GOVERNMENT OF THE DISTRICT OF COLUMBIA BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY



Office of Government Ethics

PUBLIC FINANCIAL DISCLOSURE STATEMENT

Each designated employee subject to section 224 of the District of Columbia Board of Ethics and Government Accountability Establishment and Comprehensive Ethics Reform Act of 2011 (D.C. Official Code § 1-1162.24) is required to complete and submit this Public Financial Disclosure Statement (PFDS) to the Board of Ethics and Government Accountability annually, not later than May 15th of each year for the prior calendar year. Members of the Council are required to complete and submit this form to the Board of Ethics and Government Accountability biannually, not later than May 15th and November 15th of each year.

The reporting period for the Council's November 15th PDFS is the time period between January 1st and June 30th.

The reporting period for the Council's May 15th PFDS is the time period between July 1st and December 31st.

If the form is submitted as an Amendment, answer only the question to which there is a change in information. Please read the General Instructions and Glossary attached to this form and the FDS FAQs available at www.bega-dc.gov. elilia Caladia

Prior Reporting Period for		· Which Filing is Made*	11119-015019		
ORIGINAI	x	AMENDMENT [Date of Filing* 10/16/19		
Name:					
	Nadeau	Brianne	Kruger		
	Last	First	Middle	_	
		CONTACT INFORM	ATION		
		so that BEGA can contact publicly available.)	you regarding your filing. This		
Telephone*:	Home		Business: 2027248181		
Home Addre	ess*:				
	(Stree	t)	(City, State, Zip Code)		
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PFDS

Instructions

- There are fifteen (15) Yes or No questions. You must answer each question.
- If you need to attach supplemental documents you can do so at the end of the form.
- If you cannot agree to all of the statements in the Certification, please explain why in the text box titled "Additional Information."
- · Once a report is submitted, it can only be changed by filing an amendment.
- This form must be submitted no later than November 15, 2019.

above, or you no longer work for the District, please list the details below:

Name of Agency:

Dates During Which You Held the Position:

• Failure to submit a full and complete form to BEGA by November 15, 2019 may result in penalties up to: \$300 for late-filed reports and \$5,000 for incomplete reports.

GENERAL INFORMATION

Current Paid or Unpaid Position with the District of Columbia

Position/Title: Councilmember

Name of Agency/Board/Commission:

Agency Address:

DC Council

Agency Address:

District E-mail Address:

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Position: n/a

Grade: _____

NON-DISTRICT EMPLOYMENT/BUSINESS

1.	Did you have any non-District employment or engage in any outside business during the reporting period for which you received compensation of \$200 or more?
	Note: Answer "yes" if you engaged in any occupation, trade, business, profession, or employment during the reporting period in which you were paid \$200 or more. Do not include your District employment.
	Yes No
Ify	ou answered "Yes," please list the employment or business below:
Pos	sition/Title:
Na	me ofEmployer:
De	scription of Work:
Star	t DateEnd Date (ifapplicable)
	me Received from Outside Business: (Place a check mark in the box next to the applicable range. Attach a Supplemental Sheet if you have additional entries. Report other entries in the same format.) None (or less than \$1,001) \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 Over \$1,000,000 \$1,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000
	Clients If you answered "yes," because you were paid by a client (as opposed to an employer) please identify which, if any, client had or has a contract with the District or who stands to gain a direct financial benefit from legislation that was pending before the Council during the reporting period:
	Client Name:

	compensation of \$200 or more?
	Note: Answer "yes" if your spouse, domestic partner, or dependent child(ren) engaged in any non-government occupation, trade, business, profession, or employment during the reporting period and received income of \$200 or more for doing so.
	Yes No
If:	you answered "Yes", please list the employment or business below: Position/Title:
Na	Kaiser Foundation Health Plan of the Mid-atlantic States, business process consultant
De	escription of Work healthcare operations
Sta	ert Date 10/17/2016 End Date (if applicable)
Cli	ients
a c the	you answered "yes," because your spouse, domestic partner, or dependent child(ren) were paid by lient (as opposed to an employer) please identify which, if any, client had or has a contract with District or who stands to gain a direct financial benefit from legislation that was pending before Council during the reporting period:
Cli	ent Name:
3.	Did you serve in any unpaid position (without compensation) as an officer, director, partner, consultant, contractor, volunteer, member or any other fiduciary capacity of a non-government board or other outside entity during the reporting period?
	■ Yes □ No
	If you answered yes:
	Position/Title: honorary board member
	Name of Employer: Friends of Wangari Gardens
	Start Date 5/20/18 End Date (if applicable)

2. Was your spouse, registered domestic partner, or dependent child(ren) employed by a private entity or did they engage in any business endeavors during the reporting period for which they received

4.	Did your spouse, registered domestic partner, or dependent child(ren) serve in any unpaid position (without compensation) as an officer, director, partner, consultant, contractor, volunteer, member or any other fiduciary capacity of a non-government board or other outside entity during the reporting period?
	☐ Yes ■ No
	If you answered yes:
	Position/Title:
	Name of Employer:
	Start Date End Date (if applicable)
5.	During the reporting period, did you have any agreements with a former or current employer, other than with the District of Columbia, for future payments or benefits (such as separation pay, partnership buyouts, or pension or retirement pay) or for future employment or for a leave of absence?
	☐ Yes ■ No
	If you answered yes:
	Former/Current Employer:
	Type of Agreement or Benefit:
6.	During the reporting period, did your spouse, registered domestic partner, or dependent child(ren) have any agreements with a former or current employer, other than with the District of Columbia, for future payments or benefits (such as separation pay, partnership buyouts, or pension or retirement pay) or for future employment or for a leave of absence?
	☐ Yes ■ No
	If you answered yes:
	Former/Current Employer:
	Type of Agreement or Benefit:

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SECURITIES, HOLDINGS & INVESTMENTS

7.	Did you have a beneficial interest in or hold any security ("security" means stocks (any class), bonds (including savings bonds and tax exempt bonds), stock options, warrants, debentures, obligations, notes (not mortgage notes), mortgages (not on one's home), investment interests in limited partnerships, REITs, and such other evidences of indebtedness and certificates of interest or participation in any profit-sharing agreement as are usually referred to as securities) at the close of the reporting period that exceeded in the aggregate \$1,000 or that produced income of \$200 or more?
	Note: You need not disclose mutual funds or other similar investment vehicles that own multiple securities and are managed by someone other than yourself.
	Yes No
	If you answered yes, please list each security and/or beneficial interest you held below: General Electric
	Total Value of Beneficial Interests or Securities today: (Place a check mark in the box next to the applicable range. Attach a Supplemental Sheet if you have additional entries. Report other entries in the same format.)
	□ None (or less than \$1,001) ■ \$1,001 - \$15,000 □ \$15,001 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$250,000 □ \$250,001 - \$500,000 □ \$500,001 - \$1,000,000 □ \$000,001 - \$1,000,000 □ \$1,000,001 - \$5,000,000 □ \$1,000,001 - \$5,000,000 □ \$25,000,001 - \$25,000,000
	☐ Over \$50,000,000
8.	Did your spouse, registered domestic partner, or dependent child(ren) have a beneficial interest or hold any security ("security" means stocks (any class), bonds (including savings bonds and tax exempt bonds), stock options, warrants, debentures, obligations, notes (not mortgage notes), mortgages (not on one's home), investment interests in limited partnerships, REITs, and such other evidences of indebtedness and certificates of interest or participation in any profit-sharing agreement as are usually referred to as securities) at the close of the reporting period that exceeded in the aggregate \$1,000 or that produced income of \$200 or more?

If you answered yes, please list each security and/or beneficial interest you held below: Total Value of Beneficial Interests or Securities today: (Place a check mark in the box next to the applicable range. Attach a Supplemental Sheet if you have additional entries. Report other entries in the same format.) None (or less than \$1,001) \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$10,000 \$10,000 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$500,000 \$500,001 - \$50,000,000 \$500,001 - \$50,000,000 \$500,001 - \$55,000,000 \$5,000,001 - \$55,000,000 \$25,000,001 - \$55,000,000 \$25,000,001 - \$50,000,000 \$		□ Yes ■ No
(Place a check mark in the box next to the applicable range. Attach a Supplemental Sheet if you have additional entries. Report other entries in the same format.) None (or less than \$1,001) \$1,001 - \$15,000 \$15,001 - \$100,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$25,000,000 \$5,000,001 - \$25,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$10 you owe any entity or person (other than a member of your immediate family) \$1,000 or m (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution), during the reporting period (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution)? Yes No If you answered yes: Name of Entity or Person: Type of Liability:]	f you answered yes, please list each security and/or beneficial interest you held below:
(Place a check mark in the box next to the applicable range. Attach a Supplemental Sheet if you have additional entries. Report other entries in the same format.) None (or less than \$1,001) \$1,001 - \$15,000 \$15,001 - \$100,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$25,000,000 \$5,000,001 - \$25,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$10 you owe any entity or person (other than a member of your immediate family) \$1,000 or m (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution), during the reporting period (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution)? Yes No If you answered yes: Name of Entity or Person: Type of Liability:		
(Place a check mark in the box next to the applicable range. Attach a Supplemental Sheet if you have additional entries. Report other entries in the same format.) None (or less than \$1,001) \$1,001 - \$15,000 \$15,001 - \$100,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$25,000,000 \$5,000,001 - \$25,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$10 you owe any entity or person (other than a member of your immediate family) \$1,000 or m (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution), during the reporting period (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution)? Yes No If you answered yes: Name of Entity or Person: Type of Liability:	•	
have additional entries. Report other entries in the same format.) None (or less than \$1,001) \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$500,001 - \$1,000,000 \$1,000,000 \$1,000,000 \$1,000,001 - \$5,000,000 \$25,000,001 - \$50,000,000 \$5,000,001 - \$55,000,000 \$25,000,001 - \$55,000,000 \$25,000,001 - \$55,000,000 \$0 ver \$50,000,000 \$1,000,000 \$25,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 \$26,000,000 \$1,000,000 \$26,000,001 - \$50,000,000 \$26,000,000 \$27	-	Total Value of Beneficial Interests or Securities today:
□ None (or less than \$1,001) □ \$1,001 - \$15,000 □ \$15,001 - \$100,000 □ \$50,001 - \$100,000 □ \$100,001 - \$250,000 □ \$250,001 - \$500,000 □ \$500,001 - \$1,000,000 □ \$500,001 - \$5,000,000 □ \$1,000,001 - \$5,000,000 □ \$1,000,001 - \$5,000,000 □ \$25,000,001 - \$5,000,000 □ \$25,000,001 - \$50,000,000 □ \$25,000,001 - \$50,000,000 □ \$25,000,001 - \$50,000,000 □ Over \$50,000,000 □ Over \$50,000,000 □ Over \$60,000,000 □ Over \$60,000 □ Over \$60,000 □ Over \$60,000,000 □ Over \$60,000,00	(1	Place a check mark in the box next to the applicable range. Attach a Supplemental Sheet if you have additional entries. Report other entries in the same format.)
\$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$550,001 - \$500,000 \$550,001 - \$1,000,000 \$550,001 - \$5,000,000 \$1,000,001 - \$55,000,000 \$55,000,001 - \$55,000,000 \$55,000,001 - \$55,000,000 \$255,000,001 - \$55,000,000 \$0 ver \$50,000,000 \$0 ver \$50,000,000 \$1,000,001 - \$50,000,000 \$255,000,001 - \$50,000,000 \$0 ver \$50,000,000 \$1,000,001 - \$50,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50,000,000 \$1,000,001 - \$50		□ None (or less than \$1,001)
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□ \$250,001 - \$500,000 □ \$500,001 - \$1,000,000 □ \$1,000,001 - \$5,000,000 □ \$5,000,001 - \$55,000,000 □ \$25,000,001 - \$55,000,000 □ \$25,000,001 - \$50,000,000 □ Over \$5		
□ \$500,001 - \$1,000,000 □ \$1,000,001 - \$5,000,000 □ \$5,000,001 - \$25,000,000 □ \$25,000,001 - \$50,000,000 □ \$25,000,001 - \$50,000,000 □ Over \$50,0		
□ Over \$1,000,000 □ \$1,000,001 - \$5,000,000 □ \$25,000,001 - \$25,000,000 □ \$25,000,001 - \$50,000,000 □ Over		
□ \$5,000,001 - \$25,000,000 □ \$25,000,001 - \$50,000,000 □ Over \$50,000,000 □ Over \$50,000,000 □ Solution of the state insured or regulated financial institution), during the reporting period (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution), during the reporting period (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution)? □ Yes ■ No If you answered yes: Name of Entity or Person: Type of Liability: Type of Liability:		☐ Over \$1,000,000
□ \$25,000,001 - \$50,000,000 □ Over \$50,000,000 Did you owe any entity or person (other than a member of your immediate family) \$1,000 or me (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution), during the reporting period (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution)? □ Yes ■ No If you answered yes: Name of Entity or Person: Type of Liability: □ Type of Liability:		
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If you answered yes: Name of Entity or Person: Type of Liability:	(2 1	excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated inancial institution), during the reporting period (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and
Name of Entity or Person: Type of Liability:	[[
Type of Liability:	J	f you answered yes:
	ì	Name of Entity or Person:
	ī	Type of Liability:
Amount of Emolity.		Amount of Liability:

	have additional entries. Report other entries in the same format.)
	□ None (or less than \$1,001) □ \$1,001 - \$15,000 □ \$15,001 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$250,000 □ \$250,001 - \$500,000 □ \$500,001 - \$1,000,000 □ \$000,001 - \$1,000,000 □ \$1,000,001 - \$5,000,000 □ \$5,000,001 - \$5,000,000 □ \$25,000,001 - \$50,000,000 □ \$25,000,001 - \$50,000,000 □ \$25,000,001 - \$50,000,000
10.	Did you owe any entity or person (other than a member of your immediate family) \$1,000 or more, (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution), during the reporting period (excluding: mortgages on your personal residence, student loans, automobile loans, credit card accounts or other revolving credit, and other loans from a federal or state insured or regulated financial institution)?
	☐ Yes ■ No
	If you answered yes:
	Name of Entity or Person:
	Type of Liability:
	Amount of Liability: (Place a check mark in the box next to the applicable range. Attach a Supplemental Sheet if you have additional entries. Report other entries in the same format.)
	□ None (or less than \$1,001) □ \$1,001 - \$15,000 □ \$15,001 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$250,000 □ \$250,001 - \$500,000 □ \$500,001 - \$1,000,000 □ Over \$1,000,000 □ \$1,000,001 - \$5,000,000 □ \$5,000,001 - \$5,000,000 □ \$25,000,001 - \$50,000,000 □ \$25,000,001 - \$50,000,000 □ \$25,000,001 - \$50,000,000

11. Did you have an interest in any real property located in the District during the reporting

	period, aside from personal residences occupied by you, your spouse or your domestic partner, where your interest had a fair market value of more than \$1,000, or where the property produced income of \$200 or more?
	☐ Yes ☐ No
	Location of RealProperty
	Purchase Date
	Date Sold
	Value of Real Estate or Interest:
12	(Place a check mark in the box next to the applicable range. Attach a Supplemental Sheet if you have additional entries. Report other entries in the same format.) □ None (or less than \$1,001) □ \$1,001 - \$15,000 □ \$15,001 - \$50,000 □ \$50,001 - \$100,000 □ \$250,001 - \$500,000 □ \$250,001 - \$500,000 □ \$500,001 - \$1,000,000 □ \$500,001 - \$5,000,000 □ \$1,000,001 - \$5,000,000 □ \$25,000,001 - \$50,000,000 □ \$25,000,001 - \$50,000,000
12.	Did your spouse, domestic partner, or dependent child(ren) have an interest in any real property located in the District during the reporting period, aside from personal residences occupied by you, your spouse or your domestic partner, where their interest had a fair market value of more than \$1,000, or where the property produced income of \$200 or more?
	☐ Yes ■ No
	Location of RealProperty
Purchase	e Date
Date Sol	d
	Value of Real Estate or Interest:
	(Place a check mark in the box next to the applicable range. Attach a Supplemental Sheet if you have additional entries. Report other entries in the same format.)

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	□ None (or less than \$1,001) □ \$1,001 - \$15,000 □ \$15,001 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$250,000 □ \$250,001 - \$500,000 □ \$500,001 - \$1,000,000 □ Over \$1,000,000 □ \$1,000,001 - \$5,000,000 □ \$5,000,001 - \$5,000,000 □ \$25,000,001 - \$50,000,000 □ \$25,000,001 - \$50,000,000 □ \$25,000,000 - \$50,000,000
	REGULATED PROFESSIONS
13.	Do you hold any professional or occupational licenses issued by the District of Columbia government (i.e., are you licensed to practice law in the District of Columbia, or are you licensed by the District's Department of Health, the District's Department of Consumer and Regulatory Affairs, the District's Department of Mental Health, the District's Department of Insurance Securities and Banking, the Metropolitan Police Department, the District's Occupational and Professional Licensing Administration, etc.)?
	☐ Yes ■ No
Гуј	pe of License Issued (e.g., Real Estate License, D.C. Bar License, etc.)
SSI	uing Entity
	· ·
4.	Does your spouse, domestic partner, or dependent child(ren) hold any professional or occupational licenses issued by the District of Columbia government (i.e., are they licensed to practice law in the District of Columbia, or are they licensed by the District's Department of Health, the District's Department of Consumer and Regulatory Affairs, the District's Department of Mental Health, the District's Department of Insurance Securities and Banking, the Metropolitan Police Department, or the District's Occupational and Professional Licensing Administration, etc.)?
	□ Yes ■ No
Гур	pe of License Issued (e.g., Real Estate License, D.C. Bar License, etc.)
SSI	uing Entity

GIFTS

15.	Did you receive any gift(s) (Gift is defined as a payment, subscription, advance, forbearance, rendering, or deposit of money, services, or anything of value, unless consideration of equal or greater value is received) from any person that has or is seeking to do business with the District, conducts operations or activities that are regulated by the District, or has an interest that may be favorably affected by the performance or nonperformance of your duties in the total amount or with a total value of \$100 or more during the reporting period?
	☐ Yes ■ No
	Identity of Gift Giver
	Gift Giver's Company
	Description of Gift
	Date of GiftAmount or Estimated Value

CERTIFICATION

I certify that I have:

- Not caused title to property to be placed in another person or entity for the purpose of avoiding the disclosure requirements on the preceding form;
- Filed and paid my income and property taxes:
- Diligently safeguarded the assets of the taxpayers and the District;
- Reported known illegal activity, including attempted bribes, to the appropriate authorities;
- Not been offered or accepted any bribes;
- Not directly or indirectly received government funds through illegal or improper means;
- Not raised or received funds in violation of federal or District law; and
- Not received or been given anything of value, including a gift, favor, service, loan gratuity, discount, hospitality, political contribution, or promise of future employment, based on any understanding that my official actions or judgment or vote would be influenced.

Additional Information or if you are unable to certify each of the above, please provide an explanation (i.e., I have been granted an extension to file

my income to	axes):			

YOU MUST SIGN THIS FORM. Read the following carefully before you sign. I understand that the making of a false statement on this form or materials submitted with this form is punishable by criminal penalties pursuant to D.C. Official Code 22-2405 et seq. (2001). I understand that any information I give may be investigated as allowed by law or Mayoral order. I certify that, to the best of my knowledge and belief, all of my statements are true, correct, and complete.

BunneKN	nhe Brianne K. Nade	eau 10/16/19
Signature	Printed Name of Filer	Date

Glossary of Terms

- Financial Conflict of Interest prohibition No employee shall use his or her official position or title, or personally and substantially participate, through decision, approval, disapproval, recommendation, the rendering of advice, investigation, or otherwise, in a judicial or other proceeding, application, request for a ruling or other determination, contract, claim, controversy, charge, accusation, arrest, or other particular matter, or attempt to influence the outcome of a particular matter, in a manner that the employee knows is likely to have a direct and predictable effect on the employee's financial interests or the financial interests of a person closely affiliated with the employee.
- <u>Domestic partnership</u> is defined as the relationship between two persons who have registered as domestic partners under the District's registration procedures (DC Code§ 32-701).
- <u>Gift¹</u> a payment, subscription, advance, forbearance, rendering, or deposit of money, services, or anything of value, unless consideration of equal or greater value is received. The term "gift" shall not include:
 - (A) A political contribution otherwise reported as required by law;
 - (B) A commercially reasonable loan made in the ordinary course of business; or
 - (C) A gift received from a member of the person's immediate family.
- □ <u>Income</u> Income means all income from whatever source derived, including (but not limited to) the following items:
 - (1) Compensation for services, including fees, commissions, fringe benefits, and similar items:
 - (2) Gross income derived from business:
 - (3) Gains derived from dealings in property;
 - (4) Interest;
 - (5) Rents;
 - (6) Royalties:
 - (7) Dividends;
 - (8) Alimony and separate maintenance payments;
 - (9) Annuities:
 - (10) Income from life insurance and endowment contracts:
 - (11) Pensions:
 - (12) Income from discharge of indebtedness;
 - (13) Distributive share of partnership gross income;
 - (14) Income in respect of a decedent; and

¹D.C. Office Code § 1-1161.01(23).

- (15) Income from an interest in an estate or trust.
- *Honoraria are considered "income" for the purposes of this form.
- Confidential Financial Disclosure Statement (CFDS) -The form addresses the following:
 - <u>Business Transactions</u>: This consists of business entities transacting any business with the District of Columbia in which the public official (or spouse for jointly titled property) has a beneficial interest valued in excess of \$1,000.00, or serves as an officer, director, partner, employee, contractor, and consultant or in any other capacity. Business entities include sole proprietorships, partnerships and corporations.
 - > <u>Business Interest</u>: Any business interest held by the public official (or spouse for jointly held property) in business entities transacting any business with the District of Columbia Government consisting of corporate stock, registered and traded on a national exchange, is listed only if the total value exceeds \$5,000.00.
 - Liabilities: Each outstanding liability borrowed by the public official (or spouse if a joint liability) exceeding \$1,000.00 which is not a loan from a federal or state insured or regulated financial institution, immediate family member, or revolving credit or installment account.
 - Real Property: All real property located in the District of Columbia (other than the personal residence actually occupied by the public official or spouse) that the public official or spouse (where jointly titled) holds an interest that has a fair market value in excess of \$1,000.00.
 - > <u>Licenses</u>: Each professional or occupational license issued by the District of Columbia Government.
 - > Gifts: All gifts received in excess of \$100.00 in a calendar period from any business entity transacting business with the District of Columbia Government.