 Form 6 - Full and Public Disclosure of Financial Interests

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 \$ 25,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
6246 Erskine Street, Corpus Christi, Tx 78412	\$ 165,000.00
2145 River Oaks Ct, Rockledge, Fl 32955	\$ 900,200.00
11630 Corte Castle Rd, Chesterfield, VA 23838	\$ 339,600.00
Lowe's Stock	\$ 17,000.00
Mutual Funds	\$ 5,000.00
Rally Credit Union	\$ 75,000.00
USAA Bank	\$ 4,000.00
TD Bank	\$ 3,000.00
See Attached	

2024 Form 6 - Full and Public Disclosure of Financial Interests

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Freedom Mortgage	Mortgage Corporation, P.O. Box 50485, Indianapolis, IN 46250-0485	\$ 200,000.00
Regions Mortgage	Birmingham, AL	\$ 255,000.00

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 2024 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 2024 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

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.

Juan Jose Hinojosa

Digitally signed: 01/30/2025

Form **1040-SR** U.S. Tax Return for Seniors

Department of the Treasury--Internal Revenue Service

2023

OMB No. 1545-0074

IRS Use Only-Do not write or staple in this space.

For the year Jan. 1-Dec. 31, 2023, or other tax year beginning _____, 2023, ending _____, 20 ____ See separate instructions.

Your first name and middle initial JUAN J		Last name HINOJOSA		Your social security number [REDACTED]	
If joint return, spouse's first name and middle initial CARRIE J		Last name HINOJOSA		Spouse's social security number [REDACTED]	
Home address (number and street). If you have a P.O. box, see instructions. 2145 RIVER OAKS CT				Apt. no. 	
City, town, or post office. If you have a foreign address, also complete spaces below. ROCKLEDGE				State FL	
				ZIP code 32955	
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 ☒ Married filing jointly (even if only one had income) ☐ Married filing separately (MFS)
☐ Head of household (HOH) ☐ Qualifying surviving spouse (QSS)
 Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: _____

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 no.	(3) Relationship to you	(4) Check the box if qualifies for (see instructions):	
(1) First name	Last name			Child tax credit	Credit for other dependents
If more than four dependents, see instructions and check here ☐					

Income		1a Total amount from Form(s) W-2, box 1 (see instructions)		1a	29,670
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.		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	29,670
Attach Schedule B if required.	2a Tax-exempt interest	2a	b Taxable interest	2b	1,087
	3a Qualified dividends	3a	b Ordinary dividends	3b	
	4a IRA distributions	4a	b Taxable amount	4b	
	5a Pensions and annuities	5a	b Taxable amount	5b	84,629
	6a Social security benefits 49,882	6a	b Taxable amount	6b	42,400
	c If you elect to use the lump-sum election method, check here (see instructions) ☐				

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

Form **1040-SR** (2023)

	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here	☐	7	
	8	Additional income from Schedule 1, line 10		8	8,212
	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income		9	165,998
	10	Adjustments to income from Schedule 1, line 26		10	
Standard Deduction See Standard Deduction Chart on the last page of this form	11	Subtract line 10 from line 9. This is your adjusted gross income		11	165,998
	12	Standard deduction or itemized deductions (from Schedule A)		12	30,700
	13	Qualified business income deduction from Form 8995 or Form 8995-A		13	
	14	Add lines 12 and 13		14	30,700
	15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income		15	135,298
Tax and Credits	16	Tax (see instructions). Check if any from: 1 ☐ Form(s) 8814 2 ☐ Form 4972 3 ☐		16	20,381
	17	Amount from Schedule 2, line 3		17	
	18	Add lines 16 and 17		18	20,381
	19	Child tax credit or credit for other dependents from Schedule 8812		19	
	20	Amount from Schedule 3, line 8		20	
	21	Add lines 19 and 20		21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-		22	20,381
	23	Other taxes, including self-employment tax, from Schedule 2, line 21		23	
	24	Add lines 22 and 23. This is your total tax		24	20,381
	Payments	25	Federal income tax withheld from:		
a		Form(s) W-2	25a	419	
b		Form(s) 1099	25b	17,597	
c		Other forms (see instructions)	25c		
d		Add lines 25a through 25c	25d	18,016	
26		2023 estimated tax payments and amount applied from 2022 return	26	41	
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	18,057	

Go to www.irs.gov/Form1040SR for instructions and the latest information.Form **1040-SR** (2023)

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 XXXXXXXXXXXXXXXXXXXX	c Type: ☐ Checking ☐ Savings	
	d	Account number XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
	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	2,324
	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	Phone no.	Personal identification number (PIN)	
Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
Joint return? See instructions. Keep a copy for your records	Spouse's signature. If a joint return, both must sign.		Date	Spouse's occupation
	Spouse's signature		Date	Spouse's occupation
	Phone no. 8049861855		Email address	Self Employed
Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	PTIN
	Firm's name	Check if: ☐ Self-employed		
	Firm's address	Firm's EIN		

Go to www.irs.gov/Form1040SR for instructions and the latest information.

Form 1040-SR (2023)

Standard Deduction Chart*

Add the number of boxes checked in the "Age/Blindness" section of Standard Deduction on page 1 2

IF your filing status is...	AND the number of boxes checked is...	THEN your standard deduction is...
Single	1	\$15,700
	2	17,550
Married filing jointly	1	\$29,200
	2	30,700
	3	32,200
	4	33,700
Qualifying surviving spouse	1	\$29,200
	2	30,700
Head of household	1	\$22,650
	2	24,500
Married filing separately**	1	\$15,350
	2	16,850
	3	18,350
	4	19,850

*Don't use this chart if someone can claim you (or your spouse if filing jointly) as a dependent, your spouse itemizes on a separate return, or you were a dual-status alien. Instead, see instructions.

**You can check the boxes for your spouse if your filing status is married filing separately and your spouse had no income, isn't filing a return, and can't be claimed as a dependent on another person's return.

Go to www.irs.gov/Form1040SR for instructions and the latest information.Form **1040-SR** (2023)

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

JUAN J & CARRIE J HINOJOSA

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	8,212
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 951(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	0
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	8,212

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

Part III Cost of Goods Sold (see instructions)

33	Method(s) used to value closing inventory:	a ☒ Cost	b ☐ Lower of cost or market	c ☐ Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? ☐ Yes ☒ No			
If "Yes," attach explanation				
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	2,000	
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40	2,000	
41	Inventory at end of year	41	2,000	
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month/day/year) _____		
44	Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:		
	a Business _____	b Commuting (see instructions) _____	c Other _____
45	Was your vehicle available for personal use during off-duty hours?		☐ Yes ☐ No
46	Do you (or your spouse) have another vehicle available for personal use?		☐ Yes ☐ No
47a	Do you have evidence to support your deduction?		☐ Yes ☐ No
	b If "Yes," is the evidence written?		☐ Yes ☐ No

Part V Other Expenses. List below business expenses not included on lines 8-26, line 27b, or line 30.

ETSY LISTING MARKETING FEES	730
48 Total other expenses. Enter here and on line 27a	730

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service

Supplemental Income and Loss

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

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

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

OMB No. 1545-0074

2023

Attachment
Sequence No. **13**

Name(s) shown on return

JUAN J & CARRIE J HINOJOSA

Your social security number

Part I Income or Loss From Rental Real Estate and Royalties **Note:** If you are in the business of renting personal property, use **Schedule C**. See instructions. If you are an individual, report farm rental income or loss from **Form 4835** on page 2, line 40.

A Did you make any payments in 2023 that would require you to file Form(s) 1099? See instructions ☐ Yes ☒ No
B If "Yes," did you or will you file required Form(s) 1099? ☐ Yes ☐ No

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

A 6246 ERSKINE STREET, Corpus Christi, TX 78412

B

C

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

Type of Property:

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

		Properties:		
		A	B	C
Income:				
3 Rents received	3	11,700		
4 Royalties received	4			
Expenses:				
5 Advertising	5			
6 Auto and travel (see instructions)	6			
7 Cleaning and maintenance	7			
8 Commissions	8			
9 Insurance	9	260		
10 Legal and other professional fees	10			
11 Management fees	11			
12 Mortgage interest paid to banks, etc. (see instructions)	12			
13 Other interest	13			
14 Repairs	14	100		
15 Supplies	15			
16 Taxes	16	3,128		
17 Utilities	17			
18 Depreciation expense or depletion	18			
19 Other (list)	19			
20 Total expenses. Add lines 5 through 19	20	3,488		
21 Subtract line 20 from line 3 (rents) and/or 4 (royalties). If result is a (loss), see instructions to find out if you must file Form 6198	21	8,212		
22 Deductible rental real estate loss after limitation, if any, on Form 8582 (see instructions)	22	()	()	()
23a Total of all amounts reported on line 3 for all rental properties	23a	11,700		
b Total of all amounts reported on line 4 for all royalty properties	23b			
c Total of all amounts reported on line 12 for all properties	23c			
d Total of all amounts reported on line 18 for all properties	23d			
e Total of all amounts reported on line 20 for all properties	23e	3,488		
24 Income. Add positive amounts shown on line 21. Do not include any losses	24			8,212
25 Losses. Add royalty losses from line 21 and rental real estate losses from line 22. Enter total losses here	25			()
26 Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, and IV , and line 40 on page 2 do not apply to you, also enter this amount on Schedule 1 (Form 1040), line 5 . Otherwise, include this amount in the total on line 41 on page 2	26			8,212

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule E (Form 1040) 2023

2023 WAGES AND SALARIES SUMMARY ATTACHMENT

JUAN J & CARRIE J HINOJOSA

Employer Name	Employer EIN	T or S	Wages	Federal Withholding	Social Security Tax Withheld	State	State Wages	State Tax Withheld	Local Tax Withheld
UNIVERSAL PROTECTION SERVIC	56-0515447	T	29,670	419	1,978	FL			

Total 29,670 419 1,978

2023 MERCHANT PAYMENTS SUMMARY ATTACHMENT

JUAN J & CARRIE J HINOJOSA

Filer's Name	Filer's Federal ID Number	T or S	Activity	Gross Amount (Box 1a)	Card Not Pesent Transactions (Box 1b)	Merchant Code (Box 2)	Federal Tax Withheld (Box 4)	State	State Withholding (Box 8)
ESTY	20-4898921	S	SCH C, LN 1						

2023 PENSIONS AND ANNUITIES SUMMARY ATTACHMENT

JUAN J & CARRIE J HINOJOSA

Payer Name	Payer's Federal EIN	T or S	Pension Amount	Taxable Amount	Capital Gain Incl in Box 2a	Federal Tax Withheld	Distrib Code	IRA / SEP / SIMPLE	State	State Tax Withheld	Local Tax Withheld
Defense Finance And	34-0727612	T	67,902	67,902		9,090	7		FL		
Defense Finance And	34-0727612	S	16,727	16,727		1,157	7		FL		

TOTAL 1099RS

84,629

84,629

10,247

2023 FEDERAL TAX WITHHOLDINGS ATTACHMENT

JUAN J & CARRIE J HINOJOSA
[REDACTED]

W-2	UNIVERSAL PROTECTION SERVI	419
1099R	Defense Finance And Accoun	9,090
1099R	Defense Finance And Accoun	1,157
1099-SSA	TP WITHHOLDINGS	7,350

Total to Form 1040/1040-SR line 25d

18,016