MARY ANN SULLIVAN (Name) | H097 (District) | DEMOCRAT (Party Affiliation)

HOUSE OF REPRESENTATIVES OF THE STATE OF INDIANA

STATEHOUSE
INDIANAPOLIS, INDIANA 46204

STATEMENT OF ECONOMIC INTERESTS
FOR THE CALENDAR YEAR 2010

This statement shall be filed by members not later than seven (7) days following the first session day in January of each year and covers only activity occurring in the preceding calendar year. Non-incumbent candidates for the General Assembly must file this statement before filing a declaration of candidacy. All statements shall be filed with the Principal Clerk of the House, Room 3A-8, Third Floor Statehouse, Indianapolis, Indiana 46204.

Additional pages may be used, if necessary. See I.C. 2-2.1-3-2 for clarification of the questions.

Select one:

Incumbent legislator (x) X Legislative candidate (x) _____

1. List the name of your employer(s) and the employer(s) of your spouse and the nature of the employer's business. "Employer" means any person or entity from whom the member of or candidate for the Indiana General Assembly or his or her spouse received more than 33% of his non-legislative income.

Name of Employer	Nature of Business	Your Employer (x)	Spouse's Employer (x)
SELF	EDUCATION CONSULTANT	X	
SHIEL SEXTON CO, INC	CONSTRUCTION		X

2. List the name of every sole proprietorship or professional practice operated by you or your spouse and the nature of the business.

Name of Business	Nature of Business	Your Business (x)	Spouse's Business (x)

3. List the name of every partnership and limited liability company of which you or your spouse are a member and the nature of the business.

Name of Business	Nature of Business	Your Business (x)	Spouse's Business (x)
SHIEL SEXTON CO., INC			X
SEE ATTACHED			

4. List the name of any corporation of which you or your spouse are an officer or director and the nature of the corporation's business. Churches need not be listed.

Name of Business	Nature of Business	Your Business (x)	Spouse's Business (x)
SHIEL SEXTON CO., INC.	CONSTRUCTION		X

5. List the name of any corporation in which you, your spouse or unemancipated child own stock or stock options having a fair market value in excess of $10,000. No time or demand deposit in a financial institution or an insurance policy need be listed.

Name of Business	Your Stock (x)	Spouse's Stock (x)	Children's Stock (x)
SHIEL SEXTON CO., INC.		X	
SEE ATTACHED			

6. List the name of any state agency or the Supreme Court of Indiana which licenses or regulates any of the following: (a) your profession or occupation, (b) your spouse's profession or occupation, or (c) any proprietorship, partnership, corporation or limited liability company listed under items 2, 3, or 4. Also, list the nature of licensure or regulation. The requirement to file certain parts with the Indiana Secretary of State or to register with the Indiana Department of Revenue as a retail merchant, manufacturer or wholesaler shall not be considered licensure or regulation.

Name of State Agency	Nature of Licensure	Profession or Occupation (x)		Business listed under No. 2, 3 or 4 (x)	
		You	Spouse	You	Spouse

7. List the name of any lobbyist: (a) who is a member of a partnership or limited liability company of which you are a partner or member or employee or (b) who is an officer or director of a corporation of which you are an officer, director or employee or (c) who is a manager of a limited liability company of which you are a member or employee. Describe the legislative matters which are the object of the lobbyist's activity.

Name of Lobbyist	Legislative Matters Which are the Object of the Lobbyist's Activity	Your Connection

8. List the name of any person or entity on whose behalf you have appeared before, contacted or transacted business with any state agency or official thereof. List also the name of the state agency, the nature of the appearance and the cause number, if any. This does not apply when the services are rendered without compensation. "State agency" does not include state-supported colleges or universities or the agencies of any municipality or political subdivision of the state.

Name of Person	Name of State Agency	Nature of Contact, Appearance, Etc.	Cause No.

I certify that the foregoing is true, accurate and complete, as I am verily informed and believe.

Mary Ann Sullivan
Signature

315 W. WALNUT ST.
Address

INDIANAPOLIS 46202
City

317-917-0791
Telephone Number

Filed with the Principal Clerk of the
Indiana House of Representatives
This 12 day of January, 2011.

Lori Kulgatto Deputy Clerk
Name, Title

QUESTION 3

Statement of Economic Interests for the Calendar Year 2010

Attachment for Question #3

Name of Business	Nature of Business	Your Business (x)	Spouse's Business (x)
Shiel Sexton Company, Inc.	Construction		X
Renaissance Bay Associates, LLC	Real Estate		X
Shiel Sexton Real Estate, LLC	Real Estate		X
Donegal Properties Investments, LLC	Real Estate		X
Lexington1214, LLC	Real Estate		X
1300 Lexington Partners, LLC	Real Estate		X
Lexington Gap Partners, LLC	Real Estate		X
SSD Investments, LLC	Real Estate		X
S-D Investments No. 1, LLC	Real Estate		X
SSD Life, LLC	Life Insurance Holding Company		X
Sun Shiel Properties, LLC	Real Estate		X

QUESTION 5

Position	Ownership	
Equity	Your Stock	Spouse's Stock
AAPL - Apple Inc	x	
BAC - Bank of America Corp	x	
BAX - Baxter International Inc	x	
CSCO - Cisco Systems Inc	x	
EMR - Emerson Electric Co	x	
XOM - Exxon Mobil Corporation	x	
GPC - Genuine Parts Co	x	
EEM - Ishares MSCI Emerging Markets Index	x	x
KFT - Kraft Foods Inc	x	
MSFT - Microsoft Corp	x	
NEE - Nextera Energy Inc	x	
PEP - Pepsico Inc	x	
PFE - Pfizer Inc	x	
PCG - PG&E Corp	x	
PG - Procter & Gamble Co	x	
V - Visa Inc	x	
DSCVX - Dreyfus Opportunistic Small Cap	x	
HAINX - Harbor International	x	x
JCAPX - Janus Forty Fund	x	x
MQIFX - Franklin Mutual Quest		x
WMNIX - Wells Fargo Advantage Small Cap	x	
TGBAX - Templeton Global Bond Fund	x	x
LSIIX - Loomis Sayles Investment Grade Bond Fund		x
Fixed Income	Your Stock	Spouse's Stock
Collier County, FL	x	
Washington County, TN	x	
Alaska St HSG Fin Corp	x	
Idaho HSG & Fin Assn	x	
New Jersey St Transn Tr	x	
Upper Occoquan Sew Auth, VA	x	
MLGHE - BAC ARN MXEA	x	x
MLGER - BAC ARN RICIGLER	x	
MLGBG - BAC CLIRN GOLD SPOT	x	
MLGAL - BAC CLIRN ROGRER	x	
MLGGE - EKSPORT BEAR ARN SPX	x	x
MLGFR - SEK ARN GOLD SPOT	x	
TEMPI11 - Advisors Disciplined 492 Tax Exempt Muni Port	x	
ITEM01 - Advisors Disciplined 288 Insured Tax Exempt Munic Port	x	