

FORM 1

**STATEMENT OF
FINANCIAL INTERESTS**

2019

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICE USE ONLY:

Recvd 2020 JUN 08 PM 12:06

LAST NAME -- FIRST NAME -- MIDDLE NAME :
Steiner Michael John

MAILING ADDRESS :
785 Oakleaf Plantation Parkway
Unit 1123

CITY : ZIP : COUNTY :
Orange Park 32065 Clay

NAME OF AGENCY :
Middle Village Community Development District (CDD)

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
Supervisor (Seat 2)

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

****** THIS SECTION MUST BE COMPLETED ******

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2019.

MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (**must check one**):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR **DOLLAR VALUE THRESHOLDS**

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]
(If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
See Attached Sheet		

PART B -- SECONDARY SOURCES OF INCOME
[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions]
(If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]
(If you have nothing to report, write "none" or "n/a")

N/A

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]
 (If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
See Attached Sheet	

PART E — LIABILITIES [Major debts - See instructions]
 (If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
See Attached Sheet	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]
 (If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
	ADDRESS OF BUSINESS ENTITY	N/A
PRINCIPAL BUSINESS ACTIVITY		
POSITION HELD WITH ENTITY		
DO I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

PART G — TRAINING

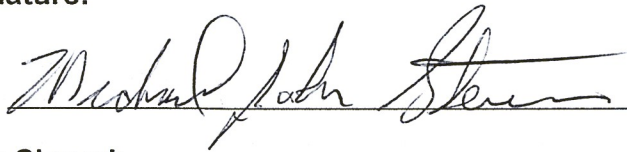
For elected municipal officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE OF FILER:

Signature:



Date Signed:

5/27/2020

CPA or ATTORNEY SIGNATURE ONLY

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: _____

Date Signed: _____

FILING INSTRUCTIONS:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file **within 30 days** of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2019.

Part A :

Pension

State Street Retiree Services For Lockheed Martin Master Retirement Trust
P.O. Box 18020, Norfolk, VA 23501-1848

Aerospace, Defense, Security, and Advanced Technologies

Social Security

Social Security Administration
Southeastern Program Service Center
1200 Rev Abraham Woods, Jr. Blvd
Birmingham, AL 35285-0001

Retirement

IRA RMD Distribution

Raymond James & Associates, Inc.
880 Carillon Parkway
Saint Petersburg, FL 33718

Investment Services

IRA RMD Distribution

State Street Retiree Services For Lockheed Martin Salaried Saving Plan
P.O. Box 55772, Boston, MA 02205-5772

Investment Services

Part D :

Peck Bulgin of Raymond James

IRA

Open-end Fund	ALLIANZGI SHORT DURATION HIGH INCOME FD
Open-end Fund	AMERICAN CENTURY HIGH INCOME FUND
Open-end Fund	BLACKROCK STRATEGIC INCOME OPP PORT FUND
Open-end Fund	COHEN & STEERS REAL ESTATE SECURITIES FUND
Open-end Fund	DODGE & COX INCOME FUND
Open-end Fund	EATON VANCE GLOBAL MACRO ABSOLUTE RETURN
Open-end Fund	FIRST EAGLE GLOBAL FUND
Open-end Fund	JANUS HENDERSON INTL OPPORTUNITIES FUND
Open-end Fund	JPMORGAN U.S. EQUITY FUND
Open-end Fund	CLEARBRIDGE APPRECIATION FUND
Open-end Fund	CLEARBRIDGE AGGRESSIVE GROWTH FUND
Open-end Fund	MORGAN STANLEY GLOBAL FIXED INCOME OPPORTUNITIES
Open-end Fund	MSIF GROWTH PORTFOLIO
Open-end Fund	PIMCO LONG-TERM REAL RETURN FUND
Open-end Fund	ROYCE TOTAL RETURN FUND
Open-end Fund	TRANSAMERICA SHORT-TERM BOND FUND
Exchange-Traded Funds	ISHARES TR CORE US AGGBD
Exchange-Traded Funds	ISHARES TR CORE US AGGBD ETF
Exchange-Traded Funds	ISHARES TR BARCLAYS 7 10 YR
Exchange-Traded Funds	ISHARES TR MIN VOL USA ETF
Exchange-Traded Funds	ISHARES TR MIN VOL EAFE ETF
Exchange-Traded Funds	ISHARES TR MSCI MIN VOL ETF
Exchange-Traded Funds	SPDR GOLD SHARES
Exchange-Traded Funds	SPDR S&P MIDCAP 400 ETF TRUST
Exchange-Traded Funds	INVESCO S&P 500 EQUAL WEIGHT ETF
Alternative Mutual Funds	BLACKROCK EVENT DRIVEN EQUITY FUND
Alternative Mutual Funds	PIMCO COMMODITY REAL RETURN STRATEGY FUND

Lockheed Martin Corp

PSP 401K

ESOP (Stock)	Lockheed Martin Corp
Mutual Fund	S&P Indexed Equity Fund
Mutual Fund	Small/Mid-Cap Indexed Equity Fund
Mutual Fund	Stable Value Fund
Mutual Fund	U.S. Equity Fund

Capital One

Savings

Cash

Part E :

Wells Fargo Bank N.A.
P.O. Box 14411, Des Moines, IA 50306-3411

Subaru Motors Finance C/O Chase
P.O. Box 9001083 Louisville, KY 40290-1083