## RECEIVED

NORTH CAROLINA STATE ETHICS COMMISSION 2012 STATEMENT OF ECONOMIC INTEREST ETHICS COMMISSION FEB 1 5 2012

FEB 1 6 2012

(Please specify the legislative branch - House or Senate)

919-715-2071

COMPLETE THIS FORM AND MAIL SIGNED, ORIGINAL TO

www.ethicscommission.nc.gov

N.C. BOARD OF ELECTIONS

STATE ETHICS COMMISSION, 1324 MAIL SERVICE CENTER, RALEIGH, NC 27699-1324 FILER'S NAME (FIRST, MIDDLE, LAST) Suffix First Name Middle Name **Last Name** Patrick Lloyd McCrory MAILING ADDRESS, CITY, STATE, ZIP+41 State Žĺp City Address NC 28209 Charlotte 1963 Maryland Avenue HOME ADDRESS, CITY, STATE, ZIP+4 Same as Mailing Address Zip City State Address JOB TITLE CURRENT EMPLOYER Director of Strategic Initiatives Moore & Van Allen NATURE OF BUSINESS Policy Consultant, Client Development/Marketing ALTERNATE PHONE NUMBER DAYTIME PHONE NUMBER (704) 331-1042 E-MAIL ADDRESS patmccrory@mvalaw.com REASON FOR FILING (SELECT ALL THAT APPLY) STATE GOVERNMENT JOB (Please specify the agency for which you work) BOARD/COMMISSION (Please list all boards on which you are serving)

Do other immediate family members reside in your household?2

JUDICIAL OFFICER (Please specify the office you hold)

X	Yes		No
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FULL NAME	RELATIONSHIP	EMPLOYER	JOB TITLE	NATURE OF BUSINESS
Ann G. McCrory	Wife	N/A		
			!	1

Governor

This entire document and any attachments are public record.

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With the exception of judicial officers (including Justices or judges of the General Court of Justice, district attorneys, and clerks of court), persons holding or seeking an elected office with a residency requirement must provide a home address.

<sup>&</sup>lt;sup>2</sup> Immediate family includes your spouse (unless legally separated), minor children, and members of your extended family (your and your spouse's adult children, grandchildren, parents, grandparents, and siblings, and the spouses of each of those persons) that reside in your household.

<sup>3</sup> Filers may use the initials of unemancipated children instead of those children's names. If initials are used, the children's names should be provided on a (non-public) supplement form available from the Commission upon request.

1		}	
ALO AGO DI NE DISCI GELIBES			
\$10,000 PLUS DISCLOSURES	land address families have proceed on	liabilities with a market value of at	least \$10,000 in the following categorie
If you, your spouse, or members or y please provide the requested information	on as of December 31st of the preceding	g year unless another time period is	specified in the question.
▶Do not list the value of those as			
▶Do not list assets or liabilities h	eld in a blind trust <sup>4</sup> established by or fo	or the benefit of you or an <u>Immediate</u>	family member.
. Do you, your spouse, or members of y nore?	our <u>immediate</u> family have an owners	nip Interest in North Carolina real est	ate with a market value of \$10,000 or
Yes No			
Owner of Real Estate	% Ownership Interest	Location by City	Location by County
at and Ann McCrory	100%	1963 Maryland Avenue	Mecklenburg
	to mediate family losse or part to	or from the State real estate with a n	narket value of \$10,000 or more?
. Do you, your spouse, or members of y	our <u>immediate</u> family lease or rent <u>to</u>	or from the State real estate with a n	narket value of \$10,000 or more?
Yes 🗷 No			narket value of \$10,000 or more?  Location by County
	your <u>immediate</u> family lease or rent <u>to</u> Name of Lessee (Renter)	or from the State real estate with a n	
Yes 🗷 No			
Yes 🗷 No			
Yes 🗷 No			
Yes No  Name of Lessor  Name of Lessor	Name of Lessee (Renter)	Location by City	
Yes No  Name of Lessor  Within the preceding two years, have	Name of Lessee (Renter)	Location by City	Location by County
Yes No  Name of Lessor  Within the preceding two years, have harket value of \$10,000 or more?	Name of Lessae (Renter)  you, your spouse, or members of your	Location by City	Location by County
Name of Lessor  Name of Lessor  Within the preceding two years, have market value of \$10,000 or more?  Yes No	Name of Lessae (Renter)  you, your spouse, or members of your	Location by City  Location by City  Immediate family sold to or bought to	Location by County  from the State personal property with a
Yes No  Name of Lessor  . Within the preceding two years, have market value of \$10,000 or more?  Yes No	Name of Lessae (Renter)  you, your spouse, or members of your	Location by City  Location by City  Immediate family sold to or bought to	Location by County  from the State personal property with a
Yes No  Name of Lessor  . Within the preceding two years, have market value of \$10,000 or more?  Yes No	Name of Lessae (Renter)  you, your spouse, or members of your	Location by City  Location by City  Immediate family sold to or bought to	Location by County  from the State personal property with a
Yes No  Name of Lessor  . Within the preceding two years, have market value of \$10,000 or more?  Yes No	Name of Lessae (Renter)  you, your spouse, or members of your	Location by City  Location by City  Immediate family sold to or bought to	Location by County  from the State personal property with a
Name of Lessor  Name of Lessor	Name of Lessee (Renter)  you, your spouse, or members of your  Name o	Immediate family sold to or bought in the sold	Location by County  from the State personal property with a  Type of Property
Name of Lessor	Name of Lessee (Renter)  you, your spouse, or members of your  Name o	Immediate family sold to or bought in the sold	Location by County  from the State personal property with a

A "blind trust" is a trust that meets all of the following criteria: (a) the owner of the trust's assets has no knowledge of the trust's holdings and sources of income, (b) the individual or entity managing the trust's assets ("the trustee") is not a member of the covered person's extended family and is not associated with or employed by the covered person or his or her immediate family, and (c) the trustee has sole discretion to manage the trust's assets. G.S. 138A-3(1).

5(a). Do you, your spouse, or members of your <u>immediate</u> family own interests	(generally stock) valued at \$10,000 or more in a publicly owned company?
₩ Yes	
▶ Do not list ownership interests in a widely held investment fund (includ compensation plans) if (i) the fund is publicly traded or its assets are widel control the assets held in the mutual fund, investment company, or pension	Ing mutual funds, regulated investment companies, or pension or deferred y diversified and (ii) neither you nor an immediate family member are able to or deferred compensation plan.
Owner of Interest	Full Name of Company (Do not use a ticker symbol)
Patrick McCrory	Duke Energy Company
Patrick McCrory	Spectra
Patrick McCrory	Tree / Lending Tree
Patrick McCrory	Kewaunee Scientific Corporation
5(b). Do you, your spouse, or members of your <u>Immediate</u> family hold stock or	otions valued at \$10,000 or more in a company or business?
IX Yes	
Owner of Stock Option	Full Name of Company (Do not use a ticker symbol)
Patrick McCrory	Kewaunee Scientific Corporation
6(a). Do you, your spouse, or members of your <u>Immediate</u> family have financial business entity (including interests in sole proprietorships, partnerships, limited partnerships, and closely held corporations)?	il Interests valued at \$10,000 or more in a non-publicly owned company or il partnerships, Joint ventures, limited liability companies, limited liability
Yes X No	
Owner of Interest	Name of Business Entity
6(b). For each of those non-publicly owned companies or business entities iden other companies in which the primary company owns securities or equity interests.	ltifled in question 6(a) (the "primary company"), please list the names of any ests valued at over \$10,000, if known.
Non-Publicly Owned Company (the Primary Company)	Other Companies in which the Primary Company Owns Security or Equity Interests
None or Not Known	

6(c). If you know that any company is regulated by the State, provide a	or business entity li brief description of t	sted in 6(a) or (b) ab hat business activity	ove has any material business deal	ings or business contracts with the State, or
Name of Compa	ny or Business Ent	tity	Description of Bu	usiness Activity with the State
None or Not Known				
		·		
7. Are you, your spouse, or member or controlled by you?	rs of your <u>immediate</u>	family the beneficiar	les of a vested trust with a value of	f \$10,000 or more that is created, established,
Yes X No				
▶ Do not list blind trusts <sup>4</sup> .				
Name and Address of Tr	ustee	Descriptio	n of the Trust	Your Relationship to the Trust
	<del>_</del>	<del></del>		
8. Do you, your spouse, or member personal residence? Examples included Yes No.	s of your <u>immediate</u> de credit card debts,	family have a llability auto loans, and studi	y (debt) of \$10,000 or more, <u>exclu</u> ent loans.	ding Indebtedness (mortgage) on your primary
Name of Debtor (You, Spo	use, Immediate Fa	mily Member)	Type of Creditor (Commer	cial Bank, Credit Union, Individual, etc.)
		<del>-</del>		
II. OTHER DISCLOSURES				
9(a). During the preceding calend employee, independent contractor, scientific, literary, public health and	or registered loopy	ist of a nonprofit corp	mbers of your <u>immediate</u> family poration or organization operating	a director, officer, governing board member, in the State primarily for religious, charitable,
X Yes No				
<ul> <li>▶ Do not list State boards or entitle</li> <li>▶ Do not list organizations of which</li> </ul>	es, or entitles create 1 you are a mere me	d by a political subdiv mber or subscriber.	ision of the State.	
Name of Person	His/I	lar Position	Name of Nonprofit Corporation or Organizat	Nature of Business or ion Purpose of Organization
Patrick McCrory	Trustee		Catawba College	Member
Patrick McCrory	Board Memb	er	NC USO	Member
	-			
	1		·	

9(b). If the listed nonprofit corporation that business, if known, or with which	ns or organizations do business v due diligence could reasonably be	with the	State or receive State funds, p	lease prov	vide a brief description of the nature of
Name of Nonprofit Corp	oration or Organization		Describe Sta	te Busin	ess or State Funding
None or Not Known			-		
			-		
				<del></del>	<del></del>
10. List all sources of income (not sp preceding calendar year. Include sa income, and business income.	ecific amounts) of more than \$5 alary, wages, state/local gov	<u>,000</u> red <b>ernme</b> n	ceived by you, your spouse, o it ratirement, professional	r member fees, ho	s of your <u>immediate</u> family during the noraria, interest, dividends, rental
Do <u>not</u> include income received from the	he following sources:				
➤ Capital gains	<ul> <li>► Federal governme</li> <li>► Social security inc</li> </ul>				
▶ Military retirement	Name of Source		Type of Business/In	dustry	Type of Income
Recipient of Income  I had no reportable income over \$	<u> </u>	year.		<u> </u>	
	Moore & Van Allen PLLC		Law Firm	_	Salary
Pat McCrory Pat McCrory	McCrory & Company		Sales Training	<del></del>	Consultant Fee
Pat McCrory	Tulsa Council of Govern	West -	Non-Profit		Honorarium
Pat McCrory	401K/Cash Balance		Stocks/Bonds		Investments/Dividends
Continued on Attached Sheet					
OSTRITUGE OF TREASURE OF THE STREET					
11. Are you a practicing attorney?					
Yes X No Judicial Office	er/State Attorney				
If "Yes", check each category of legal during the preceding calendar year.	l representation in which you or	the law	firm with which you are asso-	clated has	s earned legal fees of \$10,000 or more
Administrative	Admiralty		Corporate	·	Criminal
Decedent's Estates	Environmental		Insurance		Labor
Local Government	Real Property		Securities		Тах
Tort litigation (Including negligence)			Other category not listed or preceding calendar year	did not ea	rn legal fees of \$10,000 or more during the
12. Are you (1) a licensed profession and (2) did you charge or	onal (other than an attorney) of were you paid over \$10,000 for	or do yo	u provide consulting services rvices during the preceding ca	Individua lendar ye	ally or as a member of a professional ar?
X Yes No					·.
Type of Business			Nature of	Services	Rendered
Engineering Software		tarketi	ng		
Financial Management	N	/arketi	ng		
Media Company	C	comme	ntator		

Continued from page 5 of Pat McCrory's 2012 Statement of Economic Interest:

10. List all sources of income (not specific amounts) of <u>more than \$5,000</u> received by you, your spouse, or members of your <u>immediate</u> family during the preceding calendar year. <u>Include salary, wages, state/local government retirement, professional fees, honoria, interest, dividends, rental income, and business income.</u>

Recipient of Income	Name of Source	Type of Business/Industry	Type of Income
Pat McCrory	Lending Tree	Lending/Mortgage	Director's Fees/Stock
Pat McCrory	Kewaunee	Manufacturing	Director's Fees
Pat McCrory	Bentley Systems	Engineering Software	Consultant Fees
Pat McCrory	Public Financial Management	Finance Management	Consultant Fees
Pat McCrory	Belo Corp.	Media Company	Consultant Fees
Pat McCrory	YMCA	Non-Profit	Honorarium

13. Are you or your employer, your sp  Licensed by the State board or  Requiated by the State board or  Have a business relationship was	employing entity with or employing entity wi	which you are or will th which you are or wi	be associated <b>or</b>			
				on If you are filing become pointee to those office		a legislator or a judicial
Name of Person		Name of Employe	er	_	pe of Relations, Regulator	onship ry, Business)
officer or you	up which has an intered dicial Officer - You a nare filing as an appoi	re not required to com intee to those offices.	ct matter areas o	ver which your agency	or board ma	g board member of any y have jurisdiction? I legislator or a judicial
► Do not list organizations of which yo  Name of Person		(not a leadership role) me of Society, Organ		Le	eadership Po	sition
Name of Ferson		or Advocacy Gro				ard Member)
15. Have you ever been convicted of a conviction?  Yes No	felony for which you					ngement regarding that
Offense		Date of Convicti	on	County of Convicti		State of Conviction
16. During any calendar quarter in to candidate), did you  • receive any gift(s) exceeding \$ • when both you and those personate the gift(s) were given under close the gift should be provided by the provid	200 per quarter from on(s) were outside No roumstances that wou so of your extended fai	a person or group of printh Carolina at the time id lead a reasonable printly.  Mily, you to the Departmen	persons acting tog the you accepted the erson to conclude tof the Secretary	ether, <b>and</b> ne gift(s), <b>and</b> that they were given	for lobbying? ense Report fo	

<ul> <li>accepted a "scholarship" exce</li> <li>those person(s) were outside</li> </ul>	eding \$200 from a person or group of per North Carolina <u>and</u>	ted, employed, or filed or were nominated sons acting together and sons acting together and sons acting to attend a conference of the sons actions are sons attended as a conference of the sons actions are sons actions as a grant-in-aid to attend a conference of the sons actions are sons actions as a grant-in-aid to attended a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a grant-in-aid to attend a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions actions are sons actions as a conference of the sons actions actions actions are sons actions as a conference of the sons actions are sons actions as a conference of the sons actions actio	
		estion if you are a judicial officer or you a	•
► Do not report gifts that have previ	ously been reported by you to the Depart port scholarships paid by a nonpartisan	ment of the Secretary of State on the "Exp legislative organization of which the leg	pense Report for Exempted Persons."
mumber of partition			
Date of Scholarship	Name and Address of Donor(s)	Describe Event	Estimated Market Value
18. Are you or a member of your <u>Im</u> 12 months?  Yes No	mediate family currently registered as a l	obbyist or lobbylst principal or were you r	
Name of Lobbyist	Lobbyist's Principal	Date of Registration	Registration Expiration
19(a). List the name of each busine partner, proprietor, or member or m	ess with which you are associated where	you or a member of your immediate fa	imily is an employee, director, officer,
Name of Person	Relationship to Filer	Name of Company	Role of Person
No Business Associations			
Patrick McCrory	Self	McCrory & Company	Contractor
Patrick McCrory	Self	Lending Tree	Director
Patrick McCrory	Self	Kewaunee Scientific Corporatio	Director
Patrick McCrory	Self	Moore & Van Allen PLLC	Employee
19(b). If you know that any compan- regulated by the State, provide a bri	y or business entity listed in 19(a) above ef description of that business activity.	has any material business dealings or bus	iness contracts with the State, or is
Name of Compa	ny or Business Entity	Description of Business	Activity with the State
Not applicable (No entities listed	on #19a) No relationship / Not kr	own	
Kewaunee Scientific Corporat	ion	Product Sales	
Lending Tree		Regulatory	
Moore & Van Allen		Legal	

20. Did a Council of State member appoint you	to or recommend you for appointment to a board covered by the Eth	ples Ast3 Council of Chate	
► Governor	► Lt. Governor ► Secretary of State	nes Acti Council of State members are:	
► State Auditor	Source of State	lette Teacher and	
► Attorney General	Saparite de la constant de la consta		
➤ Commissioner of Insurance	► Commissioner of Agriculture	or .	
ostillasioner of modifice		•	
Yes 🗷 No		4	
If "Yes", list all contributions you (not immedial	te family members) made during the preceding calendar year with a	Cumulative total of more than \$1,000 to	
the council of State member who appointed yo	u.		
► Contributions are defined in N.C.G.S. 163-276 loan, payment, gift, pledge or subscription of m	8.6(6) and include, but are not limited to, "any advance, conveyance,	deposit, distribution, transfer of funds,	
	oney of anything of varie whatsoever.		
Date	Amount	Contributed to	
No contribution(s) with a cumulative total of	of more than \$1,000		
··· 1			
į	j		
21. Are you now, or are you a prospective appo	Intee to:		
a. the head of a principal state departmen	nt (e.g. cabinet secretary) appointed by the Governor; or		
<ul> <li>a North Carolina Supreme Court Justice</li> </ul>	e, Court of Appeals, Superior or District Court Judge; or		
<li>c. a member of any of the following board</li>	ds:		
ABC Commission			
<ul> <li>Coastal Resources Commission</li> <li>State Board of Education</li> </ul>			
State Board of Elections			
Employment Security Commission	1	Yes X No	
<ul> <li>Environmental Management Commental</li> </ul>	mission		
Industrial Commission  The Research Commission		If "No", proceed to question 22.	
State Personnel Commission     Rules Review Commission			
Board of Transportation			
<ul> <li>UNC Board of Governors</li> </ul>			
Utilities Commission			
Wildlife Resources Commission		<del> </del>	
d. If so, were you appointed to, or are you Council of State Member (Governor, Lt.	u being considered for, appointment to your public position by a . Governor, Secretary of State, State Auditor, State Treasurer,	Yes No	
Superintendent of Public Instruction, A	ttorney General, Commissioner of Agriculture, Commissioner of		
Labor, or Commissioner of Insurance)?		If "No", proceed to question 22.	
e. If so, you must indicate whether during	ng the preceding calendar year you (not immediate family		
members) engaged in any of the folio campaign committee of the Council of	wing activities with respect to or on behalf of the candidate or State member who appointed you to your public position:	1	
<ol> <li>Collected contributions from multi</li> </ol>	ple contributors, took possession of such multiple contributions,		
	collected contributions to the candidate or committee? S.S. 163-278.6(6) and include, but are not limited to, "any	Yes   No	
	stribution, transfer of funds, loan, payment, gift, pledge or		
		<u> </u>	
ii. Hosted a fundraiser at your reside	ence or place of business?	Yes No	
lii. Volunteered for campaign-related	activities, which include, but are not limited to, phone banks,		
event assistance, mailings, canva- of a candidate?	ssing, surveying, or any other activity that advances the campaign	Yes No	
or a carrolauce:		<u>.                                    </u>	

22. Are you aware of any other information that you believe may assist the State Government Ethics Act?	State Ethics Commission in advising you concerning your compliance with the
Yes No	
-	
AFFIRMATION	
I affirm that the information provided in this Statement of Economic I the best of my knowledge and belief.	nterest and any attachments hereto are true, complete, and accurate to
I also certify that I have not transferred, and will not transfer, any assimile retaining an equitable interest.	set, interest, or property for the purpose of concealing it from disclosure
I understand that my Statement of Economic Interest and any attach	ments or supplements thereto are public record.
I acknowledge that I have read and understand N.C.G.S. 138A-26 re N.C.G.S. 138A-27 regarding providing false information:	egarding concealing or failing to disclose material information and
§ 138A-26. Concealing or failing to disclose material inform	ation.
A filing person who knowingly conceals or knowingly fails to economic interest under this Article shall be guilty of a Clas 138A-45. (2006-201, s. 1.)	o disclose information that is required to be disclosed on a statement of s 1 misdemeanor and shall be subject to disciplinary action under G.S.
§ 138A-27. Penalty for false information.	
A filing person who provides false information on a stateme information is false is guilty of a Class H felony and shall be	ent of economic interest as required under this Article knowing that the subject to disciplinary action under G.S. 138A-45. (2006-201, s. 1.)
X 1 Agree	
Patrick Lloyd McCrory	**Notarization is no longer required** -
Printed Name	
Vatur 2 Mclon	Feb, 15, 2012
Signature	Date
Submit SIGNED, ORIGINAL documents.	