

# Virginia Conflict of Interest and Ethics Advisory Council

## STATE AND LOCAL

### STATEMENT OF ECONOMIC INTERESTS

Issued July 2022



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#### Instructions

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State and local officers and employees required to file pursuant to §§ 2.2-3114, 2.2-3115, or 2.2-3116, or as designated by their local governing body are **REQUIRED** to complete and file the Statement of Economic Interests as a condition to assuming office, and then annually while serving as an officer or employee.

The filing deadline is February 1 for the prior calendar year. Statements may not be dated or submitted prior to January 1.

**For State Filers:** You must file this form with the Virginia Conflict of Interest and Ethics Advisory Council.

**For Local Filers:** You must file this form with the clerk of the appropriate local governing body.

You are not required to list the names of minor children on this form. Instead, you may indicate minor children by listing them as "Minor Child A, Minor Child B, etc."

The tables on Schedules A through I are to be completed **ONLY** if you answer "Yes" to any of the questions on those Schedules.

You may provide any additional comments you wish to include with this statement at the end of the form. Please note that any such comments are a part of your filing and will be available to the public. You may not add attachments as a substitute for properly filling out any part of this form.

Candidates must comply with §§ 24.2-500 through 24.2-503 and §§ 2.2-3114, 2.2-3115, and 2.2-3116 of the Code of Virginia.

**"GOVERNMENTAL AGENCY"** means each component part of the legislative, executive or judicial branches of state and local government, including each office, department, authority, post, commission, committee, and each institution or board created by law to exercise some regulatory or sovereign power or duty as distinguished from purely advisory powers or duties.

**"IMMEDIATE FAMILY"** means (i) a spouse and (ii) any other person who resides in the same household as the officer or employee and who is a dependent of the officer or employee.

**"LOBBYIST"** means:

1. An individual who is employed and receives payments, or who contracts for economic consideration, including reimbursement for reasonable travel and living expenses, for the purpose of lobbying;
2. An individual who represents an organization, association, or other group for the purpose of lobbying; or
3. A local government employee who lobbies.

**"PERSONAL FRIEND"** does not include any person that the filer knows or has reason to know is (a) a lobbyist registered pursuant to Article 3 (§ 2.2-418 et seq.) of Chapter 4 of Title 2.2, (b) a lobbyist's principal as defined in § 2.2-419, (c) for local officers and employees, a person, organization, or business who is or is seeking to become a party to a contract with the local agency of which he is an officer or an employee, or (d) for state officers and employees, a person, organization, or business who is or is seeking to become a party to a contract with the state governmental or advisory agency of which he is an officer or an employee or over which he has the authority to direct such agency's activities.

**"RELATIVE"** means, for the purposes of the definition of "gift," the donee's spouse, child, uncle, aunt, niece, nephew, or first cousin; a person to whom the donee is engaged to be married; the donee's or his spouse's parent, grandparent, grandchild, brother, sister, step-parent, step-grandparent, step-grandchild, step-brother, or step-sister; or the donee's brother's or sister's spouse or the donee's son-in-law or daughter-in-law.

**"TRUST"** If you or a member of your immediate family, separately or together, are the only beneficiaries of a trust, treat the trust's assets as if you own them directly. For purposes of this definition, "beneficiary" means a person with a vested present or future beneficial interest in a trust but does not include a person with a contingent beneficial interest in a trust.

If you or your immediate family has a proportional interest in a trust, treat that proportion of the trust's assets as if you own them directly. For example, if you and your immediate family have a one-third interest in a trust, complete your Statement as if you own one-third of each of the trust's assets.

If you or a member of your immediate family created a trust and can revoke it without the beneficiaries' consent, treat its assets as if you own them directly.

HOWEVER, if you or a member of your immediate family is the beneficiary of a trust that can be revoked without the beneficiaries' consent, do not treat the trust's assets as if you own them.

**"WIDELY ATTENDED EVENT"** means an event at which at least 25 persons have been invited to attend or there is a reasonable expectation that at least 25 persons will attend the event and the event is open to individuals (i) who are members of a public, civic, charitable, or professional organization, ((ii) who are from a particular industry or profession, or (iii) who represent persons interested in a particular issue.

State and Local Statement of Economic Interests

**SCHEDULE A  
OFFICES, DIRECTORSHIPS, AND EMPLOYMENT**

NAME: \_\_\_\_\_

**QUESTIONS:**

1. Do you or a member of your immediate family receive remuneration, benefits, or compensation for service as an officer or director of a business?  
 Yes  No   
*If yes, complete the table for each such business.*
2. Do you or a member of your immediate family receive salary or wages in excess of \$5,000 annually from any employer? DO NOT INCLUDE salary received from a state or local governmental or advisory agency.  
 Yes  No   
*If yes, complete the table for each such employer.*

**INSTRUCTIONS:**

Disclose each:

- Business of which you or a member of your immediate family is an officer or director and receives remuneration, benefits, or compensation for service as an officer or director
- Employer paying you or a member of your immediate family salary or wages in excess of \$5,000 annually

NAME OF BUSINESS OR EMPLOYER	LOCATION OF BUSINESS OR EMPLOYER (CITY OR COUNTY, AND STATE)	POSITION HELD	BY WHOM	Check whether Office or Directorship OR Employment	
				OFFICE OR DIRECTORSHIP	EMPLOYMENT
Hoop Life INC.	Alexandria, VA	Executive Director	KEVIN HARAS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<del>Hoop Life</del>				<input type="checkbox"/>	<input type="checkbox"/>
Hoop Life Foundation	Alexandria, VA	Executive Director	KEVIN HARAS	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

## State and Local Statement of Economic Interests

### SCHEDULE B PERSONAL DEBTS

NAME: \_\_\_\_\_

#### TABLES 1A, 1B, and 1C

#### INSTRUCTIONS:

Disclose personal debts, including contingent debts, owed by you to each category of creditor by checking the appropriate category listed in TABLE 1A. To calculate the amount of personal debt to disclose for each category of creditor, include all debts owed to creditors within each category, but **DO NOT INCLUDE** any debt owed to any one creditor in an amount of \$5,000 or less.

If you owe a personal debt to a business creditor that is not included in any category of creditor listed in TABLE 1A, disclose such debt in TABLE 1B. List the name of the business creditor and its principal business activity.

If you owe a personal debt to an individual creditor, disclose such debt in TABLE 1C. Identify the name of the individual creditor and his principal business or occupation.

If you owe a personal debt jointly with another person who is not a member of your immediate family, disclose only your share of the debt.

If you owe a personal debt jointly with a member of your immediate family, disclose any such debt in TABLE 1A, 1B, or 1C, as appropriate, as if you are solely liable for the total amount of the debt, and **DO NOT DISCLOSE** such debt in TABLE 2A, 2B, or 2C.

#### DO NOT REPORT:

- Any debt owed to any one creditor in an amount of \$5,000 or less
- Any debt owed to any government, including student loans held by the United States federal government
- Any loan secured by a recorded lien on property if such lien is at least equal to the value of the loan

## State and Local Statement of Economic Interests

### SCHEDULE B PERSONAL DEBTS

NAME: \_\_\_\_\_

#### TABLES 2A, 2B, and 2C

#### INSTRUCTIONS:

Disclose personal debts, including contingent debts, owed by a member of your immediate family to each category of creditor by checking the appropriate category listed in TABLE 2A. To calculate the amount of personal debt to disclose for each category of creditor, include all debts owed to creditors within each category, but **DO NOT INCLUDE** any debt owed to any one creditor in an amount of \$5,000 or less.

If a member of your immediate family owes a personal debt to a business creditor that is not included in any category of creditor listed in TABLE 2A, disclose such debt in TABLE 2B. List the name of the business creditor and its principal business activity.

If a member of your immediate family owes a personal debt to an individual creditor, disclose such debt in TABLE 2C. Identify the name of the individual creditor and his principal business or occupation.

If a member of your immediate family owes a personal debt jointly with another person not yourself who is not a member of your immediate family, disclose only his share of the debt.

If you owe a personal debt jointly with a member of your immediate family, report any such debt in TABLE 1A, 1B, or 1C, as appropriate, as if you are solely liable for the total amount of the debt, and **DO NOT DISCLOSE** such debt in TABLE 2A, 2B, or 2C.

#### DO NOT REPORT:

- Any debt owed to any one creditor in an amount of \$5,000 or less
- Any debt owed to any government, including student loans held by the United States government
- Any loan secured by a recorded lien on property if such lien is at least equal to the value of the loan

## State and Local Statement of Economic Interests

### SCHEDULE C SECURITIES

NAME: \_\_\_\_\_

QUESTION:

Do you or a member of your immediate family, separately or together, own securities valued in excess of \$5,000 invested in one business or Virginia governmental entity?

INCLUDE securities held in (i) trusts; (ii) individual retirement arrangements (IRAs); (iii) defined contribution plans, including plans established in accordance with sections 401, 403, or 457 of the Internal Revenue Code; and (iv) any other type of investment account.

INCLUDE securities not held in your name or the name of a member of your immediate family if you or a member of your immediate family retains the right to control such securities or the right to receive the income from such securities.

Yes  No

*If yes, complete the table for each such security.*

INSTRUCTIONS:

Disclose each business or Virginia governmental entity in which you or a member of your immediate family, separately or together, own securities valued in excess of \$5,000.

INCLUDE securities held in (i) trusts; (ii) individual retirement arrangements (IRAs); (iii) defined contribution plans, including plans established in accordance with sections 401, 403, or 457 of the Internal Revenue Code; and (iv) any other type of investment account.

INCLUDE securities not held in your name or the name of a member of your immediate family if you or a member of your immediate family retains the right to control such securities or the right to receive the income from such securities.

**"Securities" INCLUDES:**

- Stocks
- Bonds
- Mutual funds
- Limited partnerships
- Commodity futures contracts

**"Securities" EXCLUDES:**

- Defined benefit plans, including pension plans
- Certificates of deposit
- Money market funds
- Annuity contracts
- Insurance policies
- Securities issued by the U.S. government or other government securities not issued by the Commonwealth or its political subdivisions.

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### SCHEDULE D BUSINESS INTERESTS AND RENTAL PROPERTY

NAME: \_\_\_\_\_

QUESTIONS:

1. Do you or a member of your immediate family own, separately or together, a business that has a value in excess of \$5,000?

OR

Do you or a member of your immediate family, separately or together, have an interest in a business and the interest owned by you or a member of your immediate family has a value in excess of \$5,000? DO NOT INCLUDE any securities disclosed on Schedule C.

Yes

No

*If yes, complete Table 1.*

2. Do you or a member of your immediate family own, separately or together, a rental property that has a value in excess of \$5,000?

OR

Do you or a member of your immediate family, separately or together, have an interest in a rental property and the interest owned by you or a member of your immediate family has a value in excess of \$5,000?

Yes

No

*If yes, complete Table 2.*

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### SCHEDULE E REAL ESTATE

**NAME:** \_\_\_\_\_

**QUESTION:**  
 Do you or a member of your immediate family, separately or together, hold an interest valued at more than \$5,000 in real property? DO NOT INCLUDE your principal residence or any real estate disclosed on Schedule D. INCLUDE real estate held in trust.  
 Yes  No  *if yes, complete the table below.*

**INSTRUCTIONS:**  
 Disclose all real estate in which you or a member of your immediate family holds an interest valued at more than \$5,000. List each parcel individually. INCLUDE real estate held in trust.

**DO NOT REPORT:**

- Your principal residence
- Any real estate disclosed on Schedule D

List only the city or county, state, and country where each real estate is located. DO NOT LIST any street addresses. No addresses will be redacted from this schedule.  
 List the name or names in which the real estate is owned or recorded. If you or a member of your immediate family holds an interest in the real estate but it is owned or recorded in a name other than your name or your immediate family member's name, list that name.

TYPE OF REAL ESTATE	LOCATION OF REAL ESTATE (CITY OR COUNTY, STATE, AND COUNTRY)	NAME OR NAMES IN WHICH REAL ESTATE IS OWNED OR RECORDED



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**SCHEDULE F  
PAYMENTS FOR TALKS, MEETINGS, AND CONFERENCES**

**NAME:** \_\_\_\_\_

**INSTRUCTIONS:**

Disclose each source from which you received in your capacity as an officer or employee of your agency lodging, transportation, money, or any other thing of value with a combined value exceeding \$100 for:

- your presentation of a talk or series of talks at the same event, or participation in a meeting

OR

- your attendance at a meeting, conference, or event where your attendance at the meeting, conference, or event was designed to educate you on issues relevant to your duties as an officer or employee of your agency, or to enhance your knowledge and skills relative to your duties as an officer or employee of your agency.

SOURCE OF PAYMENT	DESCRIPTION OF EVENT	LOCATION OF EVENT (CITY OR COUNTY, STATE, AND COUNTRY)	DATE(S) OF EVENT	TOTAL VALUE	CHECK IF YOU RECEIVED A TRAVEL WAIVER FROM THE COUNCIL FOR THIS EVENT
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

**State and Local Statement of Economic Interests**

**SCHEDULE G  
GIFTS**

**NAME:** \_\_\_\_\_

**INSTRUCTIONS:**

Disclose each lobbyist, lobbyist's principal, or contractor that, during the prior calendar year, gave you or a member of your immediate family any gift or combination of gifts with a value exceeding \$50.

Identify the recipient and donor of each such gift. Disclose the exact gift or event, the date on which you accepted it, and the value of the gift. If an exemption from the \$100 gift cap established in § 2.2-3103.1 applies, mark the applicable exemption.

NAME OF RECIPIENT	NAME OF DONOR	EXACT GIFT OR EVENT	DATE ACCEPTED	VALUE	GIFT CAP EXEMPTION
					<input type="checkbox"/> Widely attended event <input type="checkbox"/> Personal friend <input type="checkbox"/> Archived gift from a foreign dignitary
					<input type="checkbox"/> Widely attended event <input type="checkbox"/> Personal friend <input type="checkbox"/> Archived gift from a foreign dignitary
					<input type="checkbox"/> Widely attended event <input type="checkbox"/> Personal friend <input type="checkbox"/> Archived gift from a foreign dignitary

**State and Local Statement of Economic Interests**

**SCHEDULE H  
PAYMENTS FOR REPRESENTATIONS AND OTHER SERVICES GENERALLY**

**NAME:** \_\_\_\_\_

**TABLE 1  
PAYMENTS FOR REPRESENTATIONS BY YOU**

**DO NOT COMPLETE this table if you are completing this disclosure statement in your capacity as an officer or employee of a local governmental or advisory agency.**

**INSTRUCTIONS:**

Disclose each business that you represented before any state governmental agency during the prior calendar year for which you received compensation in excess of \$5,000 for such representation.

For each business, list the type of business, the name of the state governmental agency before which you appeared on behalf of the business, and the purpose of the representation.

**DO NOT INCLUDE** compensation for the performance of other services unrelated to the representation before the state governmental agency when calculating the amount of compensation received from a business.

**DO NOT REPORT:**

- Any business that you represented before a court or judicial officer
- Any business where the representation consisted solely of the filing of mandatory papers and any subsequent representation regarding the mandatory papers

TYPE OF BUSINESS	NAME OF AGENCY	PURPOSE OF REPRESENTATION	AMOUNT OF COMPENSATION RECEIVED	
			\$5,001 to \$50,000	\$50,001 to \$250,000

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**SCHEDULE H  
PAYMENTS FOR REPRESENTATIONS AND OTHER SERVICES GENERALLY**

NAME: \_\_\_\_\_

**TABLE 3  
PAYMENTS FOR OTHER SERVICES GENERALLY**

**INSTRUCTIONS:**

Disclose each business operating in Virginia to which you or persons with whom you have a close financial association furnished services during the prior calendar year for which compensation was received in excess of \$5,000 for such services.

Identify the businesses, by category, for which services were furnished and the type of service rendered to such businesses. To calculate the amount of compensation to report for each business category, include compensation received from all businesses within each category.

DO NOT INCLUDE compensation reported on Table 1 or Table 2 of this schedule.

BUSINESS CATEGORY	TYPE OF SERVICE RENDERED	AMOUNT OF COMPENSATION RECEIVED		
		\$5,001 to \$50,000	\$50,001 to \$250,000	MORE THAN \$250,000
ATHLETICS	BASKETBALL SERVICES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## State and Local Statement of Economic Interests

### Additional Information

**NAME:** \_\_\_\_\_

You may provide any additional information you wish to be included with your Statement of Economic Interests on this page. Please note any information you provide on this page will become part of your Statement of Economic Interests and will be open to the public. You **MAY NOT** add attachments as a substitute for properly filling out any part of this form.