

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

OF FINANCIAL INTERESTS

FOR OFFICE USE ONLY:

RECEIVED

2022 JUN 13 PM 4:52

MIAMI-DADE COUNTY
ELECTIONS DEPARTMENT

LAST NAME — FIRST NAME — MIDDLE NAME:

Macki Kevin Michael

MAILING ADDRESS:

16420 Stonehaven Rd.

CITY: ZIP: COUNTY:

Miami Lakes 33014 Miami Dade

NAME OF AGENCY:

Miami Dade Public Schools

NAME OF OFFICE OR POSITION HELD OR SOUGHT: Member

Miami-Dade School Board, District 4

CHECK IF THIS IS A FILING BY A CANDIDATE

PART A -- NET WORTH

Please enter the value of your net worth as of December 31, 2021 or a more current date. [Note: Net worth is not calculated by subtracting your reported liabilities from your reported assets, so please see the instructions on page 3.]

My net worth as of June 12, 2022 was \$ 953,012.94

PART B -- ASSETS

HOUSEHOLD GOODS AND PERSONAL EFFECTS:

Household goods and personal effects may be reported in a lump sum if their aggregate value exceeds \$1,000. This category includes any of the following, if not held for investment purposes: jewelry; collections of stamps, guns, and numismatic items; art objects; household equipment and furnishings; clothing; other household items; and vehicles for personal use, whether owned or leased.

The aggregate value of my household goods and personal effects (described above) is \$ 27,200

ASSETS INDIVIDUALLY VALUED AT OVER \$1,000:

DESCRIPTION OF ASSET (specific description is required - see instructions p.4)	VALUE OF ASSET
See attached	

PART C -- LIABILITIES

LIABILITIES IN EXCESS OF \$1,000 (See instructions on page 4):

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
Chase, 700 Kansas Lane Monroe, LA 71203	\$137,653
Wells Fargo, 420 Montgomery St. San Fran, CA 94104	\$179,290
AES Student Loan, PO Box 2461 Harrisburg, PA 17106	\$14,974

JOINT AND SEVERAL LIABILITIES NOT REPORTED ABOVE:

NAME AND ADDRESS OF CREDITOR	AMOUNT OF LIABILITY
N/A	

PART D -- INCOME

Identify each separate source and amount of income which exceeded \$1,000 during the year, including secondary sources of income. Or attach a complete copy of your 2021 federal income tax return, including all W2s, schedules, and attachments. Please redact any social security or account numbers before attaching your returns, as the law requires these documents be posted to the Commission's website.

I elect to file a copy of my 2021 federal income tax return and all W2's, schedules, and attachments.
 [If you check this box and attach a copy of your 2020 tax return, you need not complete the remainder of Part D.]

PRIMARY SOURCES OF INCOME (See instructions on page 5):

NAME OF SOURCE OF INCOME EXCEEDING \$1,000	ADDRESS OF SOURCE OF INCOME	AMOUNT
Horeb Christian School	795 W 68th St Hialeah, FL 33014	\$84,000

SECONDARY SOURCES OF INCOME [Major customers, clients, etc., of businesses owned by reporting person--see instructions on page 5]:

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

PART E -- INTERESTS IN SPECIFIED BUSINESSES [Instructions on page 6]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

PART F - TRAINING

This section applies only to officers required to complete annual ethics training pursuant to section 112.3142, F.S. [See instructions p. 6]

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

OATH

I, the person whose name appears at the beginning of this form, do depose on oath or affirmation and say that the information disclosed on this form and any attachments hereto is true, accurate, and complete.

STATE OF FLORIDA
 COUNTY OF Miami-Dade

Sworn to (or affirmed) and subscribed before me by means of
 physical presence or online notarization, this 13 day of

June, 2022 by Kevin Macki

Alex Heff
 (Signature of Notary Public--State of Florida)

ALEX HEFF
 (Print, Type, or Stamp Commissioned Name of Notary Public)
 Commission # 61
 Expires September 6
 Bonded Thru Budget Notary

Personally Known OR Produced Identification _____

Type of Identification Produced _____

SIGNATURE OF REPORTING OFFICIAL OR CANDIDATE

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 6 in accordance with Art. II, Sec. 8, Florida Constitution, Section 112.3144, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

 Signature Date

Preparation of this form by a CPA or attorney does not relieve the filer of the responsibility to sign the form under oath.

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

Part B

Kevin M. Macki - Form 6 Assets Detail	
Assets	Value
Household goods & personal effects	\$27,200
16420 Stonehaven Road	\$700,000
7235 W. Miami Lakes Dr. #C2	\$287,000
Bank of America Checking	\$12,651
Bank of America Savings	\$131,321
Merrill Lynch IRA	\$31,125
Merill Lynch Brokerage Account (stock details below):	
ABBVIE INC SHS	\$1,718
BANK OF AMERICA CORP	\$43,320
INNOVIZ TECHNOLOGIES LTD	\$114
LUMINAR TECHNOLOGIES INC	\$3,428
META PLATFORMS INC	\$43,893
NIKOLA CORP	\$713
ROCKET COMPANIES INC	\$1,612
XENETIC BIOSCIENCES INC	\$78
ML DIRECT DEPOSIT PROGRM	\$757
Asset Total	\$1,284,929.60

RECEIVED
 2022 JUN 13 PM 4:52
 MIAMI-DADE COUNTY
 ELECTIONS DEPARTMENT