



Form No. OEC-2016
OHIO ETHICS COMMISSION
FINANCIAL DISCLOSURE STATEMENT

16

This statement is to be filed in 2017
Financial information for calendar year 2016

Please type or print clearly. See instructions for assistance with this page.

SECTION A. PERSONAL CONTACT INFORMATION

Last Name: TAYLOR First Name: MARY MI:

SECTION B. STATUS (Check all that apply)

- Candidate
- Write-in Candidate
- Elected to an office
- Appointed to an unexpired term in elective office
- Public Official
- Public Employee
- Voluntary Filer / Other

CANDIDATES: Please list the date of the first election (primary, special, or general) when your name will appear on the ballot.

Month	Day	Year
		2017

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FILED
MAY 12 2017
OHIO ETHICS COMMISSION

SECTION C. PUBLIC POSITION, OFFICE, OR JOB

Position/Title (Example: council member, sheriff, board member, or job title): LIEUTENANT GOVERNOR Seeking Hold Held

Public Entity you serve in 2017, served in 2016, or will serve if elected: STATE OF OHIO

Public Salary: Uncompensated Less than \$16,000 \$16,000 or more

Start Date: Month 0 Day 1 Year 2011

End Date: Month 0 Day 1 Year 2019

SECTION D. ADDITIONAL PUBLIC POSITION, OFFICE, OR JOB

Position/Title (Example: council member, sheriff, board member, or job title): SUPERINTENDENT Seeking Hold Held

Public Entity you serve in 2017, served in 2016, or will serve if elected: OHIO DEPARTMENT OF INSURANCE

Public Salary: Uncompensated Less than \$16,000 \$16,000 or more

Start Date: Month 0 Day 1 Year 2011

End Date: Month 0 Day 3 Year 2017

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2017 MAY 12 P 12:02

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Walk-in Inter Office No Check
Rev'd by: *pmm*

Filer has answered every required question. Filer has not answered these questions:

Date incomplete form returned to filer: _____
Date completed form returned to OEC: _____

1. SOURCES OF INCOME - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 4)

I have no sources of income that I am required to list.

Source of Income	Service Provided	Amount* (if required)
A Lt. Governor/Superintendent, Dept. of Insurance	Lt. Governor/Superintendent, Dept. of Insurance	
B Merrill Lynch	Dividends/Interest	
C FirstMerit Bank	Interest	
D State of Ohio	Tax Refund	
E (see Addendum with list of additional sources)		

* Check instructions to see whether you are required to disclose amounts of income.

2. SOURCES OF GIFTS - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 5)

I have no sources of gifts that I am required to list.

Source of Gift	Source of Gift
A Global Ties U.S.	D Ballreich's Bros., Inc.
B PTT Global Chemical	E Bell Inc.
C Kasich for America, OHIO	F (see Addendum for list of additional gifts)

3. NAMES OF SPOUSE RESIDING IN HOUSEHOLD AND ANY DEPENDENT CHILDREN - ALL FILERS MUST ANSWER THIS QUESTION:

There are no immediate family members whose names I am required to list.

(For help, see instructions page 5)

Spouse Residing in Household
Donzell S. Taylor
Dependent Children

Dependent Children

4. NAMES OF BUSINESSES - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 5)

If you or anyone you listed in Question 3 owns or operates a business, list the name of the business.

There are no business names that I am required to list.

Business Name	Business Name
A See Addendum with list of businesses	C
B	D

5. LAND (REAL ESTATE) IN OHIO - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 6)

I have no real estate that I am required to list.

Land (Real Estate) in Ohio (List address or, if address is unavailable, plat number and county)
A 2052 South Plaza Drive, Akron, OH 44319
B
C

You are not required to disclose your personal residence or real property held primarily for personal recreation.

6. CREDITORS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 6)

I have no creditors that I am required to list.

Creditor	Creditor
A American Express	D Nordstrom - Visa
B First National Bank of Omaha	E
C JP Morgan Chase Master Card (United)	F

7. DEBTORS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 6)

I have no debtors that I am required to list.

Debtor	Debtor
A	C
B	D

8. INVESTMENTS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 6 and 7)

I have no investments that I am required to list.

Corporation, Trust, Business Trust, Partnership, or Association	Nature of Investment
A State Farm	Life Insurance
B Merrill Lynch Brokerage Account	(see Addendum with list of investments)
C Merrill Lynch IRA	(see Addendum with list of investments)
D College Advantage Plan FBO: Joseph R. Taylor	Money Market
E College Advantage Plan FBO: Michael A. Taylor	Money Market
F	
IF YOU NEED ADDITIONAL SPACE, PLEASE ATTACH A SEPARATE SHEET.	

9. OFFICES/FIDUCIARY RELATIONSHIPS - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 8)

I have no offices or fiduciary relationships that I am required to list.

Corporation, Trust, Business Trust, Partnership, or Association	Office or Nature of Relationship
A Mary Taylor Revocable Trust	Trustee
B	

SKIP QUESTIONS 10 AND 11 IF YOU ARE ONLY REQUIRED TO FILE AS A:

- College or university trustee
- Candidate for a city, township, school district, or ESC position that is paid less than \$16,000 a year
- City, township, school district, ESC, or sanitary district official or employee serving in a position that is paid less than \$16,000 a year

10. FOOD OR BEVERAGES - ALL FILERS EXCEPT THOSE LISTED IN THE BOX ABOVE MUST ANSWER THIS QUESTION:

I have no sources of meals, food, or beverages that I am required to list.

(For help, see instructions page 8)

Source of Food or Beverages	Source of Food or Beverages
A	C
B	D

11. TRAVEL EXPENSES - ALL FILERS EXCEPT THOSE LISTED IN THE BOX ON PAGE 3 MUST ANSWER THIS QUESTION:

I have no sources of travel expenses that I am required to list. (For help, see instructions page 9)

Source of Travel Expenses	Amount
A ODOT	116.95
B ODOT	417.00
C ODOT	381.12
D ODOT	189.75
E ODOT	543.85
F (see Addendum with list of additional travel)	

12. NON-DISPUTED INFORMATION - ALL state employees, state officials and state board and commission members (except college and university trustees) are REQUIRED to answer Question 12. All other filers should skip this question and go to question 13.

I have no information that I am required to list. (For help, see instructions page 9)

Non-Disputed Information
A
B

13. SIGNATURE - ALL FILERS MUST SIGN THE STATEMENT: (For help, see instructions page 10)

By signing this statement:

- I swear or affirm that this statement and any additional attachments have been prepared or carefully reviewed by me, and constitute my complete, truthful, and correct disclosure of all required information, and that the address listed on page 1 is a correct mailing address.
- I acknowledge and understand that, among other potential violations and penalties, knowingly filing a false statement is a criminal misdemeanor of the first degree, in violation of Sections 102.02(D) and 2921.13(A)(7) of the Revised Code, punishable by a fine of not more than \$1,000, imprisonment of not more than six months, or both.
- I acknowledge and understand that filing a false statement may be grounds for removal from public office or dismissal from public employment pursuant to Sections 3.04 and 124.34 of the Revised Code.
- I acknowledge that, in 2016, I served in, or in 2017, I am serving in or a candidate for, the position indicated on page 1 of this statement.

If you have any questions before signing this form, please contact the Ohio Ethics Commission at (614) 466-7090.

Before signing this statement, please review to make sure that you have answered each question you are required to answer. If you have nothing to list in response to any question, check the box indicating that you have nothing to list. If the response to any required question is omitted, the Commission will return the statement to you as incomplete. **Any person who fails to file a complete statement by the appropriate filing deadline will be assessed a late filing fee and may be subject to criminal penalty.**

Deliver completed statement to: Ohio Ethics Commission, 30 W. Spring St., L3, Columbus, OH 43215

My filing fee is: (For help, see instructions page 2)

- Enclosed (check or money order payable to "Ohio Ethics Commission")
- Submitted Online
- Included in my attorney registration fees (Judges, Magistrates, and Judicial Candidates Only)
- My public agency is required or has agreed to pay my filing fee.

YOUR SIGNATURE IS REQUIRED HERE: *Mary Taylor*

Date: 5/11/17

MARY TAYLOR
OHIO LIEUTENANT GOVERNOR

OHIO ETHICS COMMISSION
2016 FINANCIAL DISCLOSURE STATEMENT ADDENDUM

1. SOURCES OF INCOME:

Source of Income	Service Provided	Amount* (if required)
F. IRS	Tax Refund	
G. City of Green	Tax Refund	
H. City of Columbus	Tax Refund	

MARY TAYLOR
OHIO LIEUTENANT GOVERNOR

OHIO ETHICS COMMISSION
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2. SOURCES OF GIFTS:

Source of Gifts
F. JobsOhio ¹
G. Onward Ohio
H. Ohio Convention Committee 2016
I. Rhinegeist
J. Ohio Republican Party
K. Consul General of India
L. Serbian Ambassador
M. The Hunt Institute
N. Council of the Great Lakes Region
O. Champaign County Republican Party

¹ Actual or in-kind expenditures for the travel, meals or lodging of the Governor's designees pursuant to R.C. 187.03(B), provided by JobsOhio in connection with the Governor's performance of official duties related to JobsOhio.

MARY TAYLOR
OHIO LIEUTENANT GOVERNOR

OHIO ETHICS COMMISSION
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4. NAMES OF BUSINESSES:

My husband, Donzell S. Taylor, owns interests in the following entities, which "do business" as described in the example given in Question 4. Unless otherwise noted, each of these entities is in good standing under the laws of the State of Ohio or the jurisdiction in which they are required to be registered or are currently doing business. The information provided in response to Question 4 may not be considered an acknowledgment that any of these individuals "do business" other than through their ownership interest in these entities, with all of the rights (including but not limited to limited liability) afforded by applicable law.

123 S. Miller Road, L.L.C.
123 S. Miller Road, L.L.C. Irrevocable Trust for the benefit of Joseph Taylor, Don Taylor, Trustee
123 S. Miller Road, L.L.C. Irrevocable Trust for the benefit of Michael Taylor, Don Taylor, Trustee
AIM Investment Holdings, LLC
Air Three, LLC
Akron Legacy Real Estate Development, LLC
Athletic Club Construction, LLC
Cleveland Athletic Club, LLC
Cleveland Euclid Hotel Associates LLC
Cleveland-Massillon Professional Center, LLC
Eagle Ford Oil Company, Inc. (rescinded ownership 6/27/16)
Environments 4 Business, LLC
Greystone Partners, LLC
Hamilton Legacy, LLC
Historic Journal News LLC
Historic Port Clinton City Hall, LLC
Historic Robinson Schwenn, LLC
inSITE Advisory Group, LLC
IWP Bloomington, LLC
IWP New Albany, LLC
IWP New Albany Investment, LLC
IWP Rootstown, LLC
IWP Rootstown Investment, LLC
Massillon Senior Living, Ltd.

Millcraft-Welty Construction Company, LLC (entity dissolved as of 3/9/17)
MJM Holdings, Inc.
North Street, LLC
O.A.P.O., LLC
Private Jets, LLC
Ridgewood Road Properties, LLC
Strategic Thinking Technologies LLC
Settler's Point Associates, LLC
Welty/Boldt, LLC
Welty/Tri-C NEOMED, L.L.C.
Welty Building Company, LLC of North Carolina
Welty Building Company, Ltd.
Welty Construction Company, LLC (formerly known as Welty/Brae Burn Construction Company, LLC)
Welty Energy & Infrastructure, LLC (formerly known as Welty Power Services, LLC)
Welty PA, LLC
Welty Shared Services, LLC
Welty-Testa Builders, LLC
Whitestone Cleveland LLC
White Pond Investments, LLC

MARY TAYLOR
OHIO LIEUTENANT GOVERNOR

OHIO ETHICS COMMISSION
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8. INVESTMENTS OVER \$1,000:

Corporation, Etc.	Nature of Investment
Merrill Lynch Brokerage Account	Cohen & Steers Select Fund Columbia Larke Cap Fund Eaton Vanace Tax Managed Fund EQT Corp Janus Forty Fund Class C Victory RS Select Growth Fund
Merrill Lynch IRA	Bank of America Money Market American Growth Fund of America Class C American Euro Pacific Growth Fund Class C American Investment Company of America Class C Blackrock Global Allocation Fund Class C Fidelity Advisor Small Cap Value Class C Hartford Equity Income Fund Loomis Sayles Strategic Income Fund Class C Pimco Total Return Fund Class C RS Select Growth Fund Class C

MARY TAYLOR
OHIO LIEUTENANT GOVERNOR

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11. TRAVEL EXPENSES:

Source of Travel Expenses	Amount
Ohio Department of Insurance	\$344.20
Ohio Department of Insurance	\$58.10
Ohio Department of Insurance	\$582.20
Ohio Department of Insurance	\$238.26
Ohio Department of Insurance	\$201.73
Ohio Department of Insurance	\$145.45