

## INSTRUCTIONS FOR THE COMPLETION OF FORM PFD-1

### **1. Who must file the Form PFD-1? When is the form filed?**

Every candidate for the Senate or General Assembly shall file a financial disclosure statement **on or before the tenth day following the last day for filing a petition to appear on the ballot**. Candidates that are filling a vacancy must also file a PFD **on or before the tenth day** following the filing of the certificate to fill a vacancy.

\*Please note that the Office of Legislative Services also requires a personal financial disclosure form from sitting legislators every May. Questions regarding that filing should be directed to Legislative Counsel at (609) 847-3901.

### **2. What time span does Form PFD-1 cover?**

The calendar year preceding the election. For the 2023 election, the calendar year of coverage is January 1 to December 31, 2022.

### **3. What must be reported?**

- a. The source of earned income totaling more than \$1,000 in the following categories: salaries, bonuses, royalties, fees, commissions, and profit sharing. You are not required to report amounts.
- b. The source of unearned income totaling more than \$1,000 in the following categories: rents, dividends, and any other income received from named investments, trusts, and estates. You are not required to report amounts.

### **4. Whose income is reportable?**

The income of the candidate (you) as well as the income of members of your household (your spouse residing in the same domicile and any dependent children).

### **5. How is the Form PFD-1 filed with ELEC?**

The Form PFD-1 must be filed electronically. Upload the PFD-1 Form at this link:

[https://www3-elec.intmwg.state.nj.us/ELEC\\_AGAA/candidate\\_pfd.aspx](https://www3-elec.intmwg.state.nj.us/ELEC_AGAA/candidate_pfd.aspx)

**The link is also accessible on the website under the Form.**

### **6. If I am a lawyer, physician, dentist or other type of professional who performs services for a fee, must I list the name of every client or patient who has paid a fee?**

No. Individual names need not be listed. However, the name of the law firm, medical group, or professional association should be included.

### **7. What do I do if I am unclear about the reporting requirements?**

- a. Review the enclosed materials. If you have any questions, please contact the Compliance Division at (609) 292-8700 any business day between the hours of 9:00 a.m. and 5:00 p.m.
- b. Note also that you may request that the Commission provide you with an advisory opinion on a given set of facts or circumstances. If you wish to obtain an advisory opinion, please contact the staff of the Commission to obtain the Advisory Opinion Request Form or print the form from the Commission's website at [www.elec.nj.gov](http://www.elec.nj.gov).

### **Schedule I – Earned Income**

1. Review each category in the left-hand column (Salary, Bonus, Royalties, Fees, Commissions, and Profit Sharing). If you either alone or with your spouse and/or dependent children have earned, in the aggregate, more than \$1,000 in any category, check “yes.” Identify the recipient (Candidate, Spouse and/or Child).
2. Identify the source(s). Provide the address of the source. Note: only identify those sources that exceeded \$100 when identifying the source.

**NOTE: THE PFD-1 DOES NOT REQUIRE YOU TO REPORT THE ACTUAL AMOUNT RECEIVED.**

3. Income received from a public body, other than from the State of New Jersey, must be included under the category of Earned Income.

### **Schedule II – Unearned Income**

1. Follow the same general directions for Schedule I. Schedule II categories are: Rents, Dividends, and Other Income.
2. When reporting rental income, use the gross rental amount without deducting any expenses.
3. No address need be provided if a dividend is a listed security.
4. If any of the unearned income reported under these categories is received by joint owners, please report the proportionate share for you, your spouse, and/or dependent child.

### **Schedule III – Honorariums and Fees in Excess of \$100**

1. List the name and address of any payer of fees or honorariums received by you, your spouse, and/or dependent child in compensation for personal appearances, speeches, or writings totaling more than \$100 from any one source.
2. Provide a brief description of the event or occasion.

### **Schedule IV – Reimbursements in Excess of \$100**

1. List the name and address of any payer who reimbursed you, your spouse, and/or dependent child in excess of \$100 for travel, subsistence, or facilities provided in kind.
2. Describe the nature or occasion for the reimbursement.

**NOTE: DO NOT LIST REIMBURSEMENTS FROM THE STATE OF NEW JERSEY, A POLITICAL SUBDIVISION THEREOF, A PRINCIPAL EMPLOYER, OR A NON-PROFIT ORGANIZATION.**

### **Schedule V – \*Gifts Valued In Excess of \$250**

1. Report the name and address of the donor of any gift of more than \$250 in value from any one source.
2. Identify the recipient (you, your spouse, and/or dependent child).
3. Gifts between you, your spouse, or dependents are not reportable.

*\*"Gift" means any money or thing of value received other than as income, and for which a consideration of equal or greater value is not received, but does not include any political contribution reported as otherwise required by law, any loan made in the ordinary course of business, or any devise, bequest, intestate estate distribution or principal distribution of a trust or gift received from a member of a person's household or from a relative within the third degree of consanguinity of the person or his spouse, or from the spouse of that relative. "Relative" means a son, daughter, grandson, granddaughter, father, mother, grandfather, grandmother, great grandfather, great grandmother, brother, sister, nephew, niece, uncle, or aunt. Relatives by adoption, half-blood, marriage or re-marriage shall be treated as relatives of the whole kinship. "Member of household" means the spouse of a candidate for the Office of Governor or of a candidate for the Senate or General Assembly residing in the same domicile and any dependent children.*

### **Schedule VI – Certain Lands/Buildings**

1. If you, your spouse, and/or dependent child own, hold, or control an interest in any land or buildings in a city authorizing casino gambling, describe the interest and list the address of the land or building.
2. Identify the person who owns, holds, or controls the interest in the land/building (candidate, spouse, and /or dependent child).