

## **COUNTY OF ULSTER**

## ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM

RECEIVED
JUL 18 2023
ULSTER COUNTY LEGISLATURE

Aaron J. Levine NAME (Please Print)

U|STET COUNTY Legis lator, District |
POSITION and DEPARTMENT

 $\frac{\text{January 1, 2022} - \text{December 31, 2022}}{\text{CALENDAR YEAR}}$ 





## COUNTY OF ULSTER ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FORM FOR THE CALENDAR YEAR \_ 2023

Please print clearly and return to the Ulster County Legislature by May 1st Levine Last Name Ulster County Legislator, District 1 Ulster County Legislature Department/Agency in which this function reports Title/Capacity in which statement is required 244 Fair Street, County Office Building, 6TH Floor 345-340-3900

Work Address

Kingston, NY Work Telephone Number
12401 1. Real estate ownership. List the address of each piece of property within Ulster County or within one mile of the County's boundary that you, your spouse, domestic partner or dependent child own or have a financial interest in. None (Check if appropriate) Type of Interest Address of Real Estate 2. Outside employment/business. List the name of any outside employer\* from which you, your spouse, domestic partner or dependent children receive compensation for services rendered or goods sold or produced or of which you, your spouse, domestic partner or dependent children are a member of a board of directors, officer, or employee. Also include any entity in which you, your spouse, domestic partner or dependent children has an ownership interest, except a corporation with less than five percent of the outstanding stock owned. None (Check if appropriate) Name of Business/Employer Relationship to Business Family Member Extreme Pacility Services, Inc. SelF

3.	Other Income. Identify the source and nature of any other income in excess of \$1,000.00 per year from any source not described above, including employment income, teaching income, lecture fees, consultant fees, contractual income, or other income of any nature, for you, your spouse, domestic partner, or dependent children. This includes income derived from the County of Ulster if you, your spouse, domestic partner or dependent children are employees of the County during the reportable year. This, however, does not include any maintenance connected with a matrimonial action, alimony or child support payments.				
	None (Check if appropriate)				
	Name of Family Member	Name & Addre		Nature of \\ Investment	V
	SelF		unty Legislatu	re Sala	ry
5			CE Building, 67H	Flac	
		Kingston,			
4.	Relatives in Ulster County service County, whether paid or unpaid department. Relatives include brother, sister, parent, steppare latest income tax return, and the None (Check if appropriate)	d, including relative your spouse, dome nt, plus any person	e's name, relatior estic partner, child I you claimed as (	nship to you, titled, stepchild, gro a dependent o	e, and andchild,
		ationship to You	<u>Title</u>	Depart	<u>ment</u>
		American de la financia del financia del financia de la financia d	**************************************	•	· · · · · · · · · · · · · · · · · · ·
5.	Money you owe. List any debts of Ulster County or anyone that not list debts that you owe to be with Ulster County.	you are aware of	who does busine:	ss with Ulster Co	ounty. Do
	None (Check if appropriate)				
	<u>Creditor</u>	Ţy	pe of Obligation		
				•	

None (Check if appropriate)					
<u>Debtor</u>	Type of Obligation				
	e any interest you, your spouse, dom any contract involving the County of				
None (Check if appropriate)					
Name of Family Member	Contract Descript	<u>tion</u>			
	***************************************				
of the value in any business, c conds, loans, pledged collate cartner or dependent childre	scribe all investments in excess of \$5, corporation, partnership, or other ass eral, and other investments, for you, en excluding investments in publically	ets including stocks, your spouse, domestic			
of the value in any business, coonds, loans, pledged collate	corporation, partnership, or other ass eral, and other investments, for you, en excluding investments in publically	ets including stocks, your spouse, domestic			
of the value in any business, of the value in any business, of conds, loans, pledged collate partner or dependent childrest in real property.  None (Check if appropriate)  Name of Family Member	corporation, partnership, or other ass eral, and other investments, for you, en excluding investments in publically Name & Address of Business	ets including stocks, your spouse, domestic traded securities and  Description of Asset			
of the value in any business, on conds, loans, pledged collate cartner or dependent childre nterest in real property.  None (Check if appropriate)	corporation, partnership, or other asseral, and other investments, for you, en excluding investments in publically  Name & Address of Business  MML Investors	ets including stocks, your spouse, domestic y traded securities and			
of the value in any business, of the value in any business, of conds, loans, pledged collate partner or dependent childrest in real property.  None (Check if appropriate)  Name of Family Member	eral, and other investments, for you, en excluding investments in publically  Name & Address of Business  MML Investors  P.o. Box 8099	ets including stocks, your spouse, domestic y traded securities and  Description of Asset  MUTUA   Fund-IRA			
of the value in any business, of conds, loans, pledged collate partner or dependent childres in real property.  None (Check if appropriate)  Name of Family Member  SelF	corporation, partnership, or other asseral, and other investments, for you, en excluding investments in publically  Name & Address of Business  MML Investors	ets including stocks, your spouse, domestic traded securities and  Description of Asset  Mutual Fund-IRA			
of the value in any business, of conds, loans, pledged collate partner or dependent childres in real property.  None (Check if appropriate)  Name of Family Member  Seff	Name & Address of Business  MML Investors  P.O. BOX 8099  Spring Field, MA 01/02  Location of Real Estate (including home, if owned)	Description of Asset  VFIAX  Description of Investment			
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of the value in any business, conds, loans, pledged collate partner or dependent childrenterest in real property.  None (Check if appropriate)  Name of Family Member  SelF  Name of Family Member  SelF  Trusts. Identify each interest in excess of \$2,000.00, except for except for each interest in excess of \$2,000.00, except for except for each interest in excess of \$2,000.00, except for each interest in each interest in excess of \$2,000.00, except for each interest in each interest in each interest in each interest in excess of \$2,000.00, except for each interest in each interest interest in each	Name & Address of Business  MML Investors  P.O. BOX 8099  Spring Field, MA 01/02  Location of Real Estate (including home, if owned)	Description of Asset  MUTUA   FUND-IRA  Description of Investment  General Invest Act  MUTUA   FUND-FRE  All interest in any assets in erests in an estate or trust o			
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	None (Check if appropriate)		
<u>Nar</u>	me of Family Member	Name & Address of Don	<u>or</u>
	None (Check if appropriate)  me of Family Member No	ame & Address of Creditor	Type of loan & Collateral, if any
<u>Nar</u>			
<u>Nar</u>			
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## Certification:

I hereby certify under penalty of perjury, that the information disclosed on this form is true and complete to the best of my knowledge.

I hereby acknowledge my continuing responsibility to disclose any conflicts of interest or potential conflicts of interest and/or rescue myself from any act or action as required by Ulster County's Ethics Law. I certify that I will undertake and carry out this responsibility to the best of

gnature	7/18/2023 Date
satisfactory evidence to be the indivi- and acknowledged to me that he/sl	in the year 2023 before me the in and for said State, personally appeared sonally known to me or proved to me on the basis of dual whose name is subscribed to the within instrument the executed the same in his/her capacity and that by the individual, or person upon behalf of which the

The deadline for filing is May 1st. Please return the completed form to the Ulster County Legislature at 244 Fair Street, 6<sup>th</sup> floor, Kingston, NY 12401.

\* Outside employment includes the practice of law, a NYS Department of State licensed real estate broker or agent, or practice of a profession licensed by the Department of Education. If an individual practices with a firm or corporation and is a partner or shareholder of the firm or corporation, provide a general description of principal subject areas of matters undertaken by the firm or corporation. Do not list names of individual clients, customers or patients.