Statement of Financial Interests for 2018



CONTACT INFORMATION	
Last Name:	First Name and Middle initial:
Brennan	Christopher
Work Phone Number:	Other Phone:
(617) 222-4626	
Work Email:	Other Email:
cbrennan2@mbta.com	
Primary Residence Address:	
Redacted	
Contact mailling address	
Redacted	
You indicated that you did have a spouse residing in your household durin	g 2018.
You indicated that you did have dependent child(ren) residing in your house	sehold during 2018.
	8 F 1
Candidacy and Public Service	

If you are a candidate for public office, please indicate the public office you are seeking.

Filer reported none.

Original Page 1 of 14

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
MassDOT/MBTA	10 park plaza, Boston, MA, 02116, US	Chief of Capital Support	01/14/2019	\$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 2018, 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 2018, whether compensated or not, and whether full- or part-time.

Public Agency	Public Agency Name	Address	Position	Consultant / Contractor?	Services Provided
County	Cape and Islands District Attorney Office	3231 Main Street, Barnstable, MA, 02630, US	Director of Victim/Witness	N/A	

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 2018, whether compensated or not, and whether full- or part-time, and provide the required information for each.

Business Name	Self-employed	Address	Position	Income
Walker Consultants	N/A	20 park plaza, Boston, MA, 02116, US	Manager	\$100,001 or more

6. Identify any Business from which you were on a leave of absence at any time during 2018, and provide its address.

Filer reported none.

Original Page 2 of 14

	onsultant, or independe	ent contractor at any tim	child(ren) residing in your e during 2018, whether co ach.	
		Filer reported	none.	
Business Ownership a	nd Transfers			
	ny class of the outstand		er, partner, or proprietor, on nership interest, at any tim	
usiness Name	Address	odila	Percentage of stock	Income
alker Consultants	20 park plaza, 02116, US	Boston, MA,	1%	\$60,001 to 100,000
hole or in part, an owner	r, partner, or proprietor, ore than 1% of any clas	or in which your spousess of the outstanding sto	uild(ren) residing in your h e and/or any dependent c ck or similar ownership in	hild(ren) residing in
		Filer reported none	3 .	
117		. 8 8		
	1	-	ou transferred to your spo e the required information	
	730	Filer reported no	-C'	

Original Page 3 of 14

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 2018, 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 2018, 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, 2018, 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
	70.		286	N. 7/	

Redacted F, S,

No

Original Page 4 of 14

Filer reported none.	
15. Identify any Trust of which you were a beneficiary, and which owned Real Estate in Massachusetts as of December 31, 2018, 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, 2018, 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 2018, 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 14

18. Other than the Real Estate identified in Question 17, identify any Real Estate in Mass greater than \$1,000, that was transferred to another person or entity by your spouse and residing in your household, or by a Trust of which your spouse and/or any dependent chil was a beneficiary, at any time during 2018, and provide the required information for each	or any dependent child(ren) d(ren) residing in your household
	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 \$1,00 2018, you, or a Trust of which you were a beneficiary, had a lien, attachment, or mortgage required information for each.	
	Ownership Legend: Filer = F Spouse/Child(ren) = S/C Trust = T
Filer reported none.	
20. Other than the Real Estate identified in Question 19, identify any Real Estate in Mass greater than \$1,000, on which, as of December 31, 2018, your spouse and/or any dependent household, or a Trust of which your spouse and/or any dependent child(ren) residing in y attachment, or mortgage receivable, and provide the required information for each.	dent child(ren) residing in your
	Ownership Legend: Filer = F Spouse/Child(ren) = S/C Trust = T
Filer reported none.	

Original Page 6 of 14

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, 2018, 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, 2018, 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, 2018, 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 14

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, 2018, 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.

25. Identify every Financial Investment that you owned directly or through a Business as of December 31, 2018, 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
Walker Parking Consultants	F	Common Stock	michigan	525 Avis Drive, Ann Arbor, MI, 48108, US
				, 35

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, 2018, 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.

Original Page 8 of 14

27. Identify every Financial Investment that was owned as of December 31, 2018, 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.

28. Other than the Financial Investments identified in Question 27, identify every Financial Investment that was owned as of December 31, 2018, 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, 2018, where the creditor (person who loaned you the money) is <u>not</u>, 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
Chase	PO Box 182613, Columbus, OH, 43218, US	30 year	4.25	2034

Original Page 9 of 14

Primar where grandp	O. Did you have a mortgage, including a home equity or reverse mortgage loan, on any property <u>OTHER</u> than your Primary Residence, on which more than \$1,000 was owed as of December 31, 2018, which you were obligated to pay and where the creditor (person who loaned you the money) is <u>NOT</u> , 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 elative?				
_	Obligor Legend: Filer = F Spouse/Child(ren) = S/C Trust = T				
	Filer reported none.				
Reside 31, 20 where not, by	ntify all mortgages, including home equity and reverse mortgage loans, other than any mortgage on your Primary ence or any mortgage identified in response to Question 30, on which more than \$1,000 was owed as of December 18, and which your spouse and/or any dependent child(ren) residing in your household were obligated to pay and the creditor (person who loaned the money to your spouse and/or dependent child(ren) residing in your household) is blood or marriage, your parent, grandparent, great grandparent, child, grandchild, great-grandchild, aunt, uncle, brother, niece, nephew, or the spouse of any such relative, and provide the required information for each.				
	Filer reported none.				
you ow great-g	ntify all non-mortgage debts of more than \$1,000 that you owed as of December 31, 2018, IF the person to whom red the debt is <u>not</u> , by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required ation for each.				
	Filer reported none.				
housel your ho great-g	ntify all non-mortgage debts of more than \$1,000 that your spouse and/or any dependent child(ren) residing in your nold owed as of December 31, 2018, if the person to whom your spouse and/or any dependent child(ren) residing in busehold owed the debt is <u>not</u> , by blood or marriage, your parent, grandparent, great grandparent, child, grandchild, grandchild, aunt, uncle, sister, brother, niece, nephew, or the spouse of any such relative, and provide the required ation for each.				
	Filer reported none.				

Original Page 10 of 14

34. Identify non-mortgage debts of more than \$1,000 which you owed and which were forgiven at any time during 2018, 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.	
	$\overline{}$
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 2018, 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.	
Reimbursments, Gifts, and Honoraria	
36. Identify any Reimbursements for expenses in excess of \$100 provided to you at any time during 2018 by any legislative agent or executive agent (lobbyist).	
Filer reported none.	
36.a Identify any Reimbursements for expenses in excess of \$100, other than those identified in response to Question 36, you received at any time during 2018 from any person having a direct interest in legislation, legislative action, or a matter before a governmental body.	
Filer reported none.	

Original Page 11 of 14

		ts for expenses in excess of \$100 prov ny time during 2018 by any legislative a		dent child(ren)
		Filer reported r	none.	
provided to y	our spouse and/or	nts for expenses in excess of \$100, oth dependent child(ren) residing in your h ation, legislative action, or a matter befo	nousehold at any time during 2018 by	
		Filer reported no	ne.	
		noraria worth more than \$100 provided gislative action, or a matter before a go		y person having
Name of Donoi		Person or entity for whom Donor was acting, if any	Address of Donor	Fair Market Value
/НВ	N. S.		99 High Street, Boston, MA, 02110, US	\$150
esiding in yo		noraria worth more than \$100 provided ny time during 2018 by any person havi I body.		
		Filer reported no	one.	

Original Page 12 of 14

<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.

Blind Trusts

40. Did you, your spouse and/or any dependent child(ren) residing in your household during 2018, own anything that you have not reported on this Statement of Financial Interests because it was held in a Blind Trust during 2018?

Filer reported none.



Original Page 13 of 14



I, Christopher Brennan, 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: 01/24/2020

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 2018 filling before submitting.

Original Page 14 of 14