

FINANCIAL DISCLOSURE STATEMENT FOR PUBLIC EMPLOYEES

INSTRUCTIONS:

Detailed instructions for completing this form are available on the Commission's website, nj.gov/ethics/disclosure/financial/.

Public Employees must complete this form in full and file it electronically. Public officers, including members of certain State boards, commissions, authorities and public corporations, are not required to complete this form, but must complete and file form FDS17/2.

Questions should be directed to the State Ethics Commission, PO Box 082, Trenton, NJ 08625-0082, Telephone (609) 292-1892.

a. General Information

Date of Statement: May 12, 2017

Filing Year: **2017**

First Name: Chris M.I. _____

Last Name: Christie

Position Held: Governor

Department or Agency: Office of the Governor

Other compensated or uncompensated governmental positions you hold:

- b. Please list below any occupation, trade, business, profession or employment engaged in by you (other than the position identified in "a" above), your spouse/civil union partner, your domestic partner, or your dependent children.

Governor - Public Employee
Spouse - N/A

Do you hold a license issued by a State agency that entitles you to engage in a particular business, profession, trade or occupation (e.g., law, real estate, engineering, medicine, plumbing)? If yes, please so indicate:

License	License is active	License is inactive
Attorney, State of New Jersey	Active	

Do you have any personal contractual or business relationship with another officer or employee or special State officer or employee of your agency?

Yes

No

If yes, please explain.

c. State Employment - Relatives

For the purposes of this question, "relative" means your spouse/civil union partner, or your or your spouse's/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 by blood, marriage or adoption.

1. Is any relative employed in a State office or position?

Yes

No

2. If yes, name of relative(s) and employing agency.

3. Do you exercise authority, supervision or control (including personnel actions) over the individual(s) named above?

Yes

No

d. Ethics Training

1. Have you completed ethics training?

Yes

No

2. If yes, indicate nature of training:

in-person

on-line

3. If in-person, training provided by:

agency

State Ethics Commission

4. Date most recent training completed:

In-Person, December 15, 2016; On-Line, May 8, 2017

e. Assets

List all assets, both tangible and intangible, in which you, your spouse/civil union partner, your domestic partner or your dependent children hold an interest as of the date of this statement; provided, however, that when the value cannot be determined as of that date, a separate valuation date shall be specified for the particular asset. Public employees and their spouses/civil union partners or their domestic partners must indicate the value of the asset in accordance with the value classifications listed below. Assets held by dependent children must be identified but need not be valued. If asset is held jointly, the value class of the asset should be disclosed in the Public Employee box. The word "joint" should then be noted in the Spouse/Domestic Partner box. Please fill in each line; indicate not applicable with "N/A" or "None."

ASSETS (Valued at more than \$1,000)	Public Employee: Indicate Value Class	Spouse/ Civil Union Partner/ Domestic Partner: Indicate Value Class	Dependent Children: Check if Asset is Held
CASH ON HAND IN BANK	B	Joint	N/A
NOTES RECEIVABLE- Indicate Nature of Note on Item h.5 on page 4.	N/A	N/A	N/A
ACCOUNTS RECEIVABLE - Indicate Nature of Account on Item h.5 on page 4.	N/A	N/A	N/A
GOVERNMENT BONDS Itemize on Schedule A	N/A	N/A	N/A
STOCKS & CORPORATE BONDS (Include Mutual Funds) Itemize on Schedule A	N/A	N/A	N/A
INTEREST IN CONTRACTS WITH GOVERNMENT INSTRUMENTALITIES Itemize on Schedule B	N/A	N/A	N/A

ASSETS (Valued at more than \$1,000)	Public Employee: Indicate Value Class	Spouse/ Civil Union Partner/ Domestic Partner: Indicate Value Class	Dependent Children: Check if Asset is Held
NEW JERSEY REAL ESTATE INTERESTS- Itemize on Schedule C	G	Joint	N/A
REAL ESTATE INTERESTS OUTSIDE OF NEW JERSEY	N/A	N/A	N/A
TOTAL VALUE OF PENSION FUNDS (include IRA, Keogh, Annuities, State Pension, etc.)	F	F	N/A
ACCUMULATED CASH VALUE OF LIFE INSURANCE	E	E	N/A
VEHICLES	C	B	N/A
OTHER ASSETS (Itemize Below)	N/A	N/A	N/A
Chris Christie Blind Trust	F	N/A	N/A
Mary Pat Christie Blind Trust	N/A	E	N/A
AG Net Lease Realty Fund III	N/A	D	N/A

VALUE CLASS

A = greater than \$1,000 but not more than \$5,000
 B = greater than \$5,000 but not more than \$25,000
 C = greater than \$25,000 but not more than \$50,000
 D = greater than \$50,000 but not more than \$100,000
 E = greater than \$100,000 but not more than \$250,000
 F = greater than \$250,000 but not more than \$500,000
 G = greater than \$500,000

f. Are you, your spouse/civil union partner, your domestic partner or your dependent children a party to a blind trust agreement? If yes, please provide the name and address of the Trustee. Yes No

Name: P. Joseph Grasso

Address: Crescent Avenue, Sausalito, California

g. Do you, your spouse/civil union partner or your domestic partner have any interest in any closely held corporation, partnership, sole proprietorship, or similar business entity? Yes No

If yes, itemize on Schedule B.

h. Income

Public employees, their spouses/civil union partners or their domestic partners must indicate the source and the value class of their incomes. The sources of income of dependent children must be identified, but the value class of income need not be disclosed. Public employees filing before July 1 of any year must provide this information for the preceding calendar year. Public employees filing after July 1 of any year must provide this information for the 12-month period prior to filing. Income from any source totaling less than \$1,000 need not be disclosed. The following gifts need not be reported: (1) cash gifts of less than \$100 in the aggregate received from a person, (2) non-cash gifts with fair market value of less than \$200 in the aggregate received from a person, and (3) gifts of less than \$3,000 in the aggregate received from a relative. Please fill in each line; indicate not applicable with "N/A" or "None."

VALUE CLASS
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F = greater than \$250,000 but not more than \$500,000
G = greater than \$500,000

	Public Employee: Indicate Value Class	Spouse/Civil Union Partner/Domestic Partner: Indicate Value Class	Dependent Children: Check if Asset is Held
1. All compensated employment of whatever nature, including current State or other employment. Please list commencement and, if applicable, termination date. Be sure to include the name of the employer(s):			
Governor - Public Employee	E		
Spouse - Deferred Compensation from Angelo, Gordon & Co.		G	
2. All directorships and other fiduciary positions for which compensation has or will be received:			
N/A			
3. All contractual arrangements producing or expected to produce income, including but not limited to buyout agreements and severance payments:			
AG Net Lease Realty Fund III LP	N/A	A	
4. All capital gains: (Itemize on Schedule D)			
N/A			
5. All honoraria, lecture fees, gifts and other gratuities (cash or non-cash) and other miscellaneous sources of income, including but not limited to Social Security and pensions, interest, dividends, royalties, rents and accounts and notes receivable:			
Chris Christie Blind Trust (interest, dividends and royalties)	B	N/A	N/A
Mary Pat Christie Blind Trust (interest, dividends and royalties)	N/A	B	N/A
McNeil-PPC, Inc. (royalties)	C	Joint	N/A

SCHEDULE B - INTEREST IN CLOSELY HELD CORPORATIONS OR SIMILAR BUSINESS ENTITIES

If you, your spouse/civil union partner or your domestic partner has any interest in any closely held corporation, partnership, sole proprietorship, or similar business entity, please provide the requested information for each business entity. "Interest" means ANY ownership or control of ANY profits or assets of such business entity. Indicate not applicable with "N/A" or "None."

Interest held by: Public Employee Spouse / Civil Union Partner Domestic Partner

Business Name: N/A

Address: _____

City: _____ State: _____

General description of business activity of entity:

Duties and responsibilities of your State position:

GOVERNMENT INSTRUMENTALITIES:

Does entity identified above do business with any of the following? "Doing Business" means business or commercial transactions involving the sale, conveyance, or rental of any goods or services, and does not include such activities as compliance with regulatory procedures. In addition, if you indicated on page 3, Assets, that you, your spouse/civil union partner, your domestic partner, or dependent children has an interest in a contract with a government instrumentality, please check the appropriate instrumentality.

	Yes*	No
State of New Jersey	<input type="checkbox"/>	<input type="checkbox"/>
New Jersey Local Government Entity	<input type="checkbox"/>	<input type="checkbox"/>
Interstate Entity (New Jersey membership)	<input type="checkbox"/>	<input type="checkbox"/>

*If you checked "yes" for any of the above, please provide copies of the contract(s) with the governmental instrumentality(ies).

Is the purchase, sale, contract, or agreement with the government entity subject to public notice and competitive bidding? Yes No

SCHEDULE C - NEW JERSEY REAL ESTATE INTERESTS

1. List all of your real estate holdings in New Jersey and those of your spouse/civil union partner or domestic partner and dependent children. New Jersey real estate holdings must include the county, and current use of any real property in which any direct, indirect, vested or contingent interest is held by you, your spouse/civil union partner or domestic partner or dependent children, along with the names of all individuals or entities who share a direct or indirect interest therein.

Indicate not applicable with "N/A" or "None."

County	Individuals or Entities Sharing Interest	Current Use*	Acquisition Date	Held by: (check)			Indicate Value Class if Held by	
				Public Employee:	Spouse / Civil Union Partner / Domestic Partner:	Dependent Children:	Public Employee:	Spouse / Civil Union Partner / Domestic Partner:
Morris	Chris & Mary Pat Christie	Residential	9/1998	X	Joint	N/A	G	Joint

*Specify if commercial, industrial, residential, rental, farm or vacant.

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 E = greater than \$100,000 but not more than \$250,000
 F = greater than \$250,000 but not more than \$500,000
 G = greater than \$500,000

2. Do any individuals listed above as sharing a real estate interest with the public employee, spouse/civil union partner, domestic partner or dependent children of the public employee work for the same State agency as the public employee? If so, identify the individual and indicate if there is a supervisor/subordinate relationship between the public employee and the individual.

Supervisor / Subordinate Relationship? Yes No

Name:

3. List the name of any government instrumentality that is a tenant in 1. above and any government instrumentality that has before it an application, complaint or proceeding directly affecting any real property listed above.

County	Government Instrumentality Tenant	Government Instrumentality with Proceeding Pending
N/A		

ATTESTATION

I hereby certify that I have read the foregoing statement and any addendum pages attached hereto and to the best of my knowledge and belief, they are true, correct and complete. I further certify that I have not and will not transfer any asset, interest, or property for the purpose of concealing it from disclosure while retaining an equitable interest therein. I understand that I am subject to penalties for perjury.

Enter your full name:

Chris Christie

This Financial Disclosure Statement was prepared by (check one):

Public Employee

Spouse / Civil Union Partner

Domestic Partner

Other (Please identify)

Public Employee with the assistance of counsel
