

2. **BUSINESS ACTIVITIES.** List businesses, farms, rental, commercial, and income-producing real estate; and business activities in which you or your family had at least a 10% or greater interest.

a) **Enterprise(s) operating under a business or trade name, list here.**

Name of business	Municipality or Town	County	State	Describe nature of business
BrainDance, LLC	Mount Horeb	Dane	WI	Educational Consulting

b) **Enterprise(s) NOT operating under a business or trade name, list here.**

Street address or fire number	Municipality or Town	County	State	Describe nature of business
none				

3. **COMMERCIAL CUSTOMERS, CLIENTS, AND TENANTS.** For each unincorporated business, subchapter S corporation, service corporation (SC), limited liability company (LLC), partnership, or income-producing real estate reported in Item 2, from which the filer or a member of the filer's immediate family received \$10,000 or more in 2016, list businesses, organizations, and lobbyists that paid the enterprise \$10,000 or more in calendar year 2016.

Check if the organization authorized you to represent it in its dealings with others as an attorney-at-law, agent, spokesperson, or representative.

Businesses, organizations, lobbyists that were customers, clients, or tenants	City	State	"√"
None			

4. **BUSINESS PARTNERS.** For each enterprise reported under Item 2, list its co-owners, partners, officers, and directors (other than yourself), unless the information is already registered with the Wisconsin Department of Financial Institutions.

Business	Partners, or officers and directors	City	State
BrainDance, LLC	John Humphries and Kay Rhode	Mount Horeb	WI

5. **NON-COMMERCIAL REAL ESTATE.** List the specific location of WISCONSIN REAL ESTATE in which you or your family had an interest (except your principal residence and real estate whose location you listed in item 2).

LOCATION OF PROPERTY			NATURE OF INTEREST (own, lease, option, easement, land contract)
Street address or fire number	Municipality Or Town	County	
7285 Gundersen Lane	Stone Lake	Sawyer	Own 8.33% interest

6. **OFFICERS AND DIRECTORS.** List organizations of which you or a family member was an officer or director (unless listed in item #2.)

Business or organization	City	State	Position
Mount Horeb Community Foundation	Mount Horeb	WI	John Humphries serves on Board of Directors
Mount Horeb Nordic Ski Club	Mount Horeb	WI	Kay Rhode serves as Secretary

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	
			\$50,000 or less	More than \$50,000
Middleton Community Bank	Middleton	WI		X
BP Visa	Atlanta	GA	X	
UW Credit Union	Madison	WI	X	
Great Lakes Higher Education Corporation	Madison	WI		X
Toyota Financial	Torrance	CA	X	

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
Dodgeville School District	Dodgeville	WI	John employed as administrator
WI DPI School for the Blind	Janesville	WI	Kay employed as O & M Specialist for blind kids
University of Minnesota	Minneapolis	MN	son was research assistant in Horticulture
Michigan Technological University	Houghton	MI	son employed as assistant in outdoor program
Hennepin County Election Board	Minneapolis	MN	son employed as elections assistant

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
Nature's Way Greenhouse (son's summer job)	Lodi	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
None		

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
None			

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.**

Signature of person filing: *[Signature]* Date: *1/5/17* Daytime phone #: *608-438-6109* E-mail address: *john@dumphriesforschools.org*

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.

