Statement of Financial Interests for 2016



CONTACT INFORMATION	
Last Name:	First Name and Middle initial:
Leibensperger	Edward P
Work Phone Number:	Other Phone:
(617) 788-8127	Redacted
Work Email:	Other Email:
edward.leibensperger@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	g 2016.
You indicated that you had no dependent child(ren) residing in your house	hold at any time 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.

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. Address Position Date **Amount of Income** Agency Name Superior Court, Justice 02/28/2011 N/A Administrative Office Superior Court, 02/28/2011 \$100,001 or Justice Administrative more Office Superior Court, Associate 02/28/2011 \$100,001 or Administrative Justice more Office 02/28/2011 Superior Court, Associate \$100,001 or Administrative Justice more Office 3 Pemberton Square, 02/28/2011 -Suffolk County Associate \$100,001 or Superior Court Boston, MA, 02108, US 12/03/2018 Justice more 3 Pemberton Square, 02/28/2011 -Superior Court, Associate \$100,001 or Administrative Boston, MA, 02109, US Justice 12/03/2018 more Office

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.

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.

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.

Filer reported none.

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.

Business Name	Address	Percentage of stock	Income
Cobble Hill Partnership	155 Seaport Blvd., Boston, MA, 02210, US	10%	\$5,001 to 10,000

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.

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.

Question may be blank in	the following site address, the Fil	uations: If the Filer er was not required	wing section, one or more indicated that the name of to provide that name. If th provide that address.	the person and/or the tru	st was a
Real Estate					
			d directly or through a Bus and provide the required i		,
				Ownership Legen Filer = F Spouse/Child(re Trust = T	
Property Address	Owner	Transferred	Transferor Name	Transferor Address	Assessed Value
Redacted	F, S/C	No	Second and Second		\$100,001 or more
Inner Belt Road, Somerville, MA, 02145, US	F	No			\$100,001 or more
	<i>3</i> -			3571	
and/or any dependent chil	d(ren) residing i	n your household o	tify all Real Estate in Mass wned directly or through a and provide the required i	Business as of December	
Property Address	а С	Transferred?	Transferor Name	Transferor A	ddress
Redacted	Ν	Ιο			
	188	Digene V	1000000	2//	

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.

18. Other than the Real Estate identified in Question 17, identify any Real Estate in Massac value greater than \$1,000, that was transferred to another person or entity by your spouse a child(ren) residing in your household, or by a Trust of which your spouse and/or any depend your household was a beneficiary, at any time during 2016, and provide the required inform Real Estate transferred.	and/or any dependent dent child(ren) residing in
	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, December 31, 2016, you, or a Trust of which you were a beneficiary, had a lien, attachmen and provide the required information for each.	
Filer reported none.	
20. Other than the Real Estate identified in Question 19, identify any Real Estate in Massac value greater than \$1,000, on which, as of December 31, 2016, your spouse and/or any de in your household, or a Trust of which your spouse and/or any dependent child(ren) residin lien, attachment, or mortgage receivable, and provide the required information for each.	pendent child(ren) residing
	Ownership Legend: Filer = F Spouse/Child(ren) = S/C Trust = T
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.

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

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.



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 Leg Filer = F Spouse/Chilo Trust = T		
Name of Issuer	Owner	Description of Investment	Principal Place of B of Incorporation	usiness or State	Address	
iShares Core S&P Total U.S. Stock Market ETF(ITOT)	F, S/C					
SPDR S&P 500 Growth ETF (based on S&P 500 Growth Index symbolSGX) (SPYG)	F, S/C	S	SIG			
SPDR S&P China ETF(GXC)	F, S/C	*		JUM		
iShares Core MSCI Pacific ETF(IPAC)	F, S/C			REL		
iShares Core MSCI Europe ETF(IEUR)	F, S/C					
iShares Core MSCI Emerging Markets ETF(IEMG)	F, S/C					

iShares MSCI Switzerland Capped Index Fund(EWL)	F, S/C
iShares MSCI Canada Index Fund(EWC)	F, S/C
Vanguard FTSE All-Wld ex-US SmCp Idx ETF(VSS)	F, S/C
SPDR Dow Jones Industrial Average ETF(DIA)	F, S/C
Vanguard Value ETF - DNQ(VTV)	F, S/C
Vanguard Growth ETF - DNQ(VUG)	F, S/C
Vanguard Small-Cap Growth Index Fd Admiral(VSGAX)	F, S/C
PowerShares California AMT-Free Municipal Bond Portfolio(PWZ)	F, S/C

SPDR Nuveen Barclays Municipal Bond ETF(TFI)	F, S/C
SPDR Nuveen Barclays Short Term Municipal Bond ETF(SHM)	F, S/C
iShares S&P 100 ETF(OEF)	F, S/C
iShares Russell 1000 Value ETF(IWD)	F, S/C
iShares Russell 1000 Growth ETF(IWF)	F, S/C
iShares Russell Mid-cap Value ETF(IWS)	F, S/C
iShares Emerging Markets Corporate Bond ETF(CEMB)	F, S/C
iShares 10 Year Credit Bond ETF(CLY)	F, S/C

iShares 7-10 Year Treasury Bond ETF(IEF)	F, S/C				
iShares MBS ETF(MBB)	F, S/C				
iShares TIPS Bond ETF(TIP)	F, S/C				
Beaumont Capital Mgmt	F	Common Stock	МА	Ne	0 1st Ave, edham, MA, 494, US
New Frontier ETF	F	Common Stock	MA	St	5 Federal reet, Boston, , 02110, US
Jackson Nat'l Life Insurance	F	Annuity	MI	La	Corporate Way, nsing, MI, 951, US
AEI Capital Corp.	F	Real Estate	MN	St	East Seventh reet, St. ul, MN, 55101,
Resource Real Estate Opportunity REIT	F	Real Estate	РА	St Ph	45 Walnut reet, iladelphia, , 19103, US

Flexible Plan Investments	F	Mutual Fund	MI	3883 Telegraph Road, Bloomfield Hills, MI, 48302, US
Eaton Vance Core Bond Fund - Class A(EAGIX)	F			
[
spouse and/or any depe December 31, 2016, and information for each. For	ndent child(ren) rea d which had a fair n r any Financial Inve	siding in your househ narket value as of tha estment not included	25, identify every Financial Inv old owned directly or through at date greater than \$1,000, ar on the drop-down list of public incorporation as well as its add	a Business as of nd provide the required ly traded stock, you
Name of Issuer	Description of In	vestment	Principal Place of Business or State of Incorporation	Address
iShares 0-5 Year High Yield Corporate Bond ETF(SHYG)				
iShares iBoxx \$ High Yield Corporate Bond ETF(HYG)				REL
				0//
beneficiary, and which h information for each. For	ad a fair market va r any Financial Inve	lue as of that date gr estment not included	ecember 31, 2016, by a Trust of eater than \$1,000, and provide on the drop-down list of public incorporation as well as its add	e the required ly traded stock, you
		Filer reporte	ed none.	

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.

			11216	
Creditor Name	Creditor Address	Mortgage Term	Interest Rate (%)	Termination Year
RBS Citizens	One Citizens Plaza, Providence, RI, 02903, US	30	3.25	2042
Bank of America	PO Box 15025, Wilmington, DE, 19886 5025, US	10	2.53	2021

31. Identify all mortgages, including home equity and reverse mortgage loans, OTHER than any mortgage on your Primary Residence or any mortgage identified in response to Question 30, on which more than \$1,000 was owed as of December 31, 2016, and which your spouse and/or any dependent child(ren) residing in your household were obligated to pay and where the creditor (person who loaned the money to your spouse and/or dependent child(ren) residing in your household) 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.

Filer reported none.

32. Identify all non-mortgage debts of more than \$1,000 that you owed as of December 31, 2016, IF the person to whom you owed the debt 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.

Filer reported none.

33. Identify all non-mortgage debts of more than \$1,000 that your spouse and/or any dependent child(ren) residing in your household owed as of December 31, 2016, IF the person to whom your spouse and/or any dependent child(ren) residing in your household owed the debt 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.

Filer reported none.

34. Identify non-mortgage debts of more than \$1,000 which you owed and which 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.

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.

Reimbursments, Gifts, and Honoraria

36. Identify any Reimbursements for expenses in excess of \$100 provided to you at any time during 2016 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 2016 from any person having a direct interest in a matter before the governmental body by which you were or are now employed.

Filer reported none.

37. Identify any Reimbursements for expenses in excess of \$100 provided to your spouse and/or any dependent child(ren) residing in your household at any time during 2016 by any legislative agent or executive agent (lobbyist).

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.

<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 2016, own anything that you have not reported on this Statement of Financial Interests because it was held in a Blind Trust during 2016?

CERTIFICATION

I, Edward P Leibensperger, 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: 04/21/2017

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 filing before submitting.