



# Conflict of Interest

## CANDIDATE

### Statement of Financial Interest

RECEIVED  
CITY CLERK'S OFFICE  
12:04 p.m. 2/6/18  
Date Time File DATE

**FILED**  
2/6/18

**Candidates who files:**

**State and Federal Office** candidates (United States Senate, United States House of Representatives, Governor, State Legislator, circuit court judge and Supreme Court Justice [SDCL 12-25-28](#));

**Convention Nominee** candidates (Lieutenant Governor, state treasurer, attorney general, secretary of state, state auditor, public utilities commissioner, commissioner of school and public lands [SDCL 12-25-29](#)), and

**Local Office** candidates (county commissioner, school board member in a school district with a total enrollment of more than 2,000 students, or commissioner, council member, or mayor in any 1<sup>st</sup> class municipality [SDCL 12-25-30](#))

**Deadline to file:** Within 15 days after filing nominating petitions (Supreme Court Justice files within 15 days of notifying Secretary of State of his intention to place his name on the retention ballot) or certification of convention nomination.

**File with:** The Secretary of State **except local candidates** file with the office where they file their nominating petition.

**Please print:**

Full Name RICK KILEY

Complete Address 3809 S. Lisanne Avenue, Sioux Falls SD 57103

Office Sought (list District number if applicable) Sioux Falls City Council Southeast District

What is your occupation/profession? Retired Teacher / Safety Specialist

List any source of funds (business or economic relationship) which contributes **more than 10%** of or **more than \$2,000** to your family's (includes spouse, minor children living at home) **gross income** in the preceding calendar year. This also includes any enterprise in which you or an immediate family member(s) **controls more than 10% of the capital or stock**. Identify who receives the income from each enterprise but do not include the value. ([SDCL 12-25-27](#))

*\*The intent of this form is to collect specific information, not generalities. Do not put N/A or leave the grid blank.*

Name of Candidate or Family Member	Name the Source of Funds (Ex: current employer, SD Legislature, 401K, benefits, etc.)	Relationship to funds (Ex: employee, officer, director, associate, partner, shareholder, owner, member, proprietor, etc.)
Rick Kiley	South Dakota Safety Council	Program Director
Rick Kiley	South Dakota Retirement	Shareholder
Rick Kiley	American Enterprise Investment Services	Shareholder
Rick Kiley	City of Sioux Falls	City Councilor
Donna Kiley	Avera McKennan Hospital	Employee
Donna Kiley	American Enterprise Investment Services	Shareholder

I declare and affirm under the penalties of perjury that the information above has been examined by me and to the best of my knowledge and belief is a true, correct and complete representation of myself and my immediate family's financial interests for the preceding calendar year.

Richard D. Kiley  
(Signature)

2/6/2018  
(Date)