

LEGISLATOR'S FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2014

NOTE: Before completing this Disclosure Statement, please carefully read the enclosed instructions. If additional space is needed, please duplicate this form as necessary and staple all pages together. An original signature is required on page 4; a facsimile, photocopy or stamp signature is not acceptable. Questions should be directed to Legislative Counsel at (609) 847-3901. The completed disclosure form is due May 15, 2015 and should be sent to: Joint Legislative Committee on Ethical Standards, 2nd Floor, State House Annex, Room 210, PO Box 068, Trenton, New Jersey 08625-0068.

LOUIS D GREENWALD

PRINT NAME

CHECK APPROPRIATE HOUSE: Senate General Assembly

Provide the following information for yourself, your spouse and minor children (unless otherwise indicated) for calendar year 2014. Please note that a minor child is a child under the age of 18. For each entry, mark the box of the appropriate recipient. When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000 - \$24,999.99; 3=\$25,000 - \$49,999.99; 4=\$50,000 or more.

I. EARNED INCOME: List the name, address and amount for each source of earned income. (Earned income includes salaries, bonuses, royalties, commissions, profit sharing, fees, pensions and Social Security.)

	Name of Employer	Address of Employer	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	<u>CARLISLE & ASSOCIATES</u>	<u>1103 LAUREL OAK ROAD, SUITE 160, VOORHEES, NJ 08043</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	<u>SPEZIALI GREENWALD & HAWKIN</u>	<u>1081 WINSLOW ROAD WILLIAMSTOWN NJ 08084</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	<u>TRANSFORMATIVE SOLUTIONS</u>	<u>2 SHELBOURNE CT. VOORHEES NJ 08043</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	<u>ATLANTIS</u>	<u>1000 NORTHWEST STREET, STE. 1200, WILMINGTON DE 19801</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5)	<u> </u>	<u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

II. UNEARNED INCOME: List the name, address and amount for each source of unearned income. (Unearned income includes rents, dividends and income from investments, trusts and estates.)

A. RENTS

	Property Address	Tenant Name	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	<u>UNIT 307 101 WEST SPRUCE AVE. NORTH WILDWOOD NJ</u>	<u>RENTAL PROPERTY/OCEANSIDE RE</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	<u> </u>	<u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	<u> </u>	<u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	<u> </u>	<u> </u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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B. DIVIDENDS

	Name	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	SEE ATTACHED		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. INCOME from investments, trusts and estates (including capital gains).

	Name	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	SEE ATTACHED		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

III. HONORARIA and FEES: List the name, address, nature and amount for each source of honorarium or fee received by you or your spouse for personal appearances, speeches or writings.

	Name & Nature of Honorarium or Fee	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	N/A		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

IV. REIMBURSEMENTS or PREPAID EXPENSES for TRAVEL, LODGING or SUBSISTENCE: List the name, address, nature and amount for each source of reimbursement or prepaid expense and indicate whether source is a profit (P), nonprofit (N), or governmental (G) entity.

	Name & Nature of Reimbursement or Prepaid Expense	Address	Amount Code				Self	Spouse	Child	Check Source		
			1	2	3	4				P	N	G
1)	EFO LOUIS GREENWALD FOR ASSEMBLY	2240-15 ROUTE 70 CHERRY HILL, NJ 08002	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	CARLISLE & ASSOCIATES	1103 LAUREL OAK ROAD, STE. 160 VOORHEES, NJ 08043	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	TRANSFORMATIVE SOLUTIONS	2 SHELBOURNE CT. VOORHEES, NJ 08043	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	ATLANTIS	1000 NORTHWEST STREET, STE. 1200 WILMINGTON DE 19807	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When an amount is requested, use the following numerical code: 1=less than \$10,000; 2=\$10,000-\$24,999.99; 3=\$25,000-\$49,999.99; 4=\$50,000 or more.

V. GIFTS: List the name, address, nature and amount for each source of gift to you, your spouse or minor child from a named donor connected to the legislative process.

	Name & Nature of Gift	Address	Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	MSNBC/CAR SERVICE FOR TV APPEARANCE	30 ROCKERFELLER PLAZA NEW YORK, NY 10112	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VI. LIABILITIES: List the name and address of each creditor for you or your spouse and the nature and amount of each liability except for liabilities which are: (a) less than \$15,000 and owed to a relative; (b) less than \$3,000 and owed to any other person; (c) loans secured by a personal motor vehicle or household furniture or appliances; or (d) revolving charge accounts.

	Name & Nature of Liability	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	GMAC MORTGAGE/MARITAL HOME	2 SHELBOURNE COURT, VOORHEES NJ 08043	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	AUDUBON SAVINGS AND LOAN	UNIT 307 101 SPRUCE AVE. NORTH WILDWOOD NJ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VII. FORGIVEN LIABILITIES: List the name and address of each former creditor for you or your spouse and the nature and amount of each forgiven liability which would have been required to be reported pursuant to VI above had it not been forgiven.

	Name & Nature of Forgiven Liability	Address	Amount Code				Self	Spouse
			1	2	3	4		
1)	N/A		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VIII. BUSINESS ORGANIZATIONS: List the name and address of all business organizations in which you or your spouse held an interest.

	Name	Address	Self	Spouse
1)	THE POINT COMMONS LLC	9 OLD STEVENS LANE VOORHEES, NJ 08043	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

IX. OFFICES, TRUSTEESHIPS, OR DIRECTORSHIPS: List the title of each position held by you or your spouse in any firm, corporation, association, partnership or business and the name and address of the entity in which the position was held.

	Position Held	Name & Address of Entity	Self	Spouse
1)	N/A	_____	<input type="checkbox"/>	<input type="checkbox"/>
2)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

X. REAL ESTATE: Provide the address and a brief description for all real property in New Jersey in which you, your spouse, or minor child held an interest.

	Property Address	Description of Property	Self	Spouse	Child
1)	2 SHELBOURNE CT. VOORHEES NJ 08043	MARITAL HOME	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2)	UNIT 307 101 SPRUCE AVE NORTH WILDWOOD NJ	RENTAL PROPERTY OF POINTE COMMONS LLC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the above information is correct and complete to the best of my knowledge. In addition to this statement, you have a continuing obligation to report any termination or assumption of public employment of yourself or your spouse within 30 days, which report shall be an addendum to this statement.

3-31-15
Date


Signature of Member (must be an ORIGINAL signature, not a facsimile, stamp or photocopy)

Louis D. Greenwald
 Legislator's Financial Disclosure Statement
 For Calendar Year 2014

Dividends

INVESTMENT COMPANY	ADDRESS	FUND NAME	SYMBOL	SELF	SPOUSE	JOINT	CHILD	INCOME
Alliance Bernstein Funds	8000 IH 10 West, 4th Floor	CBF Aggressive Growth	1611				X	1
	San Antonio, TX 78230	CBF Aggressive Growth	1610				X	1
	(888) 324-5057	CBF Aggressive Growth	1611				X	1
American Funds	5300 Robin Hood Road	Amcap Fund A	AMCPX	X				1
	Norfolk, VA 23513-2407	New World A	NEWFX		X			1
	(800) 421-0180	High Income Trust A	AHITX	X				1
		Capital Income Builder A	CIABX	X				1
		Fundamental Invs A	ANCFX	X				1
		Inv Co of America	AIVSX	X				1
Waddell & Reed	PO Box 29217	IVY Fund-High Income A	WHIAX			X		1
Financial Services	Shawnee Mission, KS 66201							
	(888) 923-3355							
Inland Real Estate Investment Corp	2901 Butterfield Road	Inland American Real Estate Trust	457997203	X				1
	Oak Brook, IL 60523	Inland Diversified Real Estate Trust	457997203	X				1
	custserv@inland-investments.com							
	Customer Relations : 800.826.8228							
American Realty Capital	405 Park Avenue, 15th Floor							
	New York, NY 10022	American Realty Healthcare Trust	24994048	X				1
	info@aricap.com							
	(877)373-2522							
First Eagle Funds	1345 Avenue of the Americas	First Eagle US Value A	FEVAX			X		1
	New York, NY 10105	First Eagle Oversease Fund A	SGOVX			X		1
	(800) 747-2008							

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Dividends

INVESTMENT COMPANY	ADDRESS	FUND NAME	SYMBOL	SELF	SPOUSE	JOINT	CHILD	INCOME
Janus Service Corp.	720 South Colorado Blvd. Ste 290A Denver, CO 80246 (800)668-0434	Janus Triton T	JATTX			X		1
AIG Sunamerica Asset Mgm	330 W. 9th St. Kansas City, MO 64105-1514 (800) 858-8850	Focused Dividend Strategy A	FDSAX			X		1
Kite Realty Group Trust	30 South Meridian St, Ste 1100 Indianapolis, IN 46204 (317)577-5600	Kite Rlty Group TR COM	KRG	X				1
Fidelity	100 Crosby Parkway Covington, KY 41015 (800) 343-3548	OTC Portfolio FD New Markets Income fund	FOCPX FNMIX		X			1 1
Virtus Investment Partners	100 Pearl Street 9th Floor Hartford, CT 06103 (800) 243-1574	Virtus Tax Exempt Bond A	HXBZX			X		1
Templeton Global Investmen Trust	Broward Financial Center 500 East Brooward Blvd. (800)632-2301 Fort Lauderdale, FL 33394	Tem Frontier Market Fund-Advisor	FFRZX	X				1
Delaware Investments	2005 Market Street Philadelphia, PA 19103 (215) 255-1200	Delaware Diversified Income A	DPDFX			X		1

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INVESTMENT COMPANY	ADDRESS	FUND NAME	SYMBOL	SELF	SPOUSE	JOINT	CHILD	INCOME
Principal Funds Inc	711 High Street	Money Market Fund	PCSXX	X	X	X		1
Principal Financial Group	Des Moines, IA 50392-2080	SAM Balanced		X				1
	(800) 247-4123	High Yeild Inst Class I	PHYTX	X				1
		International I (I)	PINIX	X				1
		International Value Fund I (I)	PINZX	X				1
		Principal Divers Intl Inst	PIIIX	X				1
		Principal Glb Real Est Sec Inst	POSIX	X				1
		Principal Intl Emrg Mkts Inst	PIEIX	X				1
		Principal Preferred Sec Inst	PPSIX	X				1
		Principal Core Plus Bond I Inst	PCBZX	X				1
		Principal Lgcap S&P 500 Inst	PLFIX	X				1
		Principal Lgcap Val Fd Inst	PVLIX	X				1
		Principal Lgcp Blend II Inst	PLBIX	X				1
		Principal Lgcp Gr I Inst	PLGIX	X				1
		Principal Midcp Value I Inst	PVMIX	X				1
		Principal Midcp S&P 400 Idx Inst	MPSIX	X				1
		Principal Smcap S&P 600 Indx Ins	PSSIX	X				1
		Principal Smcp Value II Inst	PPVIX	X				1
		Principal Midcp Blend Inst	PCBIX	X		X		1
		Principal Short-Term Income FD Ir	PSHIX	X				1
		Principal Income FD Inst	PIOIX	X				1
		Principal SMCP Value II Inst	PPVIX	X				1
		Principal SMCP Gr I Inst	PGRTX	X				1
		Principal BD & Mort Sec Int	PMSIX	X				1
IShares Index Funds	Ishares: Attn: BGI Center	Ishares EAFE SML CP EFT	SCZ	X				1
	c/o SEI Investments Distr.	Ishares Tips BD EFT	TIP	X				1
	One Freedom Valley Drive							
	Oaks, PA 19456							
	(800) 474-2737							

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Dividends

INVESTMENT COMPANY	ADDRESS	FUND NAME	SYMBOL	SELF	SPOUSE	JOINT	CHILD	INCOME
Alps Portfolio Solutions	PO Box 44386 Denver, CO 80201 (866) 759-5679	Listed Private Equity Fund Class I	LPEIX	X				1
Invesco Investment Services Inc.	430 W. 7th Street Kansas City, MO 64105-1514 (800) 959-4246	Van Kampen American Value Fd A Select Companies A	MSAVX ATIAX			X X		1 1
Thornburg	2300 North Ridgetop Rd. Santa Fe, NM 87506 (800) 847-0220	Thornburg LTD Term Income Thornburg International Growth A	THIFX TIGAX			X X		1
Dreyfus	4400 N. Federal Highway Suite #156 Boca Raton, FL 33431 (800) 373-9387	Dreyfus Intl Bond A	DIBAX			X		1
Nuveen Mutual Funds	c/o Boston Financial Data Servi 30 Dan Road Canton, MA 08021 (800) 257-8787	Global Infrastructure Fund Class I	FGIYX	X				1
Merger Fund	100 Summit Lake Drive Valhalla, NY 10595 (914) 741-5600	The Merger Fund	MERFX	X				1
UBS Funds	One North Wacker Drive Suite 3700 Chicago, IL 60606 (800) 647-1568	UBS Dynamic Alpha Y	BNAYX	X				1

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Capital Gains

INVESTMENT COMPANY	ADDRESS	FUND NAME	SYMBOL	SELF	SPOUSE	JOINT	CHILD	INCOME
First Eagle Funds	1345 Avenue of the Americas	First Eagle Overseas Fund A	SGOVX			X		1
	New York, NY 10105 (800) 747-2008	First Eagle US Value A	FEVAX			X		1
Thornburg	2300 North Ridgetop Rd.	Thornburg LTD Term Income	THIFX			X		1
	Santa Fe, NM 87506 (800) 847-0220	Thornburg International Growth A	TIGAX			X		1
Merger Fund	100 Summit Lake Drive	The Merger Fund	MERFX	X				1
	Valhalla, NY 10595 (914)741-5600							
Fidelity Funds	100 Crosby Parkway	Fidelity New Markets Income Fund	FNMIX	X				1
	Covington, KY 41015 (800) 343-3548	Fidelity OTC Portfolio FD	FOCPX			X		1
AIG Sunamerica Asset Mgmt	330 W. 9th St.	Focused Dividend Strategy A	FDSAX			X		1
	Kansas City, MO 64105-1514 (800) 858-8850							
Invesco Investment Services Inc.	430 W. 7th Street	Invesco Select Companies A	ATIAX			X		1
	Kansas City, MO 64105-1514 (800) 959-4246	Van Kampen American Value Fd A	MSAVX			X		1
Wasatch Funds	PO Box 2172	Wasatch-1st Source Long/Short	FMLSX	X				1
	Milwaukee, WI 53201 (800)551-1700	Fund						
Delaware Investments	2005 Market Street	Delaware Diversified Income A	DPDFX			X		1
	Philadelphia, PA 19103 (215) 255-1200							

