

2023 Form 6 - Full and Public Disclosure of Financial Interests

Filed with COE: 07/01/2024

General Information

Name: Ashley Hoffman Lukis

PID 304109

AGENCY INFORMATION

Organization	Suborganization	Title
Commission On Ethics	Governing Board	Chair

Net Worth

My Net Worth as of December 31, 2023 was \$ 1,800,000.00.

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 \$ 223,000.00.

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

Description of Asset	Value of Asset
2662 Noble Dr, Tallahassee FL 32308	\$ 580,000.00
MS Pathway Intl Equity	\$ 3,169.35
MS Pathway Large Stock Equity	\$ 7,135.78
MS Pathway Small Mid Cap Equity	\$ 2,567.39
MSILF Govt PTF Inst	\$ 245,636.58
Blackstone BCRED	\$ 50,000.01
Blue Owl Real Estate NLT	\$ 49,891.72
Morgan Stanley Private Bank NA	\$ 6,105.17
Vanguard Mid Cap Value ETF	\$ 9,284.85
Vanguard S&P 500 ETF	\$ 18,632.58
Blackrock Health Science Opp I	\$ 4,686.62
Clearbridge Intl Growth I	\$ 8,192.22
Congress Small Cap Grwth Inst	\$ 7,666.61
Delaware Inv Sm Cap Val Inst	\$ 7,392.26
Hartford Dividend & Growth I	\$ 13,794.80
JPMorgan Growth Advantage I	\$ 13,884.78
Touchstone Mid Cap Growth Y	\$ 9,468.76
Cash	\$ 160,000.00
529 Plans	\$ 38,000.00
Cash Surrender Value	\$ 19,000.00

Liabilities

LIABILITIES IN EXCESS OF \$1,000:

Name of Creditor	Address of Creditor	Amount of Liability
Wells Fargo	420 Montgomery Street, San Francisco, California 94163	\$ 280,000.00

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
N/A		

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

Based on the office or position you hold, the certification of training required under Section 112.3142, F.S., is not applicable to you for this form year.

CPA/Attorney Signature Only

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, **Matthew B Lambert** prepared the CE Form 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

Matthew B Lambert

Digitally signed: 07/01/2024

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.

Ashley Hoffman Lukis

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