

STATEMENT OF FINANCIAL INTEREST

Final

State/District officials file with:
John Thurston, Secretary of State
500 Woodlane Street
Little Rock, AR 72201
Phone (501) 682-5070
Fax (501) 682-3548

Calendar year covered 2023
(Note: Filing covers the previous calendar year)

For assistance in completing
this form contact:
Arkansas Ethics Commission
Phone (501) 324-9600
Toll Free (800) 422-7773

Is this an amendment? Yes No

*last employed
03/14/2023*

Please provide complete information. If the information requested in a particular section does not apply to you, indicate such by noting "Not Applicable" in that section. Do not leave any part of this form blank. If additional space is needed, you may attach the information to this document. Do not file this form with the Arkansas Ethics Commission.

SECTION 1- NAME AND ADDRESS

Name Moore Jeffrey Hines
(Last) (First) (Middle)
 Address 1 Carrollton Ct Little Rock AR 72211
(Street or P.O. Box Number) (City) (State) (Zip Code)
 Phone 501 414 6894
 Spouse's name Moore Leslie Jennings
(Last) (First) (Middle)
 All names under which you and/or your spouse do business: _____

SECTION 2- REASON FOR FILING

FILED

FEB 02 2024

**Arkansas
Secretary of State**

- Public Official _____
(office held)
- Candidate _____
(office sought)
- District Judge _____
(name of district)
- City Attorney _____
(name of city)
- State Government: Agency Head/Department Director/Division Director Tax Appeals Commission
(name of agency/department/division)
- Chief of Staff or Chief Deputy _____
(name of Constitutional Officer, Senate, or House of Representatives)
- Public appointee to State Board or Commission _____
(name of board/commission)
- School Board member _____
(name of school district)
- Candidate for school board _____
(name of school district)
- Public or Charter School Superintendent _____
(name of school district/school)
- Executive Director of Education Service Cooperative _____
(name of cooperative)
- Advertising and Promotion Commission member _____
(name of advertising and promotion commission)
- Research Park Authority Board member under A.C.A. § 14-144-201 et seq. _____
(name of research park authority board)

SECTION 2- REASON FOR FILING (continued)

- Appointee to one of the following municipal, county or regional boards or commissions (list name of board or commission):
 - Planning board or commission _____
 - Airport board or commission _____
 - Water or Sewer board or commission _____
 - Utility board or commission _____
 - Civil Service commission _____

SECTION 3- SOURCE OF INCOME

List each employer and/or each other source of income from which you, your spouse, or any other person for the use or benefit of you or your spouse receives gross income amounting to more than \$1,000. (You are not required to disclose the individual items of income that constitute a portion of the gross income of the business or profession from which you or you spouse derives income. For example: accountants, attorneys, farmers, contractors, etc. do not have to list their individual clients.) If you receive gross income exceeding \$1,000 from at least one source, the answer N/A is not correct.

a) Check appropriate box: More than \$1,000 More than \$12,500

State of Arkansas
 (name of employer or source of income)
 900 W. Capitol Suite 310, Little Rock, AR 72201
 (address)
 Jeffrey H. Moore
 (name under which income received)

Provide a brief description of the nature of the services for which the compensation was received Chief Commissioner

b) Check appropriate box: More than \$1,000 More than \$12,500

Arkansas Childrens Hospital
 (name of employer or source of income)
 1 Children's Way, Little Rock, AR 72202
 (address)
 Nestie Jennings Moore
 (name under which income received)

Provide a brief description of the nature of the services for which the compensation was received Nurse

c) Check appropriate box: More than \$1,000 More than \$12,500

 (name of employer or source of income)

 (address)

 (name under which income received)

Provide a brief description of the nature of the services for which the compensation was received _____

Section 4 (continued)

Business or Holdings

Name of Corporation, Firm, or Enterprise	Address	Value	Name under which investment
Jeffrey H. Moore, PA	1 Carrollton Ct., Little Rock, AR 72211	More than \$1000	Jeffrey H. Moore
Simmons National Bank	500 Main St., Pine Bluff, AR 71061	More than \$1,000	Jeffrey H. Moore
Regions	10120 N. Rodney Parham, Little Rock, AR 72212	More than \$12,500	Jeffrey H. Moore
Morgan Stanley	2200 North Rodney Parham Ste 100, Little Rock, AR 72212	More than \$12,500	Jeffrey H. Moore
Telcoe Federal Credit Union	820 Louisiana St., Little Rock, AR 72201	More than \$12,500	Leslie Jennings Moore
Metropolitan West Total Return Bond F	Metropolitan West Asset Mgmt., 865 S. Figueroa St, Suite 2100, Los Angeles, AR	More than \$12,500	Leslie Jennings Moore
Ameria Funds American Mutual R6	American Mutual Fund, Inc., 333 South Hope St., Los Angeles, Ca 90071	More than \$12,500	Leslie Jennings Moore
American Funds Europacific Gr R5	Europacific Growth Fund, 333 South Hope St., Los Angeles, ca 90071-1406	More than \$12,500	Leslie Jennings Moore
America Fund Fundamental Invs R6	Fundamntal Investors, Inc., P.O. Box 7650, San Francisco, CA 94120-7650	More than \$12,500	Leslie Jennings Moore
DFA U.S. Small Cap I	Dimensional Fund Advisors, LP, 6300 Bee Cave Rd. Bldg. 1, Austin, TX 78746	More than \$12,500	Leslie Jennings Moore
Vanguard Mid Cap Index I	Vanguard Index Funds, P.O. Box 2600, Fidelity Investments, PO Box 770001, Cincinnati, OH 45277-0002	More than \$12,500	Leslie Jennings Moore
Fidelity Government Portfolio	iShares/BlackRock, 400 Howard St., San Francisco, CA 94105	More than \$12,500	Jeffrey H. Moore
iShares S&P 500 Growth ETF	Vanguard Index Funds, PO Box 2600, Valley Forge, PA 19482	More than \$12,500	Jeffrey H. Moore
Vanguard 500 Index Fund	Vanugard, 75 Fedearl St., 12 Floor, Suite 1205, Boston, MA 02110	More than \$12,500	Jeffrey H. Moore
Vanguard High Dividend Yield ETF	Vanguard Index Funds, PO Box 2600, Valley Forge, PA 19482	More than \$12,500	Jeffrey H. Moore
Vanguard Mid-Cap Index Fund	Vanguard Index Funds, PO Box 2600, Valley Forge, PA 19482	More than \$12,500	Jeffrey H. Moore
Vanugard Small-Cap Index Fund	Vanguard Index Funds, PO Box 2600, Valley Forge, PA 19482	More than \$12,500	Jeffrey H. Moore
DWS RREEF Real Asset Fund	DWS Market Trust, 245 Park Ave., New York, NY 10154-0004	More than \$12,500	Jeffrey H. Moore
Artisan Developing World Fund	Artisan Funds, Inc., 875 East Wisconsin Ave. Street 800, Milwaukee, WI 53202	More than \$12,500	Jeffrey H. Moore
Baron Emerging Markets Fund	Baron Select Funds, 767 Fifth Ave. 49th Floor, New York, NY 10153	More than \$12,500	Jeffrey H. Moore
EuroPacific Growth Fund	Europacific Growth Fund, 333 South Hope St., Los Angeles, CA 90071-1406	More than \$12,500	Jeffrey H. Moore
Vauguard Developed Markets Index Fund	Vanguard Index Funds, PO Box 2600, Valley Forge, PA 19482	More than \$12,500	Jeffrey H. Moore

SECTION 4- BUSINESS OR HOLDINGS - See attached

List the name of every business in which you, your spouse or any other person for the use or benefit of you or your spouse have an investment or holding. Individual stock holdings should be disclosed. Figures should be based on fair market value at the end of the reporting period.

a) Check appropriate box: More than \$1,000 More than \$12,500

(name of corporation, firm or enterprise)

(address)

(name under which investment held)

b) Check appropriate box: More than \$1,000 More than \$12,500

(name of corporation, firm or enterprise)

(address)

(name under which investment held)

c) Check appropriate box: More than \$1,000 More than \$12,500

(name of corporation, firm or enterprise)

(address)

(name under which investment held)

d) Check appropriate box: More than \$1,000 More than \$12,500

(name of corporation, firm or enterprise)

(address)

(name under which investment held)

e) Check appropriate box: More than \$1,000 More than \$12,500

(name of corporation, firm or enterprise)

(address)

(name under which investment held)

f) Check appropriate box: More than \$1,000 More than \$12,500

(name of corporation, firm or enterprise)

(address)

(name under which investment held)

SECTION 5- OFFICE OR DIRECTORSHIP ✓

List every office or directorship held by you or your spouse in any business, corporation, firm, or enterprise subject to jurisdiction of a regulatory agency of this State, or of any of its political subdivisions.

a) _____
(name of business, corporation, firm, or enterprise)

(address)

(office or directorship held)

(name of office holder)

b) _____
(name of business, corporation, firm, or enterprise)

(address)

(office or directorship held)

(name of office holder)

SECTION 6- CREDITORS

List each creditor to whom the value of five thousand dollars (\$5,000) or more was personally owed or personally obligated and is still outstanding. (This does not include debts owed to members of your family or loans made in the ordinary course of business by either a financial institution or a person who regularly and customarily extends credit.)

a) _____
(name of creditor)

(address of creditor)

b) _____
(name of creditor)

(address of creditor)

c) _____
(name of creditor)

(address of creditor)

SECTION 7- PAST-DUE AMOUNTS OWED TO GOVERNMENT ✓

List the name and address of each governmental body to which you are legally obligated to pay a past-due amount and a description of the nature of the amount of the obligation.

a) _____
(name of governmental body) (address of governmental body)

(amount owed) (nature of the obligation)

b) _____
(name of governmental body) (address of governmental body)

(amount owed) (nature of the obligation)

SECTION 12- DIRECT REGULATION OF BUSINESS ✓

List any business which employs you and is under direct regulation or subject to direct control by the governmental body which you serve.

a) _____
(name of business)

(governmental body which regulates or controls)

b) _____
(name of business)

(governmental body which regulates or controls)

c) _____
(name of business)

(governmental body which regulates or controls)

d) _____
(name of business)

(governmental body which regulates or controls)

SECTION 13- SALES TO GOVERNMENTAL BODY ✓

List the goods or services sold to the governmental body for which you serve which have a total annual value in excess of \$1,000. List the compensation paid for each category of goods or services sold by you or any business in which you or your spouse is an officer, director, or stockholder owning more than 10% of the stock of the company.

a) _____
(goods or services)

(governmental body to whom sold)

(compensation paid)

b) _____
(goods or services)

(governmental body to whom sold)

(compensation paid)

c) _____
(goods or services)

(governmental body to whom sold)

(compensation paid)

d) _____
(goods or services)

(governmental body to whom sold)

(compensation paid)

SECTION 14- SIGNATURE

I certify under penalty of false swearing that the above information is true and correct.

SUSAN L. HUNTER
PULASKI COUNTY
NOTARY PUBLIC - ARKANSAS
My Commission Expires April 27, 2029
Commission No. 12371050

[Handwritten Signature]
Signature

STATE OF ARKANSAS

COUNTY OF Pulaski) ss

Subscribed and sworn before me this 2nd day of Feb, 2024.

(Legible Notary Seal)

[Handwritten Signature]
Notary Public

My commission expires: 4-27-2029

Note: If faxed, notary seal must be legible (i.e., either stamped or raised and inked) and the original must follow within ten (10) days pursuant to Ark. Code Ann. § 21-8-703(b)(3).

IMPORTANT

Where to file:

- State or district candidates/public servants file with the Secretary of State.
- Appointees to state boards/commissions file with the Secretary of State.
- County, township, and school district candidates/public servants file with the county clerk.
- Municipal candidates/public servants file with the city clerk or recorder, as the case may be.
- City attorneys file with the city clerk of the municipality in which they serve.
- District judges file with the Secretary of State.
- Members of regional boards or commissions file with the county clerk of the county in which they reside.

General Information:

- * The Statement of Financial Interest should be filed by January 31 of each year.
- * The filing covers the previous calendar year.
- * Candidates for elective office shall file the Statement of Financial Interest for the previous calendar year on the first Monday following the close of the period to file as a candidate for elective office unless already filed by January 31. In addition, if the party filing period ends before January 1 of the year of the general election, candidates for elective office shall file a Statement of Financial Interest for the previous calendar year by no later than January 31 of the year of the general election.
- * Agency heads, department directors, and division directors of state government shall file the Statement of Financial Interest within thirty (30) days of appointment or employment unless already filed by January 31.
- * Appointees to state boards or commissions shall file the Statement of Financial Interest within thirty (30) days after appointment unless already filed by January 31.
- * If a person is included in any category listed above for any part of a calendar year, that person shall file a Statement of Financial Interest covering that period of time regardless of whether they have left their office or position as of the date the statement is due.