

LOUISIANA BOARD OF ETHICS

Mail: P.O. Box 4368, Baton Rouge, LA 70821

Fax: 225-381-7271

Upload: <https://eap.ethics.la.gov/FileUpload>**(ANNUAL) TIER 1 PERSONAL FINANCIAL DISCLOSURE STATEMENT**

- ☒ I currently hold an office that would require me to file a Tier 2, Tier 2.1, or Tier 3 Personal Financial Disclosure Statement. As such, I have completed SCHEDULE D.

THIS REPORT COVERS CALENDAR YEAR: 2022

- ☒ ORIGINAL REPORT
☐ AMENDED REPORT
☐ FINAL REPORT WHERE TERM ENDS IN JANUARY (COVERING JANUARY 1 THROUGH JANUARY __, __)
A final report must be filed on or before May 15 of the year in which your service to that office ends.
Refer to the "GENERAL INFORMATION" sheet of this form to determine eligibility.

OFFICE/POSITION HELD: Louisiana State TreasurerNAME OF FILER (print full name): John SchroderAddress (residence): 70117 Hwy 59 / Ste. GCity, State, Zip: Abita Springs, LA, 70420NAME OF SPOUSE (if applicable) (print full name): Ellie Marie Daigle SchroderSpouse's Occupation: Residential Contractor/Retired EducatorPrincipal Business Address: 70117 Hwy 59 / Ste. GCity, State, Zip: Abita Spring, LA, 70420

CHECK ALL THAT APPLY:

- ☐ I have filed my state income tax return for the previous year.
☒ I have filed for an extension of my state income tax return for the previous year.
☐ I have filed my federal income tax return for the previous year.
☒ I have filed for an extension of my federal income tax return for the previous year.
NOTE: La. R.S. 42:1124.1 DOES NOT provide you the opportunity to request an extension in filing your personal financial disclosure statement.

Certification of Accuracy

I do hereby certify that the information contained in this personal financial disclosure statement is true and correct to the best of my knowledge, information, and belief.

ELECTRONICALLY FILED

E-FILE # PD-1659

DATE FILED: 5/15/2023

Signature of Filer

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Upload: <https://eap.ethics.la.gov/FileUpload>**Schedule A: Employment Information**☐ Check if not applicable☒ Filer ☐ Spouse ☐ Full-Time ☒ Part-TimeName of Employer: Self-Employed: Deep South Development II, Inc.Job Title: Owner/President

Job Description:

Real Estate Sales and Development

☐ Filer ☒ Spouse ☒ Full-Time ☐ Part-TimeName of Employer: Self-Employed: Maison de Reve Builders, LLCJob Title: Member

Job Description:

Residential Contractor

☒ Filer ☐ Spouse ☒ Full-Time ☐ Part-TimeName of Employer: State of LouisianaJob Title: Louisiana State Treasurer

Job Description:

Louisiana State Treasurer

☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time

Name of Employer: _____

Job Title: _____

Job Description:

- You are required to complete SCHEDULE A to disclose employment information related to both you and your spouse (if applicable).
- List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is full-time or part-time.

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Upload: <https://eap.ethics.la.gov/FileUpload>**Schedule B: Positions – Business**☐ Check if not applicable☒ Filer ☐ Spouse ☐ BothAmount of Interest: 100 %Name of Business: Schroder Development Group, Inc.Address: 70117 Hwy 59 / Ste. GCity, State, Zip: Abita Springs, LA, 70420Business Description: Shopping Center/RentalsNature of Association: Owner☒ Filer ☐ Spouse ☐ BothAmount of Interest: 100 %Name of Business: Deep South Development IIAddress: 70117 Hwy. 59 / Ste. GCity, State, Zip: Abita Springs, LA, 70420Business Description: Real Estate Sales, Property Management, and Business DevelopmentNature of Association: Owner☒ Filer ☐ Spouse ☐ BothAmount of Interest: 100 %Name of Business: JES Management, LLCAddress: 70117 Hwy. 59 / Ste. GCity, State, Zip: Abita Springs, LA, 70420Business Description: Property ManagementNature of Association: Owner☒ Filer ☐ Spouse ☐ BothAmount of Interest: 100 %Name of Business: Abita Laundry Holdings, LLCAddress: 70117 Hwy 59 / Ste. GCity, State, Zip: Abita Springs, LA, 70420Business Description: Coin LaundryNature of Association: Owner

* You are required to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, owner, partner, member, or trustee of a business OR if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

* "Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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Upload: <https://eap.ethics.la.gov/FileUpload>**Schedule B: Positions – Business**☐ Check if not applicable☒ Filer ☐ Spouse ☐ BothAmount of Interest: 100 %Name of Business: Parata Enterprises, LLCAddress: 70117 Hwy 59 / Ste. ACity, State, Zip: Abita Springs, LA, 70420Business Description: Commercial Real Estate RentalNature of Association: Owner☒ Filer ☐ Spouse ☐ BothAmount of Interest: 100 %Name of Business: W. 13th Holdings, LLCAddress: 70117 Hwy 59 / Ste. ACity, State, Zip: Abita Springs, LA, 70420Business Description: Residential Real Estate RentalNature of Association: Owner☒ Filer ☐ Spouse ☐ BothAmount of Interest: 100 %Name of Business: Riverview Condo Holdings, LLCAddress: 70117 Hwy 59 / Ste. ACity, State, Zip: Abita Springs, LA, 70420Business Description: Residential Real Estate RentalNature of Association: Owner☐ Filer ☒ Spouse ☐ BothAmount of Interest: 100 %Name of Business: Geaux Home Construction, LLCAddress: 70117 Hwy 59 / Ste. GCity, State, Zip: Abita Springs, LA, 70420Business Description: ConstructionNature of Association: Owner/Contractor

* You are required to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, owner, partner, member, or trustee of a business OR if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

* "Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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* You are required to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, owner, partner, member, or trustee of a business OR if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

* "Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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Amount of Interest: _____ %

Name of Business: _____

Address: _____

City, State, Zip: _____

Business Description: _____

Nature of Association: _____

☐ Filer ☐ Spouse ☐ Both

Amount of Interest: _____ %

Name of Business: _____

Address: _____

City, State, Zip: _____

Business Description: _____

Nature of Association: _____

☐ Filer ☐ Spouse ☐ Both

Amount of Interest: _____ %

Name of Business: _____

Address: _____

City, State, Zip: _____

Business Description: _____

Nature of Association: _____

* You are required to complete SCHEDULE B if you or your spouse is a director, officer, stockholder, owner, partner, member, or trustee of a business OR if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

* "Business" means any corporation, partnership, limited liability company, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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Name of Organization: _____

Address: _____

City, State, Zip: _____

Nature of Association: _____

Description of Organization: _____

☐ Filer ☐ Spouse

Name of Organization: _____

Address: _____

City, State, Zip: _____

Nature of Association: _____

Description of Organization: _____

☐ Filer ☐ Spouse

Name of Organization: _____

Address: _____

City, State, Zip: _____

Nature of Association: _____

Description of Organization: _____

☐ Filer ☐ Spouse

Name of Organization: _____

Address: _____

City, State, Zip: _____

Nature of Association: _____

Description of Organization: _____

*** You are required to complete SCHEDULE C if you or your spouse is a director or officer of a nonprofit organization.**

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(Positions that would require the filing of a Tier 2, Tier 2.1, or Tier 3 Personal Financial Disclosure Statement)

☐ Check if not applicableName of Office/Position: Post Employment Benefits Trust Fund Board of TrusteesName of Office/Position: State Bond CommissionName of Office/Position: Tobacco Settlement Financing CorporationName of Office/Position: Interim Emergency BoardName of Office/Position: Louisiana Asset Management PoolName of Office/Position: Cash Management Review BoardName of Office/Position: Louisiana Tax Free Shopping CommissionName of Office/Position: Louisiana Tuition Trust Authority

*** You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2, 42:1124.2.1, or 42:1124.3.**

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(Positions that would require the filing of a Tier 2, Tier 2.1, or Tier 3 Personal Financial Disclosure Statement)

☐ Check if not applicableName of Office/Position: Louisiana Lottery CorporationName of Office/Position: Louisiana Education Quality Trust Fund Investment Advisory PanelName of Office/Position: Louisiana Housing and Development Task ForceName of Office/Position: Louisiana Economic Development Council Cabinet Advisory GroupName of Office/Position: Municipal Police Employees Retirement SystemName of Office/Position: Louisiana Utility Restoration CorporationName of Office/Position: Fiscal Review CommitteeName of Office/Position: National Association of State Treasurers (NAST)

*** You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2, 42:1124.2.1, or 42:1124.3.**

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(Positions that would require the filing of a Tier 2, Tier 2.1, or Tier 3 Personal Financial Disclosure Statement)

☐ Check if not applicableName of Office/Position: National Association of State Auditors, Comptrollers and TreasurersName of Office/Position: National Association of Unclaimed Property AdministrationName of Office/Position: Commission to Streamlining GovernmentName of Office/Position: Louisiana Coastal Protection and Restoration Financing CorporationName of Office/Position: Second Injury BoardName of Office/Position: Louisiana Citizens' Property Insurance CorporationName of Office/Position: Louisiana Auto Theft and Insurance Fraud Prevention AuthorityName of Office/Position: Louisiana Housing Corporation

*** You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2, 42:1124.2.1, or 42:1124.3.**

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(Positions that would require the filing of a Tier 2, Tier 2.1, or Tier 3 Personal Financial Disclosure Statement)

☐ Check if not applicableName of Office/Position: JumpStart Coalition for Financial LiteracyName of Office/Position: First Stop Shop Coordinating CouncilName of Office/Position: Old State Capitol Advisory BoardName of Office/Position: Information Technology Advisory BoardName of Office/Position: Louisiana Firefighters Retirement SystemName of Office/Position: Louisiana School Employees Retirement SystemName of Office/Position: Louisiana State Employees Retirement SystemName of Office/Position: Teachers Retirement System of Louisiana

*** You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2, 42:1124.2.1, or 42:1124.3.**

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(Positions that would require the filing of a Tier 2, Tier 2.1, or Tier 3 Personal Financial Disclosure Statement)

☐ Check if not applicableName of Office/Position: Registrar of Voters Employee Retirement SystemName of Office/Position: Public Retirement Systems Actuarial CommitteeName of Office/Position: Louisiana Public Employees Deferred Compensation Plan CommissionName of Office/Position: Deputy Sheriffs Supplemental Pay BoardName of Office/Position: Louisiana Military Family Assistance BoardName of Office/Position: Municipal Employees Retired System Board of Trustees

Name of Office/Position: _____

Name of Office/Position: _____

*** You are required to complete SCHEDULE D if you hold any other office or position which would require you to file a personal financial disclosure statement under La. R.S. 42:1124.2, 42:1124.2.1, or 42:1124.3.**

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(where the value of the interest in the parcel exceeds \$2,000)

☐ Check if not applicable

Address or Location of Property: ☒ Filer ☐ Spouse ☐ Both	
State: <u>Louisiana</u> Parish/County: <u>East Baton Rouge</u>	
Address: <u>2045 N. 3rd St., Baton Rouge, LA 70802</u>	
Description of Property: Residential Rentals, Condos	
Value of the Interest in the Parcel by Category:	
☐ Category I (less than \$5,000)	☐ Category II (\$5,000-\$24,999)
☒ Category IV (\$50,000-\$99,999)	☐ Category V (\$100,000-\$199,999)
☐ Category III (\$25,000-\$49,999)	
☐ Category VI (\$200,000 or more)	

Address or Location of Property: ☒ Filer ☐ Spouse ☐ Both	
State: <u>Louisiana</u> Parish/County: <u>Tangipahoa</u>	
Address: <u>Morrison, Hammond, 70403</u>	
Description of Property: Residential/Commercial Land, 10 Acres	
Value of the Interest in the Parcel by Category:	
☐ Category I (less than \$5,000)	☐ Category II (\$5,000-\$24,999)
☐ Category IV (\$50,000-\$99,999)	☐ Category V (\$100,000-\$199,999)
☐ Category III (\$25,000-\$49,999)	
☒ Category VI (\$200,000 or more)	

Address or Location of Property: ☐ Filer ☐ Spouse ☒ Both	
State: <u>Louisiana</u> Parish/County: <u>Washington</u>	
Address: <u>Sandstone, Franklinton, LA 70538</u>	
Description of Property: Residential Lots	
Value of the Interest in the Parcel by Category:	
☐ Category I (less than \$5,000)	☐ Category II (\$5,000-\$24,999)
☐ Category IV (\$50,000-\$99,999)	☒ Category V (\$100,000-\$199,999)
☐ Category III (\$25,000-\$49,999)	
☐ Category VI (\$200,000 or more)	

Address or Location of Property: ☒ Filer ☐ Spouse ☐ Both	
State: <u>Louisiana</u> Parish/County: <u>Baton Rouge</u>	
Address: <u>927 N. 7th Street, Baton Rouge, LA 70802</u>	
Description of Property: Residential Rental	
Value of the Interest in the Parcel by Category:	
☐ Category I (less than \$5,000)	☐ Category II (\$5,000-\$24,999)
☐ Category IV (\$50,000-\$99,999)	☐ Category V (\$100,000-\$199,999)
☐ Category III (\$25,000-\$49,999)	
☒ Category VI (\$200,000 or more)	

*** You are required to disclose the address, if any, and if no address, the location by state, and parish/county.**

*** Fair market value and use value are determined by the assessor for purposes of ad valorem taxes.**

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Address or Location of Property: ☐ Filer ☐ Spouse ☒ Both	
State: <u>Louisiana</u> Parish/County: <u>St. Tammany</u>	
Address: <u>560 Bocage Ct., Covington, LA 70433</u>	
Description of Property: <u>Vacant Residential Lot</u>	
Value of the Interest in the Parcel by Category:	
☐ Category I (less than \$5,000)	☐ Category II (\$5,000-\$24,999)
☐ Category IV (\$50,000-\$99,999)	☐ Category V (\$100,000-\$199,999)
☐ Category III (\$25,000-\$49,999)	
☒ Category VI (\$200,000 or more)	

Address or Location of Property: ☐ Filer ☐ Spouse ☒ Both	
State: <u>Louisiana</u> Parish/County: <u>Washington</u>	
Address: <u>52786 Shore Dr., Franklinton, LA 70438</u>	
Description of Property: <u>Residential - Rental</u>	
Value of the Interest in the Parcel by Category:	
☐ Category I (less than \$5,000)	☐ Category II (\$5,000-\$24,999)
☐ Category IV (\$50,000-\$99,999)	☐ Category V (\$100,000-\$199,999)
☐ Category III (\$25,000-\$49,999)	
☒ Category VI (\$200,000 or more)	

Address or Location of Property: ☐ Filer ☐ Spouse ☐ Both	
State: _____ Parish/County: _____	
Address: _____	
Description of Property: _____	
Value of the Interest in the Parcel by Category:	
☐ Category I (less than \$5,000)	☐ Category II (\$5,000-\$24,999)
☐ Category IV (\$50,000-\$99,999)	☐ Category V (\$100,000-\$199,999)
☐ Category III (\$25,000-\$49,999)	
☐ Category VI (\$200,000 or more)	

Address or Location of Property: ☐ Filer ☐ Spouse ☐ Both	
State: _____ Parish/County: _____	
Address: _____	
Description of Property: _____	
Value of the Interest in the Parcel by Category:	
☐ Category I (less than \$5,000)	☐ Category II (\$5,000-\$24,999)
☐ Category IV (\$50,000-\$99,999)	☐ Category V (\$100,000-\$199,999)
☐ Category III (\$25,000-\$49,999)	
☐ Category VI (\$200,000 or more)	

*** You are required to disclose the address, if any, and if no address, the location by state, and parish/county.**

*** Fair market value and use value are determined by the assessor for purposes of ad valorem taxes.**

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Schedule F: Filer/Spouse Income from the State, Political Subdivisions, and/or Gaming Interests

☐ Check if not applicable☒ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)Type of Income: ☒ State ☐ Political Subdivision ☐ Gaming InterestName of Business (if applicable): Louisiana State TreasurerName of Income Source: State of LouisianaAddress: 900 North 3rd Street / State CapitolCity, State, Zip: Baton Rouge, LA, 70801Amount of Income (exact dollar amount): \$ 116,129.26☐ Filer ☒ Spouse ☐ Business (where amount of interest exceeds 10%)Type of Income: ☒ State ☐ Political Subdivision ☐ Gaming InterestName of Business (if applicable): Teacher's Retirement System of LAName of Income Source: State of LouisianaAddress: PO Box 94123City, State, Zip: Baton Rouge, LA, 70804Amount of Income (exact dollar amount): \$ 20,052.60☐ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Business (if applicable): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

Amount of Income (exact dollar amount): \$ _____

☐ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Business (if applicable): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

Amount of Income (exact dollar amount): \$ _____

*** You are required to complete SCHEDULE F if you or your spouse received income (includes any income from public source such as employment income, retirement, etc.) from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.**

*** "Income" (for a business) means gross income less costs of goods sold, and operating expenses.**

*** "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.**

*** The definitions for (and examples of) *political subdivision*, *gaming interest*, and *business* are found in the *Instructions Section* of this form.**

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Upload: <https://eap.ethics.la.gov/FileUpload>**Schedule G: Income** (income that exceeds \$1,000 from each source)☐ Check if not applicable☐ Filer ☒ SpouseName of Source of Income: Schroder Development Group, Inc.Address: 70117 Hwy 59 / Ste. GCity, State, Zip: Abita Spring, LA, 70420Nature of Services Rendered: Rentals/Professional ServicesType of Income: K-1 DisbursementAmount of Income: ☐ Category I (less than \$5,000)☐ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☒ Category IV (\$50,000-\$99,999)☐ Category V (\$100,000-\$199,999)☐ Category VI (\$200,000 or more)☒ Filer ☐ SpouseName of Source of Income: JES Management, LLCAddress: 70117 Hwy 59 / Ste. GCity, State, Zip: Abita Spring, LA, 70420Nature of Services Rendered: Rental Properties/Professional ServicesType of Income: K-1 DisbursementAmount of Income: ☐ Category I (less than \$5,000)☐ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☐ Category IV (\$50,000-\$99,999)☒ Category V (\$100,000-\$199,999)☐ Category VI (\$200,000 or more)☐ Filer ☒ SpouseName of Source of Income: Maison de Reve Construction, LLCAddress: 135 Terrabella Blvd. / Ste. BCity, State, Zip: Covington, LA, 70433Nature of Services Rendered: Residential Contractor/ConstructionType of Income: K-1 DisbursementAmount of Income: ☒ Category I (less than \$5,000)☐ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☐ Category IV (\$50,000-\$99,999)☐ Category V (\$100,000-\$199,999)☐ Category VI (\$200,000 or more)☒ Filer ☐ SpouseName of Source of Income: Deep South Development IIAddress: 70117 Hwy 59 / Ste. GCity, State, Zip: Abita Spring, LA, 70420Nature of Services Rendered: Real Estate ConsultingType of Income: K-1 DistributionAmount of Income: ☐ Category I (less than \$5,000)☐ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☐ Category IV (\$50,000-\$99,999)☒ Category V (\$100,000-\$199,999)☐ Category VI (\$200,000 or more)

* You are required to complete SCHEDULE G if you or your spouse received income in excess of \$1,000 from each source of income.

* "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

* You are not required to disclose income derived from disability payments from any source; or child support or alimony payments contained in a court order.

* Income that is reported on SCHEDULE F does not have to be restated on SCHEDULE G.

* If the income is derived from professional or consulting services and the disclosure of the source's name or address is prohibited by law or professional code, such income should be disclosed on SCHEDULE H.

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Upload: <https://eap.ethics.la.gov/FileUpload>**Schedule G: Income** (income that exceeds \$1,000 from each source)☐ Check if not applicable☒ Filer ☐ SpouseName of Source of Income: Abita Maytag LaudromatAddress: 70117 Hwy 59 / Ste. HCity, State, Zip: Abita Spring, LA, 70420Nature of Services Rendered: ServiceType of Income: K-1 DistributionAmount of Income: ☐ Category I (less than \$5,000)☒ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☐ Category IV (\$50,000-\$99,999)☐ Category V (\$100,000-\$199,999)☐ Category VI (\$200,000 or more)☐ Filer ☒ SpouseName of Source of Income: MPIRE Properties, LLCAddress: 909 Poydras St.City, State, Zip: New Orleans, LA, 70112Nature of Services Rendered: InvestmentType of Income: InvestmentAmount of Income: ☐ Category I (less than \$5,000)☐ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☐ Category IV (\$50,000-\$99,999)☐ Category V (\$100,000-\$199,999)☒ Category VI (\$200,000 or more)☐ Filer ☐ Spouse

Name of Source of Income: _____

Address: _____

City, State, Zip: _____

Nature of Services Rendered: _____

Type of Income: _____

Amount of Income: ☐ Category I (less than \$5,000)☐ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☐ Category IV (\$50,000-\$99,999)☐ Category V (\$100,000-\$199,999)☐ Category VI (\$200,000 or more)☐ Filer ☐ Spouse

Name of Source of Income: _____

Address: _____

City, State, Zip: _____

Nature of Services Rendered: _____

Type of Income: _____

Amount of Income: ☐ Category I (less than \$5,000)☐ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☐ Category IV (\$50,000-\$99,999)☐ Category V (\$100,000-\$199,999)☐ Category VI (\$200,000 or more)

* You are required to complete SCHEDULE G if you or your spouse received income in excess of \$1,000 from each source of income.

* "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

* You are not required to disclose income derived from disability payments from any source; or child support or alimony payments contained in a court order.

* Income that is reported on SCHEDULE F does not have to be restated on SCHEDULE G.

* If the income is derived from professional or consulting services and the disclosure of the source's name or address is prohibited by law or professional code, such income should be disclosed on SCHEDULE H.

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Upload: <https://eap.ethics.la.gov/FileUpload>**Schedule H: Income from Certain Professional or Consulting Services**

☒ CHECK if no income was received from professional or consulting services (including mental health, medical health, or legal services) when the disclosure of the name or address of the source of income would be prohibited by law or by a professional code.

☒ Check if not applicable

UTILITIES	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Electric		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Gas		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Telephone		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Water		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Cable Television Companies		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
TRANSPORTATION	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Intrastate Companies		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Pipeline Companies		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Oil & Gas Exploration		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Oil & Gas Production		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Oil & Gas Retailers		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
FINANCE & INSURANCE	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Banks		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Savings & Loan Assoc.		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Loan and/or Finance		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Manufacturing Firms		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Mining Companies		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Life Insurance Companies		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Casualty Insurance Comp.		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Other Insurance Companies		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both

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☒ Check if not applicable

RETAIL COMPANIES	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Beer Companies		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Wine Companies		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Liquor Companies		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Beverage Distributors		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
ASSOCIATIONS	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
	Trade		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
	Professional		☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
OTHER	INDUSTRY TYPE	# OF CLIENTS	AMOUNT OF INCOME BY CATEGORY	INCOME RECIPIENT
			☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
			☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
			☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
			☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
			☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
			☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
			☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both
			☐ I ☐ II ☐ III ☐ IV ☐ V ☐ VI	☐ Filer ☐ Spouse ☐ Both

* You are required to complete SCHEDULE H if you or your spouse received income from a professional or consulting service (including mental health, medical health, or legal services) when the disclosure of the name or address of the source of income would be prohibited by law or by a professional code.

* "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

CATEGORY RANGES:**CATEGORY I (LESS THAN \$5,000)****CATEGORY II (\$5,000-\$24,999)****CATEGORY III (\$25,000-\$49,999)****CATEGORY IV (\$50,000-\$99,999)****CATEGORY V (\$100,000-\$199,999)****CATEGORY VI (\$200,000 OR MORE)**

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Upload: <https://eap.ethics.la.gov/FileUpload>**Schedule I: Investment Holdings** (a holding that exceeds \$1,000 in value)☐ Check if not applicable

☐ Filer ☐ Spouse ☒ Both Name of Security: <u>Morgan Stanley</u> Description of Security: Common Stocks Value by Category: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999) ☐ Category III (\$25,000-\$49,999) ☐ Category IV (\$50,000-\$99,999) ☐ Category V (\$100,000-\$199,999) ☒ Category VI (\$200,000 or more)
☐ Filer ☐ Spouse ☐ Both Name of Security: _____ Description of Security: _____ Value by Category: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999) ☐ Category III (\$25,000-\$49,999) ☐ Category IV (\$50,000-\$99,999) ☐ Category V (\$100,000-\$199,999) ☐ Category VI (\$200,000 or more)
☐ Filer ☐ Spouse ☐ Both Name of Security: _____ Description of Security: _____ Value by Category: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999) ☐ Category III (\$25,000-\$49,999) ☐ Category IV (\$50,000-\$99,999) ☐ Category V (\$100,000-\$199,999) ☐ Category VI (\$200,000 or more)
☐ Filer ☐ Spouse ☐ Both Name of Security: _____ Description of Security: _____ Value by Category: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999) ☐ Category III (\$25,000-\$49,999) ☐ Category IV (\$50,000-\$99,999) ☐ Category V (\$100,000-\$199,999) ☐ Category VI (\$200,000 or more)

* You are required to complete SCHEDULE I if you or your spouse holds investment securities that have a value that exceeds \$1,000 each.

* You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, and cash/cash equivalent investments.

* You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.

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Transaction Date: _____

Description of Transaction:

Amount of Transaction:

☐ Category I (less than \$5,000)☐ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☐ Category IV (\$50,000-\$99,999)☐ Category V (\$100,000-\$199,999)☐ Category VI (\$200,000 or more)☐ Filer ☐ Spouse ☐ Both

Transaction Date: _____

Description of Transaction:

Amount of Transaction:

☐ Category I (less than \$5,000)☐ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☐ Category IV (\$50,000-\$99,999)☐ Category V (\$100,000-\$199,999)☐ Category VI (\$200,000 or more)☐ Filer ☐ Spouse ☐ Both

Transaction Date: _____

Description of Transaction:

Amount of Transaction:

☐ Category I (less than \$5,000)☐ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☐ Category IV (\$50,000-\$99,999)☐ Category V (\$100,000-\$199,999)☐ Category VI (\$200,000 or more)☐ Filer ☐ Spouse ☐ Both

Transaction Date: _____

Description of Transaction:

Amount of Transaction:

☐ Category I (less than \$5,000)☐ Category II (\$5,000-\$24,999)☐ Category III (\$25,000-\$49,999)☐ Category IV (\$50,000-\$99,999)☐ Category V (\$100,000-\$199,999)☐ Category VI (\$200,000 or more)

* You are required to complete SCHEDULE J if you or your spouse purchased or sold any immovable property, personally owned tax credit certificates, stocks, bonds, or commodities futures THAT EXCEED \$1,000 EACH, including any option to acquire or dispose of any immovable property or of any personally owned tax credit certificates, stocks, bonds, or commodities futures.

* You ARE NOT REQUIRED to report information concerning variable annuities, variable life insurance, or variable universal life insurance.

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☐ Filer ☐ Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (if applicable): _____ Nature of Liability: _____ Amount of liability: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999) ☐ Category III (\$25,000-\$49,999) ☐ Category IV (\$50,000-\$99,999) ☐ Category V (\$100,000-\$199,999) ☐ Category VI (\$200,000 or more)
☐ Filer ☐ Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (if applicable): _____ Nature of Liability: _____ Amount of liability: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999) ☐ Category III (\$25,000-\$49,999) ☐ Category IV (\$50,000-\$99,999) ☐ Category V (\$100,000-\$199,999) ☐ Category VI (\$200,000 or more)
☐ Filer ☐ Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (if applicable): _____ Nature of Liability: _____ Amount of liability: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999) ☐ Category III (\$25,000-\$49,999) ☐ Category IV (\$50,000-\$99,999) ☐ Category V (\$100,000-\$199,999) ☐ Category VI (\$200,000 or more)
☐ Filer ☐ Spouse Name of Creditor: _____ Address: _____ City, State, Zip: _____ Name of Guarantor (if applicable): _____ Nature of Liability: _____ Amount of liability: ☐ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999) ☐ Category III (\$25,000-\$49,999) ☐ Category IV (\$50,000-\$99,999) ☐ Category V (\$100,000-\$199,999) ☐ Category VI (\$200,000 or more)

* You are required to complete SCHEDULE K if you or your spouse (either individually or collectively) owes a liability that exceeds \$10,000 each.

* You are not required to disclose any loan secured by movable property, if such loan does not exceed the purchase price of the movable property which secures the loan.

* You are not required to disclose any liability, secured or unsecured, which is guaranteed by you or your spouse for a business in which you or your spouse owns any interest, provided that the liability is in the name of the business and, if the liability is a loan, that you or your spouse does not use proceeds from the loan for personal use unrelated to business.

* You are not required to disclose any loan from an immediate family member, unless such family member is a registered lobbyist, or his principal or employer is a registered lobbyist, or he employs or is a principal of a registered lobbyist, or unless such family member has a contract with the State.

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Date of Employment: _____	Salary: \$_____
Candidate's Name: _____	
Amount of Contribution or Loan: \$_____	
Date of Employment: _____	Salary: \$_____
Candidate's Name: _____	
Amount of Contribution or Loan: \$_____	
Date of Employment: _____	Salary: \$_____
Candidate's Name: _____	
Amount of Contribution or Loan: \$_____	
Date of Employment: _____	Salary: \$_____
Candidate's Name: _____	
Amount of Contribution or Loan: \$_____	
Date of Employment: _____	Salary: \$_____
Candidate's Name: _____	
Amount of Contribution or Loan: \$_____	

* You are required to complete SCHEDULE L if you are 1) directly employed by a *statewide elected official* to serve as an agency head AND you made a contribution or loan in excess of \$1,000 to the campaign of the official who employed you; and/or, 2) appointed to a state board or commission AND you made a contribution or loan in excess of \$1,000 to a campaign of the official who appointed you.

* You are only required to disclose contributions or loans made within one year of employment or appointment.

* "Candidate" means a person who seeks nomination or election to public office, except the office of president or vice president of the United States, presidential elector, delegate to a political party convention, United States senator, United States congressman, or political party office.

* "Contribution" means a gift, conveyance, payment, or deposit of money or anything of value, or the forgiveness of a loan or of a debt, made for the purpose of supporting, opposing, or otherwise influencing the nomination or election of a person to public office, whether made before or after the election.

* "Loan" means a transfer of money, property, or anything of value in exchange for obligation to repay in whole or in part, made for the purpose of supporting, opposing, or otherwise influencing the nomination for election, or election, of any person to public office.