

LEGISLATOR'S FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2008

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) 292-4625. The completed disclosure form is due May 15, 2009 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.

SEAN T. KEAN
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 2008. For each entry, check 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 and fees.)

	Name of Employer	Address of Employer	Circle Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	<u>STATE of NJ</u>	<u>NJ SENATE</u>	1	2	<u>3</u>	4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	<u>CAMPBELL FOLEY LAW</u>	<u>601 BANGS AVE</u>	1	2	3	<u>4</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)		<u>ASBURY PARK NJ 07712</u>	1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)	<u>Escandon Fernicola KEAN</u>	<u>414 Carlies Ave Aldenhurst NJ 07711</u>	1	2	3	<u>4</u>	<input checked="" 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	Circle Amount Code				Self	Spouse	Child
			1	2	3	4			
1)	<u>1 Roseld Ave Deal NJ</u>	<u>SEAN McKeown</u>	1	<u>2</u>	3	4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	<u>6 Webb Ave Neptune nj</u>	<u>Laura Layton</u>	<u>1</u>	2	3	4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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B. DIVIDENDS

Name	Address	Circle Amount Code	Self	Spouse	Child
1) <u>PNC BANK</u>	<u>PO 535230 Pittsburgh PA</u>	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) <u>WACHOVIA BANK</u>	<u>PO 40031 ROANOKE VA</u>	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) <u>SMITH BARNEY</u>	<u>PO 388 GREENWICH NY</u>	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Name	Address	Circle Amount Code	Self	Spouse	Child
1) <u>None</u>	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	1 2 3 4	<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	Circle Amount Code	Self	Spouse	Child
1) <u>None</u>	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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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 circle whether the source is a profit (P), nonprofit (N), or governmental (G) entity.

Name & Nature of Reimbursement or Prepaid Expense	Address	Circle Amount Code	Self	Spouse	Child	Circle P, N or G
1) <u>ELECTION FUND</u>	<u>PO BOX 605</u>	① 2 3 4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P ① N G
2) <u>SENATOR SEAN KEAN</u>	<u>BELMAR NJ 07719</u>	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G
3) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G
4) _____	_____	1 2 3 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P N G

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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	Circle Amount				Self	Spouse	Child
			Code						
1)	<u>None</u>		1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)			1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)			1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4)			1	2	3	4	<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	Circle Amount				Self	Spouse
			Code					
1)	<u>See Attached</u>		1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>
2)			1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>
3)			1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>
4)			1	2	3	4	<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	Circle Amount				Self	Spouse
			Code					
1)	<u>None</u>		1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>
2)			1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>
3)			1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>
4)			1	2	3	4	<input type="checkbox"/>	<input type="checkbox"/>

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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) <u>NOAH'S Kingdom LLC</u>	<u>1800 Rt 34 Wall NJ</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) <u>Kildor LLC</u>	<u>220 CLUB DR Wall NJ</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3) <u>Escandea Fornicola KEAN</u>	<u>414 Carried Ave</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4) _____	<u>Allenhurst NJ</u>	<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) <u>see attached</u>	_____	<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"/>

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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) <u>220 CLUB DR Wall NJ</u>	<u>home</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) <u>6 Webb Ave Neptune NJ</u>	<u>rental</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) <u>1 Roseld Ave Deal NJ</u>	<u>rental</u>	<input checked="" 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.

4/28/09
Date

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

In 2008 Sean Kean held the following OFFICES, TRUSTEESHIPS, DIRECTORSHIPS:

Monmouth County Historical Association
70 Court St
Freehold NJ

Salvation Army Asbury Park Corps
605 Asbury Ave
Asbury Park NJ 07712

SCAN Learning Center
Monmouth Mall
Route 36
Eatontown, NJ 07724

Jersey Shore Arts Center
Main Ave Ocean Grove, NJ 07756

Eden Wooley House
163 Monmouth Rd
Ocean NJ 07755

Shore Institute of the Contemporary Arts
20 Third Ave
Long Brach, NJ 07740

Republicans for Environmental Protection
3200 Carlisle Blvd
Albuquerque, NM 87110

NJ Legislative Services Commission
Statehouse, Trenton, NJ

Monmouth – Ocean Development Council
Monmouth Shores Corporate Park
4814 Outlook Drive
Wall, NJ 07753

Council of State Governments
Eastern region
2760 Research park Drive
Lexington, KY 40578

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