# **Statement of Financial Interests for 2016**



CONTACT INFORMATION				
Last Name:	First Name and Middle initial:			
Lev	Carol R			
Work Phone Number:	Other Phone:			
(617) 557-1074	Redacted			
Work Email:	Other Email:			
carol.lev@jud.state.ma.us				
Primary Residence Address:				
Redacted				
Contact mailling address				
Redacted				
You indicated that you did have a spouse residing in your household during 2016.				
You indicated that you did have dependent child(ren) residing in your house	sehold during 2016.			

## **Candidacy and Public Service**

1. You have indicated that you are a candidate for public office. Select the office for which you are a candidate.

Filer reported none.

Original Page 1 of 16

2. Identify the position you now hold, or have held, which requires you to file a Statement of Financial Interests and provide the required information for that position. If you held more than one public position which requires you to file, identify each position.

Agency Name	Address	Position	Date	Amount of Income
Massachusetts Supreme Judicial Court (SJC)	John Adams Courthouse, 1 Pemberton Square, Boston, MA, 02108, US	Acting Executive Director	03/07/2016	\$100,001 or more

3. Other than the position(s) identified in Question 2, identify every public position you held, and every public agency to which you provided services, at any time during 2016, whether compensated or not, and whether full- or part-time.	
Filer reported none.	

4. Identify every public position your spouse and/or any dependent child(ren) residing in your household held, and every public agency to which your spouse and/or any dependent child(ren) residing in your household provided services, at any time during 2016, whether compensated or not, and whether full- or part-time.

Filer reported none.

#### **Private Employment and Leaves of Absence**

5. Identify every Business for which you worked as an employee, manager, consultant, or independent contractor at any time during 2016, whether compensated or not, and whether full- or part-time, and provide the required information for each.

Filer reported none.

6. Identify any Business from which you were on a leave of absence at any time during 2016, and provide its address.

Filer reported none.

Original Page 2 of 16

7. Identify every Business for which your spouse and/or any dependent child(ren) residing in your household worked as an employee, manager, consultant, or independent contractor at any time during 2016, whether compensated or not, and whether full- or part-time, and provide the required information for each.

<b>Business Name</b>	Self-employed	Address	Position
Fenway Sports Management	N/A	82 Brookline Avenue, Boston, MA, 02215, US	Manager
Boston College	N/A	140 Commonwealth Avenue, Chestnut Hill, MA, 02467, US	Independent Contractor
Pacific Packaging	N/A	24 Industrial Way, Wilmington, MA, 01887, US	Employee

### **Business Ownership and Transfers**

8. Identify each Business of which you were, in whole or in part, an owner, partner, or proprietor, or in which you owned more than 1% of any class of the outstanding stock or similar ownership interest, at any time during 2016, and provide the required information for each.

Filer reported none.

9. Identify each Business of which your spouse and/or any dependent child(ren) residing in your household was, in whole or in part, an owner, partner, or proprietor, or in which your spouse and/or any dependent child(ren) residing in your household owned more than 1% of any class of the outstanding stock or similar ownership interest, at any time during 2016, and provide the required information for each.

Filer reported none.

10. Identify any stock or similar ownership interest in a Business which you transferred to your spouse and/or any dependent child(ren) residing in your household during 2016, and provide the required information for each.

Filer reported none.

Original Page 3 of 16

#### Service as an Officer, Director, or Trustee

11. Identify any Business in which you served as an officer, director, or trustee, at any time during 2016, whether compensated or not, and whether full- or part-time, and provide the required information for each.

Filer reported none.

12. Identify any Business in which your spouse and/or any dependent child(ren) residing in your household served as an officer, director, or trustee, at any time during 2016, whether compensated or not, and whether full- or part-time, and provide the required information for each.

Filer reported none.

NOTE: If the Filer answered "YES" to a Question in the following section, one or more columns in the Table for that Question may be blank in the following situations: If the Filer indicated that the name of the person and/or the trust was a family member's name or address, the Filer was not required to provide that name. If the Filer indicated that an address was a family member's address, the Filer was not required to provide that address.

#### **Real Estate**

13. Identify all Real Estate in Massachusetts which you owned directly or through a Business as of December 31, 2016, and which had an assessed value greater than \$1,000, and provide the required information for each Real Estate holding.

Ownership Legend:
Filer = F
Spouse/Child(ren) = S/C
Trust = T

Property Address	Owner	Transferred?	Transferor Name	Transferor Address	Assessed Value
Redacted	F, S/C	No			\$100,001 or more

Original Page 4 of 16

and/or any dependent child(ren) residing in your household owned directly or through a Business as of December 31, 2016, and which had an assessed value greater than \$1,000, and provide the required information for each Real Estate holding.	
Filer reported none.	
15. Identify any Trust of which you were a beneficiary and which owned Real Estate in Massachusetts as of December 31, 2016, with an assessed value greater than \$1,000, and provide the required information for each such Trust and Real Estate holding.	
Beneficiary Legend: Filer = F Spouse/Child(ren) = S/C Trust = T	
Filer reported none.	
16. Other than the Real Estate identified in Question 15, identify any Trust of which your spouse and/or any dependent child(ren) residing in your household was a beneficiary and which owned Real Estate in Massachusetts as of December 31, 2016, with an assessed value greater than \$1,000, and provide the required information for each such Trust and Real Estate holding.	
Filer reported none.	
17. Identify any Real Estate in Massachusetts with an assessed value greater than \$1,000, that was transferred to another person or entity by you, or by a Trust of which you were a beneficiary, at any time during 2016, and provide the required information for each Real Estate holding.	
Ownership Legend: Filer = F Spouse/Child(ren) = S/C Trust = T	
Filer reported none.	

Original Page 5 of 16

18. Other than the Real Estate identified in Question 17, identify any Real Estate in Massachusetts with an assessed value greater than \$1,000, that was transferred to another person or entity by your spouse and/or any dependent child(ren) residing in your household, or by a Trust of which your spouse and/or any dependent child(ren) residing in your household was a beneficiary, at any time during 2016, and provide the required information for each piece of Real Estate transferred.

Ownership Legend: Filer = F Spouse/Child(ren) = S/C Trust = T

Filer reported none.

19. Identify any Real Estate in Massachusetts with an assessed value greater than \$1,000, on which, as of December 31, 2016, you, or a Trust of which you were a beneficiary, had a lien, attachment, or mortgage receivable, and provide the required information for each.

Ownership Legend: Filer = F Spouse/Child(ren) = S/C Trust = T

Real Estate Address	Owner	Assessed Value	Nature of Interest	Name of Trust
Redacted	F, S/C	\$100,001 or more	Mortgage Receivable	

20. Other than the Real Estate identified in Question 19, identify any Real Estate in Massachusetts with an assessed value greater than \$1,000, on which, as of December 31, 2016, your spouse and/or any dependent child(ren) residing in your household, or a Trust of which your spouse and/or any dependent child(ren) residing in your household, had a lien, attachment, or mortgage receivable, and provide the required information for each.

Ownership Legend:
Filer = F
Spouse/Child(ren) = S/C
Trust = T

Filer reported none.

Original Page 6 of 16

NOTE: If the Filer answered "YES" to a Question in the following section, one or more columns in the Table for that Question may be blank in the following situations: If the Filer indicated that the name of the person and/or the trust was a family member's name or address, the Filer was not required to provide that name. If the Filer indicated that an address was a family member's address, the Filer was not required to provide that address.

#### **Financial Investments**

21. Identify every bond or other security issued by the Commonwealth of Massachusetts or its political subdivisions, agencies, and authorities, which you owned directly or through a Business, as of December 31, 2016, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each such investment.

Ownership Legend: Filer = F Spouse/Child(ren) = S/C Trust = T

Filer reported none.

22. Other than the bonds or other securities identified in Question 21, identify every bond or other security issued by the Commonwealth of Massachusetts or its political subdivisions, agencies, and authorities, which your spouse and/or any dependent child(ren) residing in your household owned directly or through a Business, as of December 31, 2016, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each such investment.

Filer reported none.

23. Identify every bond or other security issued by the Commonwealth of Massachusetts or its political subdivisions, agencies, and authorities, which was owned as of December 31, 2016, by a Trust of which you were a beneficiary, whether directly or through a Business, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each such investment.

Beneficiary Legend: Filer = F Spouse/Child(ren) = S/C Trust = T

Filer reported none.

Original Page 7 of 16

24. Identify every bond or other security issued by the Commonwealth of Massachusetts or its political subdivisions, agencies, and authorities, which was owned as of December 31, 2016, by a Trust of which your spouse and/or any dependent child(ren) residing in your household was a beneficiary, whether directly or through a Business, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each such investment.

Filer reported none.



Original Page 8 of 16

25. Identify every Financial Investment that you owned directly or through a Business as of December 31, 2016, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each.

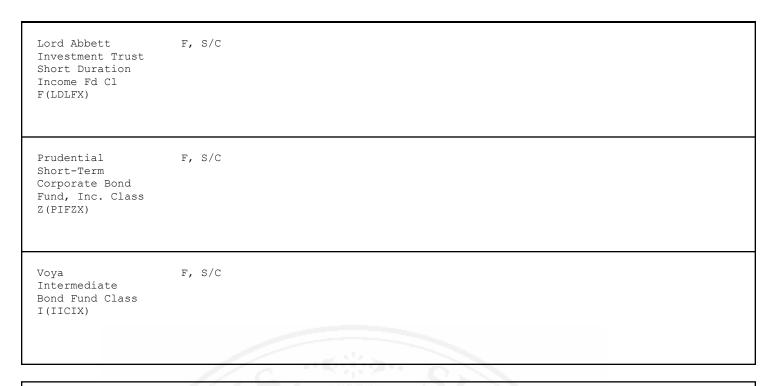
Ownership Legend: Filer = F Spouse/Child(ren) = S/C Trust = T

Name of Issuer	Owner	Description of Investment	Principal Place of Business or State of Incorporation	Address
First Trust North American Energy Infrastructure Fund (EMLP)	F, S/C			
iShares Core MSCI Emerging Markets ETF(IEMG)	F, S/C	5.0000000000000000000000000000000000000		
iShares MSCI EAFE ETF(EFA)	F, S/C			
iShares MSCI EAFE Small-Cap ETF(SCZ)	F, S/C			
iShares Russell 1000 Growth ETF(IWF)	F, S/C			
iShares Russell 1000 Value ETF(IWD)	F, S/C			

Original Page 9 of 16

iShares Russell 2000 Growth ETF(IWO)	F, S/C
iShares Russell 2000 Value ETF(IWN)	F, S/C
iShares Russell Midcap Growth ETF(IWP)	F, S/C
iShares Russell Mid-cap Value ETF(IWS)	F, S/C
WisdomTree Europe Hedged Equity Fund(HEDJ)	F, S/C
AB High Income Fund, Inc Advisor Class(AGDYX)	F, S/C
Guggenheim Limited Duration Fund- Institutional Class(GILHX)	F, S/C
John Hancock Fds II Strategic Income Opportunities Fd Class I(JIPIX)	F, S/C

Original Page 10 of 16



26. Other than the Financial Investments identified in Question 25, identify every Financial Investment that your spouse and/or any dependent child(ren) residing in your household owned directly or through a Business as of December 31, 2016, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each. For any Financial Investment not included on the drop-down list of publicly traded stock, you must provide the issuer's principal place of business or state of incorporation as well as its address.

Filer reported none.

27. Identify every Financial Investment that was owned as of December 31, 2016, by a Trust of which you were a beneficiary, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each. For any Financial Investment not included on the drop-down list of publicly traded stock, you must provide the issuer's principal place of business or state of incorporation as well as its address.

Beneficiary Legend:
Filer = F
Spouse/Child(ren) = S/C
Trust = T

Filer reported none.

Original Page 11 of 16

28. Other than the Financial Investments identified in Question 27, identify every Financial Investment that was owned as of December 31, 2016, by a Trust of which your spouse and/or any dependent child(ren) residing in your household was a beneficiary, and which had a fair market value as of that date greater than \$1,000, and provide the required information for each. For any Financial Investment not included on the drop-down list of publicly traded stock, you must provide the issuer's principal place of business or state of incorporation as well as its address.

Filer reported none.

<u>NOTE</u>: If the Filer answered "YES" to a Question in the following section, one or more columns in the Table for that Question may be blank in the following situations: If the Filer indicated that the name of the person and/or the trust was a family member's name or address, the Filer was not required to provide that name. If the Filer indicated that an address was a family member's address, the Filer was not required to provide that address.

#### **Debts and Mortgages**

29. Identify all mortgages, including home equity and reverse mortgage loans, on your Primary Residence, on which more than \$1,000 was owed as of December 31, 2016, where the creditor (person who loaned you the money) is NOT, by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required information for each.

Creditor Name	Creditor Address	Mortgage Term	Interest Rate (%)	Termination Year
EverBank	301 West Bay Street, Jacksonville, FL, 32202, US	30 years	3.75	2043
Belmont Savings Bank	2 Leonard Street, Belmont, MA, 02478, US	25 years	1.99	2038

30. Did you have a mortgage, including a home equity or reverse mortgage loan, on any property OTHER than your Primary Residence, on which more than \$1,000 was owed as of December 31, 2016, which you were obligated to pay and where the creditor (person who loaned you the money) is NOT, by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative?

Obligor Legend: Filer = F Spouse/Child(ren) = S/C Trust = T

Filer reported none.

Original Page 12 of 16

Primar of Dec obligat residir grando	entify all mortgages, including home equity and reverse mortgage loans, OTHER than any mortgage on your ary Residence or any mortgage identified in response to Question 30, on which more than \$1,000 was owed as cember 31, 2016, and which your spouse and/or any dependent child(ren) residing in your household were ated to pay and where the creditor (person who loaned the money to your spouse and/or dependent child(ren) and in your household) is NOT, by blood or marriage, your parent, grandparent, great grandparent, child, lchild, great grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and the the required information for each.	
	Filer reported none.	
whom grando	entify all non-mortgage debts of more than \$1,000 that you owed as of December 31, 2016, IF the person to a you owed the debt is NOT, by blood or marriage, your parent, grandparent, great grandparent, child, lchild, great grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and de the required information for each.	
	Filer reported none.	
20 14	and first the second state of many than \$4,000 that you are used and/or any day and and shild/orn) variding in	
your h residin child, g	entify all non-mortgage debts of more than \$1,000 that your spouse and/or any dependent child(ren) residing in nousehold owed as of December 31, 2016, IF the person to whom your spouse and/or any dependent child(ren) ng in your household owed the debt is NOT, by blood or marriage, your parent, grandparent, great grandparent, grandchild, great grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and de the required information for each.	
	Filer reported none.	
•		
2016, grand	dentify non-mortgage debts of more than \$1,000 which you owed and which were forgiven at any time during , EXCLUDING debts forgiven by a person who is, by blood or marriage, your parent, grandparent, great dparent, child, grandchild, great grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any relative, and provide the required information for each.	
	Filer reported none.	

Original Page 13 of 16

residin	35. Identify non-mortgage debts of more than \$1,000 that were owed by your spouse and/or any dependent child(ren) residing in your household and were forgiven at any time during 2016, EXCLUDING debts forgiven by a person who is, by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required information for each.				
	Filer reported none.				
D.:	hammanta Ciffe and Hammania				
Keimi	bursments, Gifts, and Honoraria				
	entify any Reimbursements for expenses in excess of \$100 provided to you at any time during 2016 by any stive agent or executive agent (lobbyist).				
	Filer reported none.				
Questi	dentify any Reimbursements for expenses in excess of \$100, other than those identified in response to ion 36, you received at any time during 2016 from any person having a direct interest in a matter before the nmental body by which you were or are now employed.				
	Filer reported none.				
L					
	entify any Reimbursements for expenses in excess of \$100 provided to your spouse and/or any dependent ren) residing in your household at any time during 2016 by any legislative agent or executive agent (lobbyist).				
	Filer reported none.				

Original Page 14 of 16

37.a Identify any Reimbursements for expenses in excess of \$100, other than those identified in response to Question 36, provided to your spouse and/or dependent child(ren) residing in your household at any time during 2016 by any person having a direct interest in a matter before the governmental body by which you were or are now employed.
Filer reported none.
38. Identify any Gifts and/or Honoraria worth more than \$100 provided to you at any time during 2016 by any person having a direct interest in a matter before a governmental body by which you were or are now employed.
Filer reported none.
39. Identify any Gifts and/or Honoraria worth more than \$100 provided to your spouse and/or any dependent child(ren) residing in your household at any time during 2016 by any person having a direct interest in a matter before the governmental body by which you were or are now employed.
Filer reported none.
NOTE: If the Filer answered "YES" to a Question in the following section, one or more columns in the Table for that Question may be blank in the following situations: If the Filer indicated that the name of the person and/or the trust was a family member's name or address, the Filer was not required to provide that name. If the Filer indicated that an address was a family member's address, the Filer was not required to provide that address.
Blind Trusts
40. Did you, your spouse and/or any dependent child(ren) residing in your household during 2016, own anything that you have not reported on this Statement of Financial Interests because it was held in a Blind Trust during 2016?
Filer reported none.

Original Page 15 of 16



I,  $Carol\ R\ Lev$ , certify under the pains and penalties of perjury that:

I made a diligent effort to obtain the required information concerning myself and my spouse and/or any dependent child(ren); and

The information provided on this form is true and complete, to the best of my knowledge.

Submitted: 04/24/2017

Did your spouse and/or any dependent child(ren) residing in your household decline to disclose information which is necessary to complete this form fully and accurately?

The following are the specific Question(s) which I decline to answer in whole or in part because I assert that the information is privileged by law:

Please explain the basis of your claim of privilege:

#### IMPORTANT:

- 1. No DESIGNATED PUBLIC EMPLOYEE shall be allowed to continue in their duties or to receive compensation from public funds unless they have filed a Statement of Financial Interests with the State Ethics Commission.
- 2. The State Ethics Commission does not accept a faxed or emailed copy of a Statement of Financial Interests for filing.
- 3. If you were required to amend your Statement of Financial Interests last year, we encourage you to carefully review your 2016 filling before submitting.

Original Page 16 of 16