

FORM 6 FULL AND PUBLIC DISCLOSURE OF 2007

FINANCIAL INTERESTS

JUN 20 2008 AM 9:54

LAST NAME — FIRST NAME — MIDDLE NAME:
NEVES, RYAN SCOTT

MAILING ADDRESS:
4625 BYLSMA CIRCLE

CITY: PANAMA CITY ZIP: 32404 COUNTY: BAY

NAME OF AGENCY:
BAY COUNTY SCHOOL BOARD

NAME OF OFFICE OR POSITION HELD OR SOUGHT:
SCHOOL BOARD DISTRICT 2

CHECK IF THIS IS A FILING BY A CANDIDATE

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2007, or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of DECEMBER 31, 20 07 was \$ 193,000.

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:
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.

The aggregate value of my household goods and personal effects (described above) is \$ 65,000

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
HOME: PRIMARY RESIDENCE	\$215,000
CAR: 05 ACURA TSX	\$23,000
BANKING: PEFCU CHECKING/SAVINGS	\$5,000
BANKING: TYNDALL FEDERAL SAVINGS	\$5,000
BUSINESS: NEVES MEDIA PRODUCTIONS LLC	\$80,000

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
PEFCU - PERSONAL AUTO (05 ACURA TSX)	\$16,000

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
PEFCU - HOME MORTGAGE	\$184,000

PART D – INCOME

You may **EITHER** (1) file a complete copy of your 2007 federal income tax return, including all attachments, **OR** (2) file a sworn statement identifying each separate source and amount of income which exceeds \$1,000, including secondary sources of income, by completing the remainder of Part D, below.

I elect to file a copy of my 2007 federal income tax return. [If you check this box and attach a copy of your 2007 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME:

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person—see instructions]:

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

PART E – INTERESTS IN SPECIFIED BUSINESSES

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	NEVES MEDIA PRODUCTIONS		
ADDRESS OF BUSINESS ENTITY	509 HARRISON AVE, SUITE 201		
PRINCIPAL BUSINESS ACTIVITY	MEDIA DEVELOPMENT		
POSITION HELD WITH ENTITY	PARTNER		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	YES		
NATURE OF MY OWNERSHIP INTEREST	50% MANAGING PARTNER		

IF ANY OF PARTS A THROUGH E ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

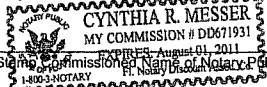

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

STATE OF FLORIDA
COUNTY OF Bay

Sworn to (or affirmed) and subscribed before me this 20th day of

June, 2008, by Ryan Neves

Cynthia R. Messer
(Signature of Notary Public—State of Florida)


CYNTHIA R. MESSER
MY COMMISSION # DD671931
EXPIRES August 31, 2011

(Print, Type, or Stamp the Permitted Name of Notary Public)

Personally Known OR Produced Identification

Type of Identification Produced _____

FILING INSTRUCTIONS for when and where to file this form are located at the top of page 3.
INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.
OTHER FORMS you may need to file are described on page 6.

Form 1040 U.S. Individual Income Tax Return 2007

Label (See instructions.) Use the IRS label. Otherwise, please print or type. Presidential Election Campaign

Filing Status 1 Single 2 Married filing jointly 3 Married filing separately 4 Head of household 5 Qualifying widow(er)

Exemptions 6a Yourself 6b Spouse c Dependents (1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) if qualifying child for child tax credit

Income 7 Wages, salaries, tips, etc. 8a Taxable interest 8b Tax-exempt interest 9a Ordinary dividends 9b Qualified dividends 10 Taxable refunds, credits, or offsets of state and local income taxes 11 Alimony received 12 Business income or (loss) 13 Capital gain or (loss) 14 Other gains or (losses) 15a IRA distributions 15b Taxable amount 16a Pensions and annuities 16b Taxable amount 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. 18 Farm income or (loss) 19 Unemployment compensation 20a Social security benefits 20b Taxable amount 21 Other income 22 Add the amounts in the far right column for lines 7 through 21. This is your total income

Adjusted Gross Income 23 Educator expenses 24 Certain business expenses of reservists, performing artists, and fee-basis government officials 25 Health savings account deduction 26 Moving expenses 27 One-half of self-employment tax 28 Self-employed SEP, SIMPLE, and qualified plans 29 Self-employed health insurance deduction 30 Penalty on early withdrawal of savings 31a Alimony paid 31b Recipient's SSN 32 IRA deduction 33 Student loan interest deduction 34 Tuition and fees deduction 35 Domestic production activities deduction 36 Add lines 23 - 31a and 32 - 35 37 Subtract line 36 from line 22. This is your adjusted gross income

Tax and Credits		38 Amount from line 37 (adjusted gross income)	38	89,247.
Standard Deduction for - • People who checked any box on line 39a or 39b or who can be claimed as a dependent, see instructions. • All others: Single or Married filing separately, \$5,350 Married filing jointly or Qualifying widow(er), \$10,700 Head of household, \$7,850	39a Check if: <input type="checkbox"/> You were born before January 2, 1943, <input type="checkbox"/> Blind. Total boxes checked 39a	<input type="checkbox"/> Spouse was born before January 2, 1943, <input type="checkbox"/> Blind. 39b		
	40 Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	19,809.	
	41 Subtract line 40 from line 38	41	69,438.	
	42 If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line 6d. If line 38 is over \$117,300, see the instructions	42	6,800.	
	43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	62,638.	
	44 Tax (see instrs). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> Form(s) 8889	44	8,611.	
	45 Alternative minimum tax (see instructions). Attach Form 6251	45		
	46 Add lines 44 and 45	46	8,611.	
	47 Credit for child and dependent care expenses. Attach Form 2441	47		
	48 Credit for the elderly or the disabled. Attach Schedule R	48		
49 Education credits. Attach Form 8863	49	549.		
50 Residential energy credits. Attach Form 5695	50	300.		
51 Foreign tax credit. Attach Form 1116 if required	51			
52 Child tax credit (see instructions). Attach Form 8901 if required	52			
53 Retirement savings contributions credit. Attach Form 8880	53			
54 Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8859 c <input type="checkbox"/> Form 8839	54			
55 Other credits: a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Form	55			
56 Add lines 47 through 55. These are your total credits	56	849.		
57 Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-	57	7,762.		
58 Self-employment tax. Attach Schedule SE	58	588.		
59 Unreported social security and Medicare tax from: a <input type="checkbox"/> Form 4137 b <input type="checkbox"/> Form 8919	59			
60 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60			
61 Advance earned income credit payments from Form(s) W-2, box 9	61			
62 Household employment taxes. Attach Schedule H	62			
63 Add lines 57-62. This is your total tax	63	8,350.		
Payments	64 Federal income tax withheld from Forms W-2 and 1099	64	7,855.	
If you have a qualifying child, attach Schedule EIC.	65 2007 estimated tax payments and amount applied from 2006 return	65		
	66a Earned income credit (EIC)	66a		
	b Nontaxable combat pay election 66b	66b		
	67 Excess social security and tier 1 RRTA tax withheld (see instructions)	67		
	68 Additional child tax credit. Attach Form 8812	68		
	69 Amount paid with request for extension to file (see instructions)	69		
	70 Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	70		
	71 Refundable credit for prior year minimum tax from Form 8801, line 27	71		
	72 Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72	7,855.	
	Refund	73 If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid	73	
Direct deposit? See instructions and fill in 74b, 74c, and 74d or Form 8888.	74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	74a		
	b Routing numberXXXXXXXXXX c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings			
	d Account numberXXXXXXXXXXXXXXXXXXXX			
75 Amount of line 73 you want applied to your 2008 estimated tax	75			
Amount You Owe	76 Amount you owe. Subtract line 72 from line 63. For details on how to pay, see instructions	76	495.	
	77 Estimated tax penalty (see instructions)	77		
Third Party Designee	Do you want to allow another person to discuss this return with the IRS (see instructions)? <input type="checkbox"/> Yes. Complete the following. <input checked="" type="checkbox"/> No			
Sign Here	Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Joint return? See instructions. Keep a copy for your records.	Your signature	Date	Your occupation Consulting	
	Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation Mortgage Loan Officer	
Paid Preparer's Use Only	Preparer's signature	Date	Preparer's SSN or PTIN	
	Firm's name (or yours if self-employed)	Check if self-employed <input type="checkbox"/>	EIN	
	address, and ZIP code		Phone no.	

SCHEDULE A
(Form 1040)

Itemized Deductions

JUN 20 2008 09:55
OMB No. 1545-0047

2007

Department of the Treasury
Internal Revenue Service

► Attach to Form 1040.
► See Instructions for Schedule A (Form 1040).

Attachment
Sequence No. **07**

Name(s) shown on Form 1040

Your social security number

Ryan S & Amanda F Neves

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, line 38	2	
3	Multiply line 2 by 7.5% (.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 (check only one box):	
a	<input type="checkbox"/> Income taxes, or	5	1,044.
b	<input checked="" type="checkbox"/> General sales taxes.		
6	Real estate taxes (see instructions)	6	1,088.
7	Personal property taxes	7	74.
8	Other taxes. List type and amount ►	8	
9	Add lines 5 through 8	9	2,206.
Interest You Paid		10 Home mlg interest and points reported to you on Form 1098	
11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying number, and address ►	11	
12	Points not reported to you on Form 1098. See instrs for spel rules	12	
13	Qualified mortgage insurance premiums (see instructions)	13	
14	Investment interest. Attach Form 4952 if required. (See instrs.)	14	
15	Add lines 10 through 14	15	10,580.
Gifts to Charity		16 Gifts by cash or check. If you made any gift of \$250 or more, see instrs	
17	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17	400.
18	Carryover from prior year	18	
19	Add lines 16 through 18	19	7,023.
Casualty and Theft Losses		20 Casualty or theft loss(es). Attach Form 4684. (See instructions.)	
21	Unreimbursed employee expenses — job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ►	21	
22	Tax preparation fees	22	79.
23	Other expenses — investment, safe deposit box, etc. List type and amount ►	23	
24	Add lines 21 through 23	24	79.
25	Enter amount from Form 1040, line 38	25	89,247.
26	Multiply line 25 by 2% (.02)	26	1,785.
27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27	0.
28	Other — from list in the instructions. List type and amount ►	28	
Total Itemized Deductions		29	
Is Form 1040, line 38, over \$156,400 (over \$78,200 if married filing separately)?			
<input checked="" type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.		19,809.	
<input type="checkbox"/> Yes. Your deduction may be limited. See instructions for the amount to enter.			
30	If you elect to itemize deductions even though they are less than your standard deduction, check here ► <input type="checkbox"/>		