

2021 INSTRUCTIONS: FINANCIAL DISCLOSURE STATEMENT FOR PUBLIC OFFICERS

**Important Note: Your 2021 Financial Disclosure Statement (“FDS”) is due no later than May 15, 2021. A \$50 per day late filing fee will be assessed.**

**Important Note: Pursuant to N.J.S.A. 37:1-22, any references to “spouse” shall include a civil union pursuant to P.L.2006, ch. 103.**

**Electronic filing is mandatory for public officers unless you receive an exemption. If you are unable to file electronically, please contact our office at 609-292-1892. Before filling out your FDS, you must first obtain an Authentication Code by completing the request form on our website under “Financial Disclosure.” The forms are fillable PDFs. These PDFs are unique in that they can be saved with Version 8.0 or higher of the free Adobe Reader program.**

**Pursuant to N.J.S.A. 52:13D-21(n), all FDSs must be made available on the State Ethics Commission’s website. Therefore, DO NOT provide personal information on your FDS that is not required (social security number, home address and telephone number, tax returns, brokerage account numbers or statements, credit card numbers, names of spouses, civil union partners, domestic partners, or dependent children).**

Please fill in each line or section; indicate not applicable with “N/A” or “None.”

PAGE 1.

**a. General Information: If you are completing the fillable PDF, please ensure that you fill in all blue lined areas on page 1. This information is required for coding purposes.**

**Date of Statement:** Use the date that the statement is submitted.

**Filing Year:** Enter filing year. If you are completing the fillable PDF, click the dropdown box; current filing year is 2021.

**Name of Public Officer:** Enter the first name, middle initial and last name of the public officer.

**Business Mailing Address:** Provide a complete mailing address; be sure to include zip code. If you use your home address, please so indicate and the staff will delete it for public record purposes.

**Email Address:** Optional.

**Position:** Indicate **official State title**. (i.e. Board member, Commissioner, etc.)  
Do not list your private employment in this section.

**Department or Agency:** Indicate State department or agency within which your public office, for which you are filing, is located. If you are completing the fillable PDF, click the dropdown box.

**Daytime Telephone Number:** Indicate telephone number where you can be reached in the daytime. (It is occasionally necessary for a staff member to contact a filer to obtain omitted information or for clarification of disclosed information.)

**Other governmental positions (Federal, State, County or Local) held by you, whether compensated or uncompensated:** All other governmental positions held by you must be listed, even if no compensation is received. This includes, but is not limited to, elected office, service on planning, zoning, environmental or tax boards, or utilities authorities.

**b. If you, your spouse, your civil union partner, your domestic partner or dependent children presently engages in any occupation, trade, business, profession or employment, list it here.** Domestic partner is defined in N.J.S.A.26:8A-3. This information must also be listed on page 4, h.1, if income of more than \$1,000 is earned.

**Licenses:** If you hold a license issued by a State agency that entitles you to engage in a particular business, profession, trade, or occupation (e.g. attorney, physician, nurse, pharmacist, engineer, real estate, insurance, private detective, teacher), so indicate. Note whether the license is active or inactive. Completing this section satisfies your obligation to report under *N.J.S.A. 52:13D-23(e)(2)*.

**PAGE 2.**

**Contractual or Business Relationships with Agency Officers or Employees.** All personal contractual or business relationships with any officer or employee or special State officer or employee of your agency must be listed. Pursuant to Section X of the Uniform Ethics Code, an agency head, deputy head or assistant head is prohibited from engaging in any private business transactions with any employee in his/her agency.

**State Employment - Relatives**

*The Conflicts Law was amended in January 2006 to include a nepotism provision. N.J.S.A 52:13D-21.2.*

**c.1 If you have a relative employed in any State position, indicate here.** For the purpose of this question, relative means your spouse, your civil union partner, or your or your spouse's or your civil union partner's parent, child, brother, sister, aunt, uncle, niece, nephew, grandparent, grandchild, son-in-law, daughter-in-law, stepparent, stepchild, stepbrother, stepsister, half brother or half sister, whether the relative is related to you or your spouse or your civil union partner by blood, marriage or adoption.

**c.2 If you answered yes to c.1, provide the name of the relative(s) and the employing agency(ies).**

**c.3 Indicate whether you exercise authority, supervision or control, including personnel actions, over the individual(s) named in c.2.**

**d. Ethics Training.** *The Conflicts Law was amended in January 2006 to include a mandatory training provision.*

**d.1 Indicate whether you have completed ethics training.**

**d.2 Indicate whether training was in-person or on-line.** Training modules are available on the State Ethics Commission website.

**d.3 If training was in-person, indicate whether it was provided by your agency or the State Ethics Commission.**

**d.4 Provide date that most recent training was completed (whether on-line or in-person).** If you completed the training modules on our website, you should have received a receipt for each module completed.

**PAGE 3.**

**e. Assets.** These instructions apply to you, your spouse, your civil union partner, your domestic partner and dependent children.

**Assets Required to be Disclosed.** Assets valued at more than \$1,000 must be disclosed. Indicate assets with a checkmark. Do not indicate dollar value. If asset is held jointly, place a check mark in the Public Officer box. The word "joint" should then be noted in the Spouse/Civil Union Partner/Domestic Partner box if applicable.

**Cash on Hand in Bank:** If total exceeds \$1,000, enter a checkmark.

**Notes Receivable-Secured and Unsecured:** Secured and unsecured notes receivable must be disclosed by entering a checkmark. A secured note is one supported or backed by security or collateral, such as real or personal property. The nature of the note(s), i.e., whether unsecured or secured by a contract, mortgage or other form of collateral, must be disclosed under h.5 on page 4. **(Do not disclose mortgages owed by you in this section; these should be listed under liabilities on page 6.)**

**Accounts Receivable:** An account receivable is a debt owed to you that arises in the normal course of business dealings. Enter a checkmark to disclose such a debt and indicate the nature of the account(s) under h.5 on page 4.

**Government Bonds:** Check to disclose ownership of government bonds. Bonds should then be itemized (U.S., New Jersey State, New Jersey Local, Out-of-State and Foreign) on page 7, Schedule A, "Stocks and Bonds Held."

**Stocks and Corporate Bonds:** Check to disclose ownership of stocks and corporate bonds, including mutual funds. These must be itemized on page 7, Schedule A, "Stocks and Bonds Held."

**Interest in Contracts with Government Instrumentalities:** Enter a checkmark to disclose an interest in any contract(s) with any governmental entity. Contracts should then be itemized on page 8, Schedule B, "Interests in Contracts with Government Instrumentalities."

**Real Estate Interests.** Indicate by checkmark ownership of any real property, in whole or in part. Include primary residence, vacation homes, rental property, commercial property and land holdings. Itemize real estate holdings on page 9, Schedule C.

**Accumulated Cash Value of Life Insurance.** Enter a checkmark if life insurance redemption value is more than \$1,000.

**Total Value of Pension Fund.** Enter a checkmark if the total value of all pension funds including State of New Jersey and any other plans established by you, your spouse, your civil union partner, your domestic partner or former employers (IRA, Keogh, annuities, etc.) exceeds \$1,000.

**Vehicles.** Indicate with a checkmark if value exceeds \$1,000.

**Other Assets.** Itemize and list asset(s) if value exceeds \$1,000.

**f. Blind Trust Agreements.** A blind trust is one in which the grantor has no management rights and has no knowledge of or control over the acquisition or disposition of trust assets. All blind trusts must receive the approval of the Commission and must possess the characteristics outlined in the Commission's Guidelines on Blind Trusts.

**g. Interest in closely held corporations, partnerships, sole proprietorships, or similar business entities.** Interest is defined as any ownership or control of any profits or assets of such business entity. Check "yes" and remember to itemize on Schedule D, page 10, if you have such an interest.

**PAGE 4.**

**h. Income.** Identify all sources of income.

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**The following need not be disclosed.**

- income from any source totaling less than \$1,000.
  - cash gifts of less than \$100 in the aggregate received from a person.
  - non-cash gifts with a fair market value of less than \$200 in the aggregate received from a person.
  - gifts of less than \$3,000 in the aggregate received from a relative.  
(Relative includes a spouse, your civil union partner domestic partner, son, daughter, grandson, granddaughter, father, mother, grandfather, grandmother, great-grandfather, great-grandmother, brother, sister, nephew, niece, uncle, or aunt. Relatives by adoption, half-blood, marriage or remarriage, shall be treated as relatives of the whole kinship.)
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**h.1. Employment.** Include your State position if compensation of more than \$1,000 is received, as well as any other employment, full or part-time, for you, your spouse, your civil union partner, your domestic partner or dependent children. Indicate commencement date(s) and termination date(s), if applicable.

Income in the nature of "delayed" compensation, including deferred or future income from the practice of a profession, should be reported here.

**h.2. Compensated directorships and other fiduciary positions.** List only **compensated** directorships and other fiduciary positions here. One is said to act in a fiduciary capacity when the business that he/she transacts or the money or property that he/she handles is not his/her own or for his/her own benefit but for the benefit of another person (executor of an estate, trustee, receiver in bankruptcy). Be sure to also list these positions in section i. on page 5.

**h.3. Contractual arrangements.** All contractual arrangements producing or expected to produce income must be listed. Contractual arrangements include, but are not limited to, a buyout agreement, severance payments, a purchase contract, contract of sale, lease or rental agreement of any goods or services or license.

**h.4. Capital Gains.** Enter a checkmark for capital gains here and itemize on Schedule E, page 11. A capital gain is a profit realized on the sale or exchange of a capital asset (stocks, bonds, house, property, car, etc.).

**h.5. Miscellaneous Sources of Income.** Honoraria, lecture fees, reportable gifts, and other miscellaneous sources of income must be disclosed here, including but not limited to Social Security, pensions, bank interest, dividends, rental income, accounts and notes receivable, and royalties over \$1,000. List each source on the line(s) provided.

#### PAGE 5.

**i. Compensated or uncompensated offices, trusteeships, directorships or positions of any nature held by you, your spouse, your civil union partner, your domestic partner or dependent children, with any firm, corporation, association, partnership or business.** List all applicable positions and indicate whether held by the State officer, spouse, civil union partner, domestic partner or dependent child. Also, indicate whether the business entity in question does business with a casino or the State or is regulated, licensed or inspected by a State agency.

#### PAGE 6.

#### j. Liabilities

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**The following liabilities need not be disclosed.**

- Less than \$10,000 owed to a relative.
  - Less than \$1,000 owed to any other person.
  - Loans with an outstanding balance of less than \$10,000 as of the close of the preceding calendar year, secured by a personal motor vehicle, and household furniture or appliances where the loan did not exceed the purchase price of the item.
  - Revolving charge accounts where the outstanding liability did not exceed \$10,000 in total as of the close of the preceding calendar year.
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List all of your liabilities and those of your spouse, civil union partner, domestic partner and dependent children and identify the creditor. Provide value classes of liabilities of public officers and spouse, civil union partner or domestic partner only. Do not include value classes of liabilities of dependent children. Liabilities include, but are not limited to, notes and accounts payable, past due taxes, mortgages or liens, and loans on life insurance. It is not necessary to list the current year's real estate taxes as a liability. However, if such taxes are not current, the value class of the arrears should be listed. **Note that you must indicate a value class for each listed liability. Value classes are listed at the bottom of the page.**

**Forgiven Liabilities.** If any liability has been forgiven by any creditor within the last 12 months, provide the name of the creditor and indicate the value class. **(Do not list liabilities that you have satisfied in full.)**

## **PAGE 7. Schedule A - Stocks and Bonds Held**

List the type of security (stock or bond), issuer, and whether security is held by you, your spouse, your civil union partner, your domestic partner or dependent children. If ownership exists through a **mutual fund**, you need not list individual stocks, but you must list the name of the mutual fund or holding company. If ownership exists through a beneficial trust and you have no knowledge of the stocks or bonds owned, list the name of the trustee.

If you or your spouse, civil union partner, domestic partner or dependent children owns **more than 10% of the total stock of any company**, the percentage of ownership must be disclosed.

**If you are filing a paper form, make additional copies of Page 7 as needed.**

**If you are completing the fillable PDF and require additional copies of Page 7 to complete your disclosure, click the blue button at the bottom of Page 7. You will be taken directly to the added page, which will appear after the Attestation Page. Continue to click the blue button at the bottom of the page, as needed. Once you have completed the disclosure of all stocks and bonds, you must scroll back to Page 8 to complete the remainder of your disclosure form.**

## **PAGE 8. Schedule B - Interests in Contracts with Government Instrumentalities**

Business or commercial transactions involving the sale, conveyance, or rental of any goods or services to any State, county or municipal or other public agency in New Jersey must be disclosed.

## **PAGE 9. Schedule C - Real Estate Interests**

- 1. Indicate all real estate holdings, in whole or in part, of you or your spouse, civil union partner, domestic partner or dependent children.** Be sure to list your primary residence, vacation residence, residential and commercial rental properties, and land under this section. Real estate interests must also be disclosed on page 3.
- 2. Shared real estate interests with individuals employed by the same State agency.** If any of the individuals sharing a real estate interest is employed by the same State agency, please disclose the names of those individuals and whether there is a supervisor/subordinate relationship between the individuals in question.

Under Commission precedent, officers in the same State agency in a supervisor/subordinate relationship are not permitted to have joint business interests. The Commission requires that these situations be remedied by the termination of the business relationship or the supervisor/subordinate relationship.

- 3. Government tenants/government action pending.** List the name of any government instrumentality that is a tenant in any property listed under question 1.

Also, disclose whether any government instrumentality has before it an application, complaint or proceeding directly affecting any property listed under question 1.

## **PAGE 10. Schedule D - Interest in Closely Held Corporations or Similar Business Entities. (Interest is defined as any ownership or control of any profits or assets of such business entity.)**

Indicate whether the interest is held by you or your spouse, civil union partner, or domestic partner. Be sure to provide a description of the activities of the business as well as **the duties and responsibilities of your State position.**

**If you are filing a paper form, make additional copies of Page 10, as needed.**

**If you are completing the fillable PDF and require additional copies of Page 10 to complete your disclosure, click the blue button at the bottom of Page 10. You will be taken directly to the added page, which will appear after the Attestation Page. Continue to click the blue button at the bottom of the page, as needed. Once you have completed the disclosure of all business interests, you must scroll back to Page 11 to complete the remainder of your disclosure form.**

#### **PAGE 11. Schedule E - Capital Gains**

Capital gains identified on page 4, h.4 must be itemized here. Schedule E should include real property, stocks, or any other asset where a profit was realized.

#### **PAGE 12. Attestation Page**

Enter your 36-character authentication code in the yellow box. You should have obtained this code by completing the request form on our web site. If you have not yet obtained your authentication code, you will need to save the form to your computer. After you have obtained your code, open the saved PDF form, and follow the directions below.

Please include the hyphens between each of the groups of characters (8 characters, hyphen, 4 characters, hyphen, 4 characters, hyphen, 4 characters, hyphen and 12 characters). In order to reduce the possibility of error, we suggest that you copy and paste the authentication code from the e-mail message in which you received it. Go to the e-mail message, highlight the authentication code and click ctrl + C; return to the financial disclosure statement, click ctrl + V.

Enter your full name in the yellow box.

Click the appropriate box to indicate who prepared the FDS.

**Save a copy** of the completed PDF for your records.

Click the blue submit button. You must be online to complete your submission.

A page will appear indicating the date and time of your submission. You may print this for your records. You will also receive an e-mail confirmation that your filing has been received.