

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 05/01/2024

General Information

Name: Hon Martin David Kiar

CONFIDENTIAL

PID 96655

AGENCY INFORMATION

Organization	Suborganization	Title
Broward County	Elected Constitutional Officer	Property Appraiser

Net Worth

My Net Worth as of March 31, 2024 was \$ 910,851.33.

Assets

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effect is \$ 119,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

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Description of Asset	Value of Asset
Real Property - {REDACTED}	\$ 983,110.00
Bank Account - Bank of America - PO Box 15284, Wilmington, DE 19850	\$ 31,361.85
Bank Account - Bank of America - PO Box 15284, Wilmington, DE 19850	\$ 47,350.50
Bank Account - Bank of America - PO Box 15284, Wilmington, DE 19850	\$ 11,260.48
Bank Account - Bank of America - PO Box 15284, Wilmington, DE 19850	\$ 22,218.20
Florida Prepaid College - PO Box 6567, Tallahassee, FL 32314 (Tuition)	\$ 8,034.88
Florida Prepaid College - PO Box 6567, Tallahassee, FL 32314 (TDF Plan)	\$ 2,724.37
Florida Prepaid College - PO Box 6567, Tallahassee, FL 32314 (Local Fee Plan)	\$ 2,586.39
Florida Prepaid College - PO Box 6567, Tallahassee, FL 32314 (Dormitory)	\$ 3,774.10
Florida Prepaid College - PO Box 6567, Tallahassee, FL 32314 (Tuition 2)	\$ 11,896.31
Florida Prepaid College - PO Box 6567, Tallahassee, FL 32314 (Dormitory 2)	\$ 6,376.57
Mission Square Retirement Health Savings Plan - PO Box 96220, Washington DC 20090-6220	\$ 1,205.57
AmTrust Bank, a Division of New York Community Band (CD) - 8211 W Broward Blvd, Plantation FL 33324	\$ 5,802.07
AmTrust Bank, a Division of New York Community Band (CD) - 8211 W Broward Blvd, Plantation FL 33324	\$ 22,792.69
Series I Bond - Department of Treasury, Treasury Retail Securities Services, PO Box 9150, Minneapolis, MN 55480	\$ 10,940.00
SIKI Holding Corp (Investment) - 5528 Fort Apache Road, Las Vegas, NV 89135	\$ 5,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Chase Home Finance (mortgage)	PO Box 78420, Phoenix AZ 85062-8420	\$ 384,582.65

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

Name of Creditor	Address of Creditor	Amount of Liability
N/A		

Income

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2023 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

☐ I elect to file a copy of my 2023 federal income tax return and all W2s, schedules, and attachments.

PRIMARY SOURCES OF INCOME:

Name of Source of Income Exceeding \$1,000	Address of Source of Income	Amount
Broward County Property Appraiser's Office	115 S Andrews Avenue, # 111, Fort Lauderdale FL 33301	\$ 204,424.46
Renew LLC	7070 South Tuscan Way, Centennial CO 80112	\$ 5,000.00

SECONDARY SOURCES OF INCOME (Major customers, clients, etc. of businesses owned by reporting person):

Name of Business Entity	Name of Major Sources of Business' Income	Address of Source	Principal Business Activity of Source
N/A			

Interests in Specified Businesses**Business Entity # 1**

N/A

Training

This section applies only to a Constitutional or elected municipal officer, each of whom are required to complete annual ethics training pursuant to Section 112.3142, F.S.

☒ I certify that I have completed the required training under Section 112.3142, F.S.

☐ Required training under Section 112.3142, F.S., not applicable to filer for this form year.

Signature of Reporting Official or Candidate

Under the penalties of perjury, I declare that I have read the foregoing Form 6 and that the facts stated in it are true.

Martin David Kiar

Digitally signed: 05/01/2024

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