



STATE ETHICS COMMISSION

2026 STATEMENT OF ECONOMIC INTEREST

For Staff Use Only
Date Received:

Contact Information

This contact information page will not be available on the Commission's website, but it is a public record.

919-814-3600

<https://ethics.nc.gov>

SEND YOUR SIGNED ORIGINAL TO:

BY MAIL:

State Ethics Commission
Post Office Box 27685
Raleigh, NC 27611

HAND DELIVERY:

State Ethics Commission
424 N. Blount Street
Raleigh, NC 27601

Please review and confirm that all questions are answered before mailing. Incomplete SEIs will not be accepted.

Filer's Name (First, Middle, Last)				
Prefix	First Name	Middle Name	Last Name	Suffix
Mailing Address (Required)				
Address		City	State	Zip
Daytime Phone Number (Required)		Alternate Phone Number		
E-Mail Address (Required)		Date of Birth (MM/DD/YYYY)		
Important notifications will be sent to the email address provided above, not by regular mail. To receive Commission notifications in a timely manner, please add SEI@ethics.nc.gov to your e-mail contacts.				
Home Address (Only required if holding, being appointed to, or seeking an elected office with a residency requirement)				
Home address not required if filing as a Judicial Officer (Justice or Judge of the General Court of Justice, District Attorney, or Clerk of Court), a candidate for that office, or if elected or appointed to that office prior to taking office.				
<input type="checkbox"/> Same as mailing address				
Address		City	State	Zip

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Date Received:

Please review carefully and confirm
that all questions are answered.
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Filer's Name (First, Middle, Last)				
Prefix	First Name	Middle Name	Last Name	Suffix
Current Employer			Job Title	
Nature or Type of Business				
Reason for Filing (Complete all that apply.)				
State Government Employee or Filing Post-Service Specify agency and position:			List complete name(s) of all State boards on Which You Are Serving or Being Considered for Appointment	
Agency:				
Position:			Who appointed You?	
Currently Serving as a Judicial Officer, or Filing Post-Service or as a Judicial Officer Appointee (Specify office):			Currently Serving as a Legislator, or Filing Post-Service or as a General Assembly Appointee (Specify House or Senate):	
Are you a 2026 candidate for the following elected offices: District, Supreme, or Superior Court, Court of Appeals, Clerk of Court, District Attorney, or General Assembly? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, please list the office and county or district if applicable:	
A. Do any immediate family members** currently reside in your household?				
<input type="checkbox"/> Yes <input type="checkbox"/> No				
***"Immediate family" includes your spouse (unless legally separated) and unemancipated minor children (under 18). It also includes members of your extended family (your and your spouse's children, grandchildren, parents, grandparents, and siblings, and the spouses of each of those persons) who reside in your household.				
If yes, list the full name of all adults and emancipated minors residing in your household.				
Only list the initials of unemancipated minors (under 18) in section 'B' below and full names on "Confidential Form" at the end of this SEI.				
Immediate Family Member	Relationship	Employer	Job Title	Nature of Business

B. List **only the initials** of all unemancipated minors residing in your household below. A minor is a child under 18 years old.

List the full name of each minor child on the Confidential Form at the end of this SEI.

Initials of Unemancipated Minors	Relationship	Employer	Job Title	Nature of Business

Property Interests

1. As of December 31, 2025, did you or any members of your immediate family:

A. have an ownership interest in North Carolina real estate (including your residence) with a market value of \$10,000 or more?

☐ Yes ☐ No

Owner of Real Estate	% Ownership Interest	Location by City	Location by County

B. lease or rent real estate or personal property **TO** or **FROM** the **State of North Carolina** with a market value of \$10,000 or more?

☐ Yes ☐ No

Name of Lessor	Name of Lessee (Renter)	If Real Estate, Location by City & County	If Personal Property, Describe

2. At any time during 2024 or 2025, did you or any members of your immediate family sell or buy personal property **TO** or **FROM** the **State of North Carolina** with a market value of \$10,000 or more?

☐ Yes ☐ No

Name of Purchaser	Name of Seller	Type of Property

Financial Interests

3. As of December 31, 2025, did you or any members of your immediate family own any of the following financial interests valued at \$10,000 or more?

A. **Stock** in a publicly owned company?

☐ Yes ☐ No

List the ***name*** of each company in which you own holdings of \$10,000 or more. Do not list the number of shares/options, or the value of your holdings.

- List all stocks held individually or in a portfolio managed by a financial services company. Listing a financial services company which manages your stock portfolio is insufficient, you must list the names of all individual stock holdings of \$10,000 or more.

Do not list ownership interests in a widely held investment fund (including mutual funds, regulated investment companies, or pension or deferred compensation plans) if:

1. neither you nor an immediate family member are able to control the fund's assets.
2. the fund is publicly traded, or its assets are widely diversified; **and**

Owner of Interest	Full Name of Company

B. **Stock options** in a company or business?

☐ Yes ☐ No

Owner of Stock Option	Full Name of Company

C. **Interests in a non-publicly owned company** or business entity. List interests in sole proprietorships, partnerships, limited partnerships, joint ventures, limited liability companies, limited liability partnerships, and closely held corporations.

☐ Yes ☐ No - If "No," proceed to question 4.

Owner of Interest	Name of Company or Business Entity

C (1). For each company or business entity identified in question 3.C. (the "primary company"), please list the names of *any other* companies or business entities in which the primary company owns securities or equity interests valued at \$10,000 or more, if known.

Non-Publicly Owned Company or Business Entity (the Primary Company listed in 3.C.)	Other Companies in which the Primary Company Owns Security or Equity Interests
<input type="checkbox"/> None or not known	

C (2). If you know that any entity listed in 3.C or 3.C(1) above has any material business dealings or business contracts with the State of North Carolina, or is regulated by the State, briefly describe that business activity.			
Name of Company or Business Entity		Description of Business Activity with the State	
<input type="checkbox"/> None or Not Known			
4. As of December 31, 2025, were you or any members of your immediate family the beneficiaries of a vested trust with a value of \$10,000 or more that you created, established, or controlled by you? ► Do not list assets held in blind trusts. Definitions for "Vested Trust" and "Blind Trust" can be found on our website: https://ethics.nc.gov/seis/sei-helpful-tips <input type="checkbox"/> Yes <input type="checkbox"/> No			
Name and Address of Trustee	Description of the Trust	Your Relationship to the Trust	
5. As of December 31, 2025, did you any members of your immediate family have liabilities of \$10,000 or more, excluding the mortgage on your primary personal residence? If yes, specify the type of debt but not the amount or the name of the creditor. Examples include credit card debts, auto, student, or personal loans, and intra-family debt. <input type="checkbox"/> Yes <input type="checkbox"/> No			
Name of Debtor		List Type of Creditor (e.g., commercial bank, credit union, individual, etc.)	
6. List each source of income (not specific monetary amounts) of more than \$5,000 received by you or any members of your immediate family during 2025. Include salary, wages, state/local government retirement income, professional fees, honoraria, interest, dividends, rental income, business income, and any other types of income required to be reported on your State <i>and/or</i> federal income tax returns. <ul style="list-style-type: none"> Attention! You must disclose salary or wages received from any governmental or private entity, including employers that you may have already listed in response to other SEI questions. Do not attach tax returns. Do not include income received from the following sources: capital gains; federal government or military retirement benefits; or Social Security retirement, survivors, or disability benefits. 			
Recipient of Income	Name of Person or Entity from Which Income Was Received	Type of Business/ Industry	Type of Income
<input type="checkbox"/> I had no reportable income over \$5,000 in 2025.			

Professional and Civic Relationships

7(a). During 2025, were you or any members of your immediate family a director, officer, governing board member, employee, independent contractor, or registered lobbyist of a **nonprofit corporation or organization** operating in North Carolina primarily for religious, charitable, scientific, literary, public health and safety, or educational purposes?

☐ Yes ☐ No - If "No," proceed to question 8.

► Do not list State boards or entities or entities created by local governments.

► Do not list organizations of which you are a mere member.

Name of Person	Position	Name of Nonprofit Corporation or Organization	Nature or Purpose of Organization

7(b). If the nonprofit corporation(s) or organization(s) listed do business with the State of North Carolina or receive State funds, briefly describe the nature of that business, if known or with due diligence could reasonably be known.

Name of Nonprofit Corporation or Organization	Describe State Business
<input type="checkbox"/> None or Not Known	

8. as of December 31 2025, were you or any members of your immediate family a director, officer, or governing board member of any society, organization, or advocacy group with an interest in matters over which your agency or board may have jurisdiction?

☐ Yes ☐ No ☐ Legislator/Judicial Officer - You are not required to complete this question if you are filing *solely* as a legislator or judicial officer, a post service filer, or a candidate or appointee to those offices. However, if you are also filing this SEI as a member of a State board or as a State employee, answer "yes" or "no" to this question. If your response is "yes," provide additional information.

► Do not list organizations of which you are only a member and do not serve in a leadership role.

Name of Person	Name of Society, Organization, or Advocacy Group	Leadership Position (Director, Officer, Board Member)

9(a). As of December 31, 2025, were you or a member of your immediate family an employee, director, partner, officer, proprietor, or member or manager of a for profit business?

Name of Person	Relationship to Filer	Name of Company	Leadership Position
<input type="checkbox"/> Yes <input type="checkbox"/> No - If "No," proceed to question 10.			

9(b). If you know that any entity listed in 9(a) above had any material business dealings or business contracts with the State of North Carolina or was regulated by the State as of December 31, 2025, briefly describe that activity.

Name of Company or Business Entity	Description of Business Activity with the State
<input type="checkbox"/> None or Not Known	

10. Are you a practicing attorney?

☐ Yes ☐ No ☐ Judicial Officer/State Attorney ☐ In House Attorney

If "Yes", check each category of legal representation in which you or the law firm with which you are affiliated has earned legal fees of more than \$10,000 during 2025.

<input type="checkbox"/> Administrative	<input type="checkbox"/> Admiralty	<input type="checkbox"/> Corporate	<input type="checkbox"/> Criminal
<input type="checkbox"/> Decedent's Estates	<input type="checkbox"/> Environmental	<input type="checkbox"/> Insurance	<input type="checkbox"/> Labor
<input type="checkbox"/> Local Government	<input type="checkbox"/> Real Property	<input type="checkbox"/> Securities	<input type="checkbox"/> Tax
<input type="checkbox"/> Tort litigation (including negligence)	<input type="checkbox"/> Utilities Regulator	<input type="checkbox"/> Other Category	

11. During 2025, were you a licensed professional (other than an attorney) or did you provide consulting services individually or as a member of a professional association for which you charged or were paid over \$10,000?

☐ Yes ☐ No

Type of Business	Nature of Services Rendered

12. Are you or your employer, or any members of your immediate family, or their employers currently:

- licensed by the State board or agency with which you are or will be associated **or**
- regulated by the State board or agency with which you are or will be associated **or**
- in a business relationship with the State board or agency with which you are or will be associated?

☐ Yes ☐ No ☐ Legislator/Judicial Officer - You are not required to complete this question if you are filing because you are a legislator or a judicial officer or as a candidate or appointee to those offices. However, if you are also filing as a member of a State board or as a State employee, please answer "yes" or "no" to this question.

If "yes," provide the following information.

Name of Person	Name of Employer (if applicable)	Type of Relationship (Licensing, Regulatory, Business)

13. Have you or a member of your immediate family been registered as a lobbyist within the 12 months preceding your filing of this SEI? ☐ Yes ☐ No

If "yes," provide the following information.

Name of Lobbyist	Lobbyist's Principal	Date of Registration	Registration Expiration Date

Other Disclosures

14. During 2025, after you were appointed, employed, or filed or were nominated as a candidate, did you

- receive any "gift(s)" exceeding \$200 per quarter from a person or group of persons acting together,
- when both you and those person(s) were outside North Carolina,
- under circumstances that would lead a reasonable person to conclude the gifts were given for lobbying?

To answer Yes, all three conditions must apply.

☐ Yes ☐ No

► Do not report gifts given by members of your extended family.

► Do not report gifts you have previously reported on the Reportable Expenditures Made By Persons Exempted form

Date Item Received	Name and Address of Donor(s)	Describe Item Received	Estimated Market Value

15. During 2025, after you were appointed or employed, or filed or were nominated as a candidate, did you

- accept a "scholarship" exceeding \$200 related to your public position from a person or group of persons acting together
- when those person(s) were outside North Carolina?

To answer Yes, both conditions must apply.

A "scholarship" is a grant-in-aid, either direct or indirect, to attend a conference, meeting, or similar event, including travel, lodging, meals, and other similar expenses.

☐ Yes ☐ No ☐ Judicial Officer - You are not required to complete this question if you are filing solely as a judicial officer or a judicial officer candidate or appointee.

- ▶ Do not report gifts you have previously reported on the Reportable Expenditure Made by Persons Exempted form
- ▶ Legislators are not required to report scholarships paid by a nonpartisan legislative organization of which the legislator or the Assembly is a member, participant, or affiliate.

Date of Scholarship	Name and Address of Donor(s)	Describe Event	Estimated Market Value

16. In 2025 were you appointed to a covered board by the current Governor or another currently serving member of the Council of State?

Council of State members include:

- ▶ Governor
- ▶ Lt. Governor
- ▶ Secretary of State
- ▶ State Auditor
- ▶ State Treasurer
- ▶ Superintendent of Public Instruction
- ▶ Attorney General
- ▶ Commissioner of Agriculture
- ▶ Commissioner of Labor
- ▶ Commissioner of Insurance

☐ Yes ☐ No

If "Yes," list contributions you made in 2025 with a cumulative total of more than \$1,000 to the political campaign of that Council of State member. Do not include contributions made by immediate family.

- ▶ "Contributions" are defined broadly in N.C.G.S. 163-278.6(6) and include "any advance, conveyance, deposit, distribution, transfer of funds, loan, payment, gift, pledge or subscription of money or anything of value whatsoever."

Date	Amount	Contributed to
<input type="checkbox"/> No contribution(s) with a cumulative total of more than \$1,000		

17. Are you a 2025 appointee or prospective appointee as:			
<p>a. the head of a principal state department (e.g., cabinet secretary) appointed by the Governor; or</p> <p>b. a North Carolina Supreme Court Justice; or a Court of Appeals, Superior, or District Court Judge; or</p> <p>c. a member of any of the following boards:</p> <ul style="list-style-type: none"> • ABC Commission • Coastal Resources Commission • State Board of Education • State Board of Elections • Division of Employment Security • Environmental Management Commission • Industrial Commission • Human Resources Commission • Rules Review Commission • Board of Transportation • Utilities Commission • Wildlife Resources Commission 		<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If "No," proceed to question 18.</p>	
<p>d. If yes, were you appointed or are you being considered for appointment to that position by a currently serving Council of State member?</p>		<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If "No," proceed to question 18.</p>	
<p>e. If yes, you must indicate whether during 2025 you engaged in any of the following activities with respect to or on behalf of the candidate or campaign committee of that Council of State member:</p>		<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>i. Collected contributions from multiple contributors, took possession of such multiple contributions, and transferred or delivered those collected contributions to the candidate or committee?</p>		<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>ii. Hosted a fundraiser at your residence or place of business?</p>		<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>iii. Volunteered for campaign-related activities, including phone banks, event assistance, mailings, canvassing, surveying, or any other activity that advances the campaign of a candidate?</p>		<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>18. Have you ever been convicted of a felony for which you have not received either: (i) a pardon; or (ii) an order of expungement?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>			
Offense	Date of Conviction	County of Conviction	State of Conviction
<p>19. Are you aware of any other information that <i>you believe</i> may assist the Ethics Commission in advising you concerning your compliance with the State Government Ethics Act?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide that information below.</p>			

Affirmation

The information provided in this Statement of Economic Interest and any attachments are true, complete, and accurate to the best of my knowledge and belief.

I have not transferred, and will not transfer, any asset, interest, or property for the purpose of concealing it from disclosure while retaining an equitable interest.

I understand that my Statement of Economic Interest and any attachments except for the Confidential Form regarding Unemancipated Children are public records.

I have read and understand the following statutes:

N.C.G.S. § 138A-26. Concealing or failing to disclose material information.

A filing person who knowingly conceals or knowingly fails to disclose information that is required to be disclosed on a statement of economic interest . . . shall be guilty of a Class 1 misdemeanor and subject to disciplinary action under G.S. 138A-45.

N.C.G.S. § 138A-27. Penalty for false information.

A filing person who provides false information on a statement of economic interest . . . knowing that the information is false is guilty of a Class H felony and shall be subject to disciplinary action under G.S. 138A-45.

I affirm under penalty of perjury that the foregoing is true and correct.

Signature

Date

Printed Name

Submit signed, original documents only. Do not fax or e-mail this form.

Confidential Form
Unemancipated Children
2026 Statement of Economic Interest

Confidential: Not a public record under N.C.G.S. § 138A-24(a)(1)

Name of Person Filing SEI _____

Agency or Board _____

Please list the full names of those children who were identified by initials on your Statement of Economic Interest.

Initials	Child’s Full Name

Signature of Person Filing Supplement

Date