

Statement of Economic Interests

Filed in 2017 for calendar year 2016

Name: HOLTZ, LOWELL E.
(last name, first name & initial)

State position: State Superintendent of Public Instruction
(held or sought) (include agency, division, branch or district, if applicable)

FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS SEE THE INSTRUCTIONS OR VISIT OUR WEBSITE AT <http://ethics.wi.gov>.
Still have questions? For priority service send an e-mail to: Ethics@wi.gov; otherwise call (608) 266-8123.

****Attach additional pages as needed/Please See Instructions.****

Part A

As of December 31, 2016

1. INVESTMENTS.

a) **Funds Available in Wisconsin Deferred Compensation Program.** These funds are available to participants in the Wisconsin Deferred Compensation program and many of them are also available for direct purchase, independent of that program. If you held an investment of \$5,000 or more in any of these funds – either directly or through the program -- please check the appropriate box.

	"✓" one			"✓" one			"✓" one	
	\$5,000 to \$50,000	More than \$50,000		\$5,000 to \$50,000	More than \$50,000		\$5,000 to \$50,000	More than \$50,000
Profile Series			Small Cap			Bond		
Vanguard Retirement 2055 Fund			BlackRock Russell 2000 Index - T			BlackRock US Debt Index Fund W		
Vanguard Retirement 2045 Fund								
Vanguard Retirement 2035 Fund			DFA US Micro Cap			Federated US Government Securities 2-5 Yr.		
Vanguard Retirement 2025 Fund			Mid Cap			Vanguard Long-Term Investment Grade Adm		
			BlackRock Mid Cap Equity Index - F			Money Market		
Vanguard Retirement 2015 Fund			T. Rowe Price Mid Cap Growth			Vanguard Admiral Treasury Money Market		
Vanguard Target Retirement Income Fund			Large Cap			Fixed		
			Calvert Social Investment Equity I			Stable Value Fund		
International			Fidelity Contrafund			FDIC Bank Option		
American Funds EuroPacific R6								
BlackRock EAFE Equity Index - T			Vanguard Institutional Index Fund Plus			Brokerage		
						Schwab SDB Money Market		
			Vanguard Wellington Fund - Admiral			Schwab SDB Securities		

b) **Other Investments.** List stocks, bonds, limited partnerships, Wisconsin governmental securities, and mutual and money market funds in which you and your family's interest was valued at \$5,000 or more.

Name of security	Type of security - "✓" one					Amount - "✓" one	
	Stock/option/futures	Bond	Limited partnership	Wisconsin governmental security	Mutual or money market fund	\$5,000 to \$50,000	More than \$50,000
RW Baird					✓		✓
Mid America					✓	✓	
Ameri Prize					✓		✓
American Funds					✓	✓	
Prudential Guaranteed Investment					✓	✓	

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7. AGENT, REPRESENTATIVE OR SPOKESPERSON. List each organization that authorized you or a family member to represent it in its dealings with others as an attorney-at-law, agent, spokesperson, or representative (unless listed in item 2, 3, or 6.)

Business or organization	City	State
NONE		

8. CREDITORS. List creditors to which you or your family owed \$5,000 or more.

Creditor	City	State	"✓" one	
			\$5,000 or less	More than \$5,000
BMO Harris Bank	Milwaukee	WI		✓
Great Lakes Higher Ed Corp.	Madison	WI		✓
Chrysler Capital	Fort Worth	TX	✓	
Midwest Airlines and Services	Delaware		✓	

See more ↓

Part B For calendar year 2016

9. EMPLOYERS. List your and your family's EMPLOYERS (\$1,000 or more of income) in 2016.

Name of employer (If State of Wisconsin, identify agency or institution)	City	State	Nature of employer's business
Whitnall School District	Greenfield	WI	Education
Wisconsin Lutheran Seminary	Megunaw	WI	Religious Education
Noodles & Co	Madison	WI	Hospitality
BMO Harris Bank	Madison	WI	Bank
Eklermark Software	Maple	MN	Software Developer

10. ADDITIONAL SOURCES OF INCOME. List other sources from which you or your family received income of \$1,000 or more in 2016.

Source of income	City	State
Wisconsin Retra Retirement System	Madison	WI

11. ENTERTAINMENT AND GIFTS. List individuals and organizations that provided you with entertainment or gifts (more than \$50) in 2016.

Name of provider	City	State

12. HONORARIA AND EXPENSES. List, for 2016, sources of honoraria and payment of expenses related to your state government duties (more than \$50) not previously reported to the Wisconsin Ethics Commission.

Payer	Approximate value of expenses	Amount of honorarium	Circumstances of receipt

I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete, and correct to the best of my knowledge, information, and belief. In the event this Statement of Economic Interests is filed prior to December 31st for an election in the following year, I certify that I will amend it on or before the statutory filing deadline if an amendment is necessary to bring it into conformity with the true statement of my economic interests as of December 31, 2016. **If any part has been left blank, I have done so intentionally because there is nothing to report.**

Daytime phone # _____

Signature of person filing _____ Date _____ E-mail address _____

The information sought in this form is required by §§19.43 and 19.44, *Wisconsin Statutes*. Failure to file a completed form may result in a forfeiture of up to \$500. Statements of Economic Interests are open for public inspection. The Wisconsin Ethics Commission will notify you of the identity of any person who examines your Statement. In accordance with §15.04(1)(m), *Wisconsin Statutes*, the Wisconsin Ethics Commission states that no personally identifiable information is likely to be used for purposes other than those for which it is collected.

7. **AGENT, REPRESENTATIVE OR SPOKESPERSON.** List each organization that authorized you or a family member to represent it in its dealings with others as an attorney-at-law, agent, spokesperson, or representative (unless listed in item 2, 3, or 6.)

Business or organization	City	State

8. **CREDITORS.** List creditors to which you or your family owed \$5,000 or more.

Creditor	City	State	"✓" one	
			\$50,000 or less	More than \$50,000
Frontier Bank Airlines Card (Barclay)	Wilmington	DE	✓	

Part B

For calendar year 2016

9. **EMPLOYERS.** List your and your family's EMPLOYERS (\$1,000 or more of income) in 2016.

Name of employer (If State of Wisconsin, identify agency or institution)	City	State	Nature of employer's business
Martin Luther College	New Ulm	MN	Education
Napels IS	Madison	MN	Hospitality

10. **ADDITIONAL SOURCES OF INCOME.** List other sources from which you or your family received income of \$1,000 or more in 2016.

Source of income	City	State

11. **ENTERTAINMENT AND GIFTS.** List individuals and organizations that provided you with entertainment or gifts (more than \$50) in 2016.

Name of provider	City	State

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I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete, and correct to the best of my knowledge, information, and belief. In the event this Statement of Economic Interests is filed prior to December 31st for an election in the following year, I certify that I will amend it on or before the statutory filing deadline if an amendment is necessary to bring it into conformity with the true statement of my economic interests as of December 31, 2016. **If any part has been left blank, I have done so intentionally because there is nothing to report.**

Daytime phone # 608-314-4584
 Signature of person filing [Signature] Date 1-5-17 E-mail address DRLHOLTZ@yahoo.com

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