



COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

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STATEMENT OF SOURCES OF INCOME FOR LEGISLATIVE CANDIDATES

2019 Calendar Year: January 1, 2019 - December 31, 2019

Form with fields: Name, Office (House/Senate checkboxes), Mailing Address, District Number, City/Town, State, Zip, E-mail Address

FILING DEADLINE

Please file this statement with the Maine Ethics Commission by 5:00 p.m., Monday, August 31, 2020.

GENERAL INSTRUCTIONS TO COMPLETE THIS FORM:

- Complete all sections. If a section is not applicable, check the box labeled "None" for that section.
A glossary is located in the back of this form.
If completing this form by hand, PLEASE WRITE LEGIBLY. Do not use red ink or a pencil.
Report the sources of income for you, your spouse or domestic partner, and your dependent children.
Report only specific sources of income. Dollar amounts should not be reported.
Campaign contributions and Maine Clean Election Act payments should not be reported in this statement.
The completed statements will be made available on the Commission's website.
Please keep a copy of this statement for your records.

IMPORTANT NOTICE: REQUIREMENT TO FILE A STATEMENT

Candidates for legislative office who will be participating in the general election are required to file a Statement of Sources of Income covering the calendar year prior to the election. (1 M.R.S.A. §§ 1016-C & 1016-G(2)(B))

Please call the Commission staff 207-287-4179 if you have any questions.

Thank you for your cooperation!

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

If you were a full or part time employee of any public or private organization 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:** Jane is currently 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
<i>Pine Tree Counseling Services</i>	<i>201 Main Street, Pine Tree City, ME</i>	<i>Counseling Services</i>	<i>Counselor</i>

**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:** Jeff 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. Abby Hill bought \$2,000 worth of lumber. Because his business made \$30,000 during the reporting period, he must only report those clients who represent more than 10% or \$3,000, of his income from self-employment.

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

**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:** Lucy'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
<i>123 Broad Street LLC</i>	<i>456 Elm Street, Pine Tree City, Maine</i>	<i>Leasing of office space</i>

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

If you received income of \$2,000 or more from the practice of law, enter the name and address of your practice or firm and your major practice area and indicate whether you are a sole practitioner, of counsel, partner, shareholder, or associate.

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

Name of Firm or Practice	Address	Your Major Areas of Practice	Position: Partner, Associate, Sole Practitioner
<i>The Law Office of John Smith</i>	<i>789 Elm Street, Pine Tree City, Maine</i>	<i>Labor Law</i>	<i>Sole Practitioner</i>

**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	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:** Jan 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, Jan receives a monthly pension payment from her prior job as a school counselor.

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

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

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
<i>William Smith, Attorney</i>	<i>Smith &amp; Jones, L.L.P. 28 Hollywood Drive, Raymond, Maine</i>	<i>Worker's Comp., Personal Injury, Probate/ Wills</i>
<i>Dependent, Lifeguard</i>	<i>Pine Tree YMCA 202 Main Street, Pine Tree City, Maine</i>	<i>Fitness</i>

### 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:** Janet'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. Janet'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 (do not list name of dependent child)	Source's Name and Address	Type of Income
<i>Dependent</i>	<i>Union Life Insurance Co., One Copley Plaza, Boston, MA</i>	<i>Trust distribution</i>
<i>Jeffrey Wilson</i>	<i>Maine Dept. of Labor</i>	<i>Unemployment Benefits</i>

**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
		<hr/>
		<hr/>
		<hr/>

**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
		<hr/>
		<hr/>
		<hr/>

**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
		<hr/>
		<hr/>
		<hr/>

**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:** Jane 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
<i>Carl Smith</i>	<i>201 Main Street, Pine Tree City, Maine</i>	<i>Accountant</i>

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

If you received a gift or gifts with a total value of more than \$300 from a single source during the reporting year, list the name of each source and a description of the gift or gifts. If a person or organization has spent more than \$300 in the year to finance your travel, meals, or accommodations, those payments are considered gifts which must be reported.

**EXAMPLE:** Jane 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	Description of Gift
<i>U.S. New Energy Association</i>	<i>Travel and lodging costs</i>

**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:** Jane was paid to speak at the national conference of social workers.

Source of Honoraria	Source of Honoraria
<i>1. National Social Workers Association</i>	<i>2.</i>

**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:** Jane 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
<i>1. Improve Maine's Economy BQC</i>	<i>Jane Smith</i>	<i>Principal Officer</i>
<i>2. Falmouth Republican Committee</i>	<i>John Smith</i>	<i>Treasurer</i>

**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 receive any gifts.

Source of Gift	Description of Gift

**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:** Jane'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
<i>Dept. of Environmental Protection</i>	<i>Acme Technology, Inc.</i>	<i>Custom software application</i>

**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:** Jane'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
<i>Department of Health and Human Services</i>	<i>John Smith</i>

**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 Candidate	Compensated Yes/No
<i>Kennebec Historical Society 107 Winthrop Street Augusta, Maine 04330</i>	<i>Director</i>	<i>Jane Smith</i>	<input checked="" type="checkbox"/> <i>Self</i> <input type="checkbox"/> <i>Spouse</i> <input type="checkbox"/> <i>Dependent</i>	<i>No</i>
<i>Community Ventures, LLC 2941 Fairview Park Drive Pine Tree City, Maine, 232042</i>	<i>Member</i>	<i>John Smith</i>	<input type="checkbox"/> <i>Self</i> <input checked="" type="checkbox"/> <i>Spouse</i> <input type="checkbox"/> <i>Dependent</i>	<i>Yes</i>



**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
_____	
_____	
_____	

**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 Candidate	Compensated Yes/No
	_____		<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent	
	_____		<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent	
	_____		<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> 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

## Glossary

**Associated organization** means any organization in which the candidate or a member of the candidate'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 candidate has reason to believe that the gift was provided because of the candidate's position and not because of a personal friendship;
- D. A subscription to a newspaper, news magazine or other news publication;
- E. Legal services provided in a matter of legislative ethics;
- F. A meal, if the meal is a prayer breakfast or a meal served during a meeting to establish a prayer breakfast; or
- G. A meal, if the meal is provided by industry or special interest organizations as part of the informational program presented to a group of public servants.

**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	