**COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES**

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# STATEMENT OF SOURCES OF INCOME FOR EXECUTIVE EMPLOYEES

*2015 Calendar Year: January 1, 2015 - December 31, 2015*

☐ **Check here if this statement is an update or amendment of a previously filed statement.**

| Name | Job Title |
|---|---|
| Department | Phone (work) |
| Mailing Address (work) | E-mail Address (work) |

## GENERAL INSTRUCTIONS

- **Complete all sections. If a section is not applicable, check the box marked "None."**
- A glossary is located in the back of this form.
- If completing this form by hand, please write legibly. **NO RED INK!**
- Report the sources of income for you, your spouse or domestic partner, and your dependent children.
- Report only specific sources of income. Dollar amounts need not be listed.

**Please keep a copy of this statement for your records!**

## REPORTING DEADLINES

### Constitutional Officers and the State Auditor

Newly elected constitutional officers and the state auditor must file the financial disclosure statement within 30 days of election and by April 15 of each year they are in office, unless a report for that year has already been filed.

### Appointed Executive Employees

Newly appointed executive employees who are appointed by the Governor and confirmed by the Legislature must file the financial disclosure statement prior to their confirmation and by April 15 of each year of their employment, unless a report for that year has already been filed.

### Executive Employees in Major Policy-Influencing Positions

Executive employees in major policy-influencing positions must file the financial disclosure statement by April 15 of each year of their employment.

### Leaving Office or Terminating Employment

Constitutional officers and the state auditor and all other executive employees must file a final financial disclosure statement within 45 days of leaving office or terminating employment that covers the calendar year of leaving office or terminating employment.

## REQUIREMENT TO FILE AN UPDATED STATEMENT

Executive branch employees are required to update their financial disclosure statement within 30 days of a substantial change in income, reportable liabilities or positions of the executive branch employee or an immediate family member (except dependent children) that occurs in the current calendar year. (5 M.R.S.A. § 19(3)(C)) Substantial changes include but are not limited to:

- A new employer or other source of income that has paid the executive branch employee or immediate family member $2,000 or more in the current year;
- A new reportable liability of $3,000 or more obtained during the current calendar year;
- A new contract or other arrangement between the executive branch employee, immediate family member or associated organization and a State agency, board or commission for the lease or sale of goods or services with a value of more than $10,000 during the current calendar year; and
- A new position in a political action committee, ballot question committee, party committee, or non-profit or for profit organization.

## INSTRUCTIONS: Part 1. Income from Employment by Another

If you were a full or part time employee of any public or private organization (including the Legislature) and received compensation during the reporting year of $2,000 or more, list your job title, and the name, address, and principal type of economic or business activity of the employer. Do not include information about self-employment or the practice of law in this section.

**EXAMPLE:** Joan is currently serving as an executive branch employee. She is also employed by Pine Tree Counseling Services as a counselor and earns more than $2,000 per year.

| Name of Employer | Address | Principal Type of Economic or Business Activity of Employer | Job Title |
|---|---|---|---|
| *Pine Tree Counseling Services* | *201 Main Street, Pine Tree City, ME* | *Counseling Services* | *Counselor* |
| *State Agency* | *444 State House Station, Augusta, ME* | *Government* | *Deputy Commissioner* |

## INSTRUCTIONS: Part 2. Income from Self-Employment

If you sold goods or provided services to others during the reporting year, list the name, address, and principal type of economic activity of your business. If your business does not have a name, list the name under which you provide goods and/or services. If the amount you received from any client or customer was more than $2,000 or more than 10% of your gross income from self-employment during the year, whichever is greater, list the name, address, and principal type of economic or business activity of the client or customer. If this type of disclosure is prohibited by law, rule, or an established code of professional ethics, specify only the principal type of economic or business activity of the client or customer.

**EXAMPLE:** Jean has a business that supplies rough cut timber. Last year the business grossed $30,000. Robert Thompson bought four orders of lumber at $1,000 per order—$4,000 in total. Sally Hill bought $2,000 worth of lumber. Because her business made $30,000 during the reporting period, she must only report those clients who represent more than 10% or $3,000, of her income from self-employment.

| Name of Your Business/Trade name | Address of Business | Principal Type of Economic or Business Activity |
|---|---|---|
| *Smith's Lumber Co.* | *123 Main Street, Pine Tree City, Maine* | *Rough Cut Timber Milling* |
| Name of Customer or Client, if required (see instructions). | Address | Principal Type of Economic or Business Activity of Client |
| *Robert Thompson* | *456 Main Street, Pine Tree City, Maine* | *Carpenter* |

## INSTRUCTIONS: Part 3. Business Entities

List the name, address and principal economic or business activity of any corporation, partnership, limited liability company or other business entity in which you or the members of your immediate family, own or control, directly or indirectly, more than 5% of the outstanding equity, individually or in the aggregate, if the business had revenue of $2,000 or more during the calendar year.

**EXAMPLE:** Joan's spouse is the sole member of a limited liability company which receives revenue of more than $2,000 each year by leasing office suites in an office building it owns.

| Name of Business | Address | Principal Type of Economic or Business Activity |
|---|---|---|
| *123 Broad Street LLC* | *456 Elm Street, Pine Tree City, Maine* | *Leasing of office space* |

## INSTRUCTIONS: Part 4. Income from the Practice of Law

List the name, address, and major areas of practice for all sources of income of $2,000 or more derived from the practice of law. If you are a member of a firm, partnership, or limited liability company, list the major areas of practice for that entity. In addition, state whether you are a sole practitioner, partner, associate, or shareholder.

**EXAMPLE:** Last year, Jan was a sole practitioner. Her labor law practice earned more than $2,000.

| Name of Firm or Practice | Address | Your Major Areas of Practice | Firm's Major Areas of Practice | Position: Partner, Associate, Sole Practitioner |
|---|---|---|---|---|
| *The Law Office of Jan Smith* | *789 Elm Street, Pine Tree City, Maine* | *Labor Law* | *N/A* | *Sole Practitioner* |

## Part 1. Income from Employment by Another

☐ None. Check this box if you did not have income from employment by another.

| Name of Employer | Address | Principal Type of Economic or Business Activity of Employer | Job Title |
|---|---|---|---|
| | | | |
| | | | |

## Part 2. Income from Self-Employment

☐ None. Check this box if you did not have income from self-employment.

| Name of Your Business/Trade Name | Address | Principal Type of Economic or Business Activity |
|---|---|---|
| | | |
| | | |

| Name of Client or Customer, if required (see instructions) | Address | Principal Type of Economic or Business Activity of Client |
|---|---|---|
| | | |
| | | |

## Part 3. Business Entities

☐ None. Check this box if you and your immediate family did not own or control more than 5% of any business.

| Name of Business | Address | Principal Type of Economic or Business Activity |
|---|---|---|
| | | |
| | | |

## Part 4. Income from the Practice of Law

☐ None. Check this box if you did not have income from the practice of law.

| Name of Practice or Firm | Address | Your Major Areas of Practice | Firm's Major Areas of Practice | Position: Partner, Associate, Sole Practitioner |
|---|---|---|---|---|
| | | | | |
| | | | | |

## INSTRUCTIONS: Part 5. Income from Any Other Source

Include in this section any source of income of $2,000 or more not listed in Parts 1, 2, or 3 which you received during the reporting year, such as investments, sales of property, or retirement benefits. Please see the glossary for examples of income that must be reported. Include income received "in-kind" as well as regular income.

Income ***does not*** include alimony, child support or similar support payments, campaign contributions, gifts or honoraria. Income also does not include funds or other property held in trust for another such as fees that are paid in advance or money to be spent on behalf of a client for a licensing or filing fee.

***Do not*** include income received by immediate family members. Report immediate family members' income in Parts 6-A & 6-B.

**EXAMPLE:** Diane has investments in a mutual fund with Global Investment, LLC. The mutual fund paid quarterly dividends to Jane that added up to more than $2,000 over the course of the reporting year. In addition, Diane receives a monthly pension payment from her prior job as a school teacher.

| Name of Source | Address | Description of Income |
|---|---|---|
| *Global Investment, LLC* | *One Copley Plaza, Boston, MA* | *Mutual fund* |
| *Maine Public Employees Retirement System* | *46 State House Station, Augusta, Maine* | *Pension* |

## INSTRUCTIONS: Part 6-A. Compensation Income of Immediate Family Members

List the name, address, and principal type of economic or business activity for each entity representing income of $2,000 or more ***derived through employment or compensation*** by any member of your immediate family. Include all income received through employment by another, self-employment, or the practice of law.

Include the job title ***and*** name of the ***spouse or domestic partner*** receiving income. Include the job title of the dependent child receiving income, but ***do not*** include the dependent child's name. Instead write "dependent" in the section for name.

**EXAMPLE:** Jan's spouse is an attorney with Smith & Jones. He earned more than $2,000 in the previous year practicing law. Jan's dependent daughter worked as a lifeguard during the summer of the previous year, earning more than $2,000.

| Name and Job Title<br>(do not list name of dependent child) | Employer's Name and Address | Principal Type of Economic or Business Activity of Employer |
|---|---|---|
| *John Smith, Attorney* | *Smith & Jones, L.L.P.*<br>*28 Hollywood Drive, Raymond, Maine* | *Worker's Comp., Personal Injury, Probate/ Wills* |
| *Dependent, Lifeguard* | *Pine Tree YMCA*<br>*202 Main Street, Pine Tree City, Maine* | *Fitness* |

## INSTRUCTIONS: Part 6-B. Other Source of Income of Immediate Family Members

List the name, address, and type of income for each source of income not listed in Part 5-A which represents $2,000 or more received by any member of your immediate family. Include the name of the spouse or domestic partner receiving income. ***Do not*** include the name of a dependent child receiving income. Instead, write "dependent" in the section for name.

**EXAMPLE:** Jan's oldest daughter was given money to be held in trust until her 16th birthday. Now that she has turned 16, the trust is issuing payments to her. Over the course of the year, the payments add up to more than $2,000. Jan's spouse lost his job and is receiving unemployment benefits. Last year, he received more than $2,000 in benefits.

| Name of Spouse or Partner<br>(do not list name of dependent child) | Source's Name and Address | Type of Income |
|---|---|---|
| *Dependent* | *Union Life Insurance Co.,*<br>*One Copley Plaza, Boston, MA* | *Trust distribution* |
| *John Smith* | *Maine Dept. of Labor* | *Unemployment Benefits* |

## Part 5. Income from Any Other Source

☐ None. Check this box if you did not have income from any other source.

| Name of Source | Address | Description of Income |
|---|---|---|
| | | |
| | | |
| | | |

## Part 6-A. Compensation Income of Immediate Family Members

☐ None. Check this box if no members of your immediate family received income of $2,000 or more from employment or compensation.

| Name and Job Title (do not list name of dependent child) | Employer's Name and Address | Principal Type of Economic or Business Activity of Employer |
|---|---|---|
| | | |
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## Part 6-B. Other Sources of Income of Immediate Family Members

☐ None. Check this box if no members of your immediate family received income of $2,000 or more from any other source.

| Name of Spouse or Partner (do not list name of dependent child) | Source of Income Name and Address | Type of Income |
|---|---|---|
| | | |
| | | |
| | | |

## INSTRUCTIONS: Part 7. Loans and Liabilities

If you received any loan of $3,000 or more during the reporting year that was not secured by collateral (e.g., mortgage, car loan), list the name, address, and principal type of economic or business activity of the lender. For more information concerning what loans and liabilities must be reported, please see the definition of reportable liability in the glossary.

**EXAMPLE:** Joan borrowed $5,000 from Carl Smith, a friend, to pay for an addition of a deck to her house.

| Lender's Name | Lender's Address | Principal Type of Economic or Business Activity of Lender |
|---|---|---|
| *Carl Smith* | *201 Main Street, Pine Tree City, Maine* | *Accountant* |

## INSTRUCTIONS: Part 8. Gifts, Including Travel and Accommodations

List each source from which you received a gift or gifts with a total value of more than $300 during the reporting year. If a person or organization has spent more than $300 in the year to finance your travel, meals, or accommodations, their payments are considered a gift which must be reported. See the glossary for goods and services which are ***not*** considered a gift.

**EXAMPLE:** Jill was invited to speak at a conference on utilities regulation held by the U.S. New Energy Association. The association paid her travel and hotel expenses, which were $800. Because the cost of travel and lodging was more than $300, it is a gift and must be disclosed.

| Source of Gift | Source of Gift |
|---|---|
| 1. *U.S. New Energy Association* | 2. |

## INSTRUCTIONS: Part 9. Honoraria

List all sources of honoraria of $2,000 or more you received during the reporting year. “Honoraria” means a payment of money or anything with resale value received for an appearance or speech by you in your official capacity. See the glossary for more information concerning honoraria.

**EXAMPLE:** Jan was paid to speak at the national conference on proposed corporate tax legislation in Maine.

| Source of Honoraria | Source of Honoraria |
|---|---|
| 1. *National Federation of Independent Businesses* | 2. |

## INSTRUCTIONS: Part 10. Positions in Political Action, Ballot Question or Party Committees

List the name of each political action committee, ballot question committee, or political party committee for which you or a member of your immediate family were the treasurer, a principal officer, fundraiser or decision-maker.

**EXAMPLE:** Jan Smith was a principal officer in a ballot question committee that is active in a bond referendum.
Her husband was the treasurer of the Falmouth Republican Committee.

| Name of Committee | Name of Official or Family Member | Title |
|---|---|---|
| 1. *Improve Maine’s Economy PAC* | Jan Smith | Principal Officer |
| 2. *Falmouth Republican Committee* | John Smith | Treasurer |

## Part 7. Loans

☐ None. Check this box if you did not have reportable liabilities.

| Lender's Name | Lender's Address | Principal Type of Economic or Business Activity of Lender |
|---|---|---|
| | | |
| | | |

## Part 8. Gifts, Including Travel and Accommodations

☐ None. Check this box if you did not received any gifts.

| Source of Gift | Source of Gift |
|---|---|
| 1. | 2. |
| 3. | 4. |

## Part 9. Honoraria

☐ None. Check this box if you did not receive honoraria.

| Source of Honoraria | Source of Honoraria |
|---|---|
| 1. | 2. |
| 3. | 4. |

## Part 10. Positions in Political Action, Ballot Question or Party Committees

☐ None. Check this box if you and your immediate family were not a treasurer, or principal officer, decision-maker or fundraiser of a PAC, BQC, or Party Committee.

| Name of Committee | Name of Official or Family Member | Title |
|---|---|---|
| 1. | | |
| 2. | | |
| 3. | | |

## INSTRUCTIONS: Part 11. Conducting Business with State Agencies

List each State agency, board or commission to which you or an immediate family member or an associated organization rented, leased or sold goods or services for more than $10,000 during the reporting period. Include the name of the individual or organization conducting business with the agency and a description of the goods or services.

**EXAMPLE:** Jill's spouse is the vice-president for operations of a large software developer. Last year, the company received $250,000 from the Department of Environmental Protection for developing custom software.

| Name of Agency | Name of Individual/Organization Selling Goods or Services | Description of Goods or Services |
|---|---|---|
| *Dept. of Environmental Protection* | *Acme Technology, Inc.* | *Custom software application* |

## INSTRUCTIONS: Part 12. Representing Others before State Agencies

If you, or a member of your immediate family, appeared for, represented, or assisted any person or client before a State agency for compensation, list the State agency and the person receiving the compensation for the representation or assistance.

**EXAMPLE:** Jan's spouse, an attorney, received $5,000 for representing a client before the Department of Health and Human Services in an appeal of a disability determination.

| Name of Agency | Name of Individual Receiving Compensation |
|---|---|
| *Department of Health and Human Services* | John Smith |

## INSTRUCTIONS: Part 13. Positions in For-Profit and Non-Profit Organizations

List any for-profit or non-profit corporation, firm, association, limited liability company, partnership or business in which you or a member of your immediate family held any office, trusteeship, directorship, or position of any nature in the reporting year, and indicate whether the position was compensated or uncompensated.

Reportable positions include, but are not limited to:

- Director
- Partner
- Trustee
- Officer of any type
- Member of limited liability company
- President
- Chair of board
- Treasurer
- Secretary
- Board member

A clerk of a corporation or a registered agent authorized to receive service of any process, notice or other demand for a business entity is not considered a position with the corporation or business entity.

**EXAMPLE:**

| Organization/Business and Address | Title | Name of Position Holder | Relationship to Executive Employee | Compensated Yes/No |
|---|---|---|---|---|
| *Kennebec Historical Society*<br>*107 Winthrop Street*<br>*Augusta, Maine 04330* | *Director* | *Jan Smith* | ☐ *Self*<br>☐ *Spouse*<br>☐ *Dependent* | *No* |
| *Community Ventures, LLC*<br>*2941 Fairview Park Drive Pine*<br>*Tree City, Maine, 04567* | *Member* | *John Smith* | ☐ *Self*<br>☐ *Spouse*<br>☐ *Dependent* | *Yes* |

## Part 11. Conducting Business with State Agencies

☐ None. Check this box if neither you nor your immediate family did business with any State agency.

| Name of Agency | Name of Individual/Organization Selling Goods or Services | Description of Good or Services |
|---|---|---|
| | | |
| | | |
| | | |

## Part 12. Representing Others Before State Agencies

☐ None. Check this box if neither you nor your immediate family represented another before a State agency.

| Name of Agency | Name of Individual Receiving Compensation |
|---|---|
| | |
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## Part 13. Positions in For-Profit and Non-Profit Organizations

☐ None. Check this box if you and members your immediate family did not hold positions in any for-profit or non-profit organizations.

| Organization/Business and Address | Title | Name of Position Holder | Relationship to Executive Employee | Compensated Yes/No |
|---|---|---|---|---|
| | | | ☐ Self<br>☐ Spouse<br>☐ Dependent | |
| | | | ☐ Self<br>☐ Spouse<br>☐ Dependent | |
| | | | ☐ Self<br>☐ Spouse<br>☐ Dependent | |

## SIGNATURE

I CERTIFY THAT I HAVE EXAMINED THIS REPORT AND TO THE BEST OF MY KNOWLEDGE IT IS TRUE, CORRECT, AND COMPLETE.

_____ Signature

_____ Date

THE INTENTIONAL FILING OF A FALSE STATEMENT IS A CLASS E CRIME (1 M.R.S.A. § 1016-G(3)(B))

## Glossary

**Associated organization** means any organization in which an executive branch employee or a member of the employee's immediate family is a managerial employee, director, officer or trustee or owns or controls, directly or indirectly, and severally or in the aggregate, at least 10% of the outstanding equity.

**Gift** means anything of value, including forgiveness of an obligation or debt, given to a person without that person providing equal or greater consideration to the giver. "Gift" does not include:

A. Gifts received from a single source during the reporting period with an aggregate value of $300 or less;
B. A bequest or other form of inheritance;
C. A gift received from a relative or from an individual on the basis of a personal friendship as long as that individual is not a registered lobbyist or lobbyist associate under Title 3, section 313, unless the executive branch employee has reason to believe that the gift was provided because of the employee's official position and not because of a personal friendship.

**Honorarium** means a payment of money or anything with a monetary resale value to a person for an appearance or a speech by the person. Honorarium does not include reimbursement for actual and necessary travel expenses for an appearance or speech. Honorarium does not include a payment for an appearance or speech that is unrelated to the person's official capacity or duties.

**Immediate family** includes your spouse or domestic partner and dependent children.

**Income** means economic gain to a person from any source, including, but not limited to, compensation for services, including fees, commissions and payments in-kind; gross income derived from business; gross income derived from dealings in property, rents and royalties; gross income from investments including interest, capital gains and dividends; annuities; income from life insurance and endowment contracts; pensions; income from discharge of indebtedness; distributions from a partnership or limited liability company; gross income from an interest in an estate or trust; prizes; and grants, but does not include gifts or honoraria. Income received in-kind includes, but is not limited to, the transfer of property and options to buy or lease and stock certificates. Income does not include alimony and separate maintenance payments, child support payments or campaign contributions accepted for state or federal office or funds or other property held in trust for another, including but not limited to fees paid in advance or money to be spent on behalf of a client for payment of a licensing or filing fee.

**Managerial employee** means an employee of an organization whose position requires substantial control over the organization's decision making, business operations, financial management or contracting and procurement activities. For the purposes of this subsection, financial management does not include tasks that are considered clerical in nature.

**Relative** means an individual who is related to you or your spouse as father, mother, son, daughter, brother, sister, uncle, aunt, great aunt, great uncle, first cousin, nephew, niece, husband, wife, grandfather, grandmother, grandson, granddaughter, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, stepfather, stepmother, stepson, stepdaughter, stepbrother, stepsister, half brother or half sister, and includes your fiancé or fiancée.

**Reportable liability** means any unsecured loan, except a loan made as a campaign contribution recorded as required by law, of $3,000 or more received from a person not a relative. Reportable liabilities do not include:

(1) A credit card liability;
(2) An educational loan made or guaranteed by a governmental entity, educational institution, or nonprofit organization; or
(3) A loan made from a state or federally regulated financial institution for business purposes.

**Self-employment** means that the person qualifies as an independent contractor under Title 39-A, section 102, subsection 13, which states in part, "independent contractor means a person who performs services for another under contract, but who is not under the essential control or superintendence of the person while performing those services."

## ADDITIONAL INFORMATION

Please provide any additional information in the space below. Indicate the part number for the information you are providing. Use additional pages if necessary.

| Part Number | |
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