Virginia Conflict of Interest and Ethics Advisory Council
STATE AND LOCAL
STATEMENT OF ECONOMIC INTERESTS

NAME: Amy B. Jackson			
OFFICE OR POSITION HELD OR SOUGHT: Alexandria City Council Member		AGENCY NAME: City of Alexandria	ARE YOU FILING THIS FORM AS A CANDIDATE FOR ELECTION TO THIS OFFICE? ○ YES ◉ NO
BUSINESS ADDRESS:	STREET: 4012 Ellicott Street		TELEPHONE:
	CITY: Alexandria	STATE: Virginia	ZIP: 22304-1012
	OFFICE:	HOME: (703) 597-9439	
EMAIL ADDRESS: Amy4alexandria@gmail.com			
FIRST AND LAST NAMES OF MEMBERS OF IMMEDIATE FAMILY: Amy B. Jackson; Blaine C. Jackson, Jr.; Minor Child A; Minor Child B			

Online filings: **This Statement of Economic Interests will be available to the public via the searchable database on the Virginia Conflict of Interest and Ethics Advisory Council website, as required by § 30-356.**

***Local paper filings*: This Statement of Economic Interests is open for public inspection, as required by § 2.2-3115.**

REPORT TO THE BEST OF INFORMATION AND BELIEF Information required on this Statement must be provided on the basis of the best knowledge, information, and belief of the individual filing the Statement as of the date of this report.

AFFIRMATION

I swear or affirm that the information provided on this statement is full, true, and correct to the best of my knowledge.

Amy B. Jackson
Signature of Officer or Employee

January 31, 2021
Date

Any filer who knowingly and intentionally makes a false statement of a material fact on the Statement of Economic Interests is guilty of a Class 5 felony.

FOR OFFICE USE ONLY

Date Received: 2.1.21

Received By: KWalker

Virginia Conflict of Interest and Ethics Advisory Council
STATE AND LOCAL
STATEMENT OF ECONOMIC INTERESTS

NAME: Amy B. Jackson			
OFFICE OR POSITION HELD OR SOUGHT: Alexandria City Council Member		AGENCY NAME: City of Alexandria	ARE YOU FILING THIS FORM AS A CANDIDATE FOR ELECTION TO THIS OFFICE? ○ YES ◉ NO
BUSINESS ADDRESS:	STREET: 4012 Ellicott Street	TELEPHONE:	
	CITY: Alexandria; STATE: Virginia; ZIP: 22304-1012	OFFICE:	HOME: (703) 597-9439
EMAIL ADDRESS: Amy4alexandria@gmail.com			
FIRST AND LAST NAMES OF MEMBERS OF IMMEDIATE FAMILY: Amy B. Jackson; Blaine C. Jackson, Jr.; Minor Child A; Minor Child B			

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Date

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FOR OFFICE USE ONLY

Date Received: 2.1.21

Received By: KWatts

State and Local Statement of Economic Interests

SCHEDULE A

OFFICES, DIRECTORSHIPS, AND EMPLOYMENT

NAME: Amy B. Jackson

QUESTIONS:

1. Do you or a member of your immediate family receive remuneration, benefits, or compensation for service as an officer or director of a business?

Yes ○ No ◉ ***If yes, complete the table for each such business.***

2. Do you or a member of your immediate family receive salary or wages in excess of $5,000 annually from any employer? DO NOT INCLUDE salary received from a state or local governmental or advisory agency.

Yes ◉ No ○ ***If yes, complete the table for each such employer.***

INSTRUCTIONS:

Disclose each:

- Business of which you or a member of your immediate family is an officer or director and receives remuneration, benefits, or compensation for service as an officer or director
- Employer paying you or a member of your immediate family salary or wages in excess of $5,000 annually

NAME OF BUSINESS OR EMPLOYER	LOCATION OF BUSINESS OR EMPLOYER (CITY OR COUNTY, AND STATE)	POSITION HELD	BY WHOM	Check whether Office or Directorship OR Employment	
				OFFICE OR DIRECTORSHIP	EMPLOYMENT
US Department of Justice	Washington, DC	HR Specialist	Blaine C. Jackson, Jr.	☐	☑
				☐	☐
				☐	☐
				☐	☐
				☐	☐

State and Local Statement of Economic Interests

SCHEDULE B
PERSONAL DEBTS

NAME: Amy B. Jackson

QUESTIONS:

1. Do you owe more than $5,000 to any one creditor, including any contingent debt to any one creditor?

DO NOT INCLUDE any debt owed to any government or any loan secured by a recorded lien on property if such lien is at least equal to the value of the loan.

Yes ☐ No ☑ ***If yes, complete Table(s) 1A, 1B, and/or 1C***

2. Does a member of your immediate family owe more than $5,000 to any one creditor, including any contingent debt to any one creditor?

DO NOT INCLUDE any debt owed to any government or any loan secured by a recorded lien on property if such lien is at least equal to the value of the loan.

Yes ☑ No ☐ ***If yes, complete Table(s) 2A, 2B, and/or 2C***

State and Local Statement of Economic Interests

SCHEDULE B

PERSONAL DEBTS

NAME: Amy B. Jackson

TABLES 1A, 1B, and 1C

INSTRUCTIONS:

Disclose personal debts, including contingent debts, owed by you to each category of creditor by checking the appropriate category listed in TABLE 1A. To calculate the amount of personal debt to disclose for each category of creditor, include all debts owed to creditors within each category, but DO NOT INCLUDE any debt owed to any one creditor in an amount of $5,000 or less.

If you owe a personal debt to a business creditor that is not included in any category of creditor listed in TABLE 1A, disclose such debt in TABLE 1B. List the name of the business creditor and its principal business activity.

If you owe a personal debt to an individual creditor, disclose such debt in TABLE 1C. Identify the name of the individual creditor and his principal business or occupation.

If you owe a personal debt jointly with another person who is not a member of your immediate family, disclose only your share of the debt.

If you owe a personal debt jointly with a member of your immediate family, diclose any such debt in TABLE 1A, 1B, or 1C, as appropriate, as if you are solely liable for the total amount of the debt, and DO NOT DISCLOSE such debt in TABLE 2A, 2B, or 2C.

DO NOT REPORT:

- Any debt owed to any one creditor in an amount of $5,000 or less
- Any debt owed to any government, including student loans held by the United States federal government
- Any loan secured by a recorded lien on property if such lien is at least equal to the value of the loan

State and Local Statement of Economic Interests

SCHEDULE B
PERSONAL DEBTS

NAME: Amy B. Jackson

My personal debts are as follows:

Table 1A. Creditor categories:

CHECK APPROPRIATE CATEGORIES	AMOUNT OF PERSONAL DEBT (check one)	
	$5,001 to $50,000	MORE THAN $50,000
Banks, credit unions, and other savings institutions	☐	☐
Other loan or finance companies	☐	☐
Issuers of credit cards	☑	☐
Insurance companies	☐	☐
Stock, commodity, or other brokerage companies	☐	☐
Private educational institutes	☐	☐

Table 1B. Other business creditors:

NAME OF CREDITOR	CREDITOR'S PRINCIPAL BUSINESS ACTIVITY	AMOUNT OF PERSONAL DEBT (check one)	
		$5,001 to $50,000	MORE THAN $50,000
		☐	☐
		☐	☐
		☐	☐

Table 1C. Individual Creditors:

NAME OF CREDITOR	CREDITOR'S PRINCIPAL BUSINESS OR OCCUPATION	AMOUNT OF PERSONAL DEBT (check one)	
		$5,001 to $50,000	MORE THAN $50,000
		☐	☐
		☐	☐
		☐	☐

State and Local Statement of Economic Interests

SCHEDULE B
PERSONAL DEBTS

NAME: Amy B. Jackson

TABLES 2A, 2B, and 2C

INSTRUCTIONS:

Disclose personal debts, including contingent debts, owed by a member of your immediate family to each category of creditor by checking the appropriate category listed in TABLE 2A. To calculate the amount of personal debt to disclose for each category of creditor, include all debts owed to creditors within each category, but DO NOT INCLUDE any debt owed to any one creditor in an amount of $5,000 or less.

If a member of your immediate family owes a personal debt to a business creditor that is not included in any category of creditor listed in TABLE 2A, disclose such debt in TABLE 2B. List the name of the business creditor and its principal business activity.

If a member of your immediate family owes a personal debt to an individual creditor, disclose such debt in TABLE 2C. Identify the name of the individual creditor and his principal business or occupation.

If a member of your immediate family owes a personal debt jointly with another person not yourself who is not a member of your immediate family, disclose only his share of the debt.

If you owe a personal debt jointly with a member of your immediate family, report any such debt in TABLE 1A, 1B, or 1C, as appropriate, as if you are solely liable for the total amount of the debt, and DO NOT DISCLOSE such debt in TABLE 2A, 2B, or 2C.

DO NOT REPORT:

- Any debt owed to any one creditor in an amount of $5,000 or less
- Any debt owed to any government, including student loans held by the United States government
- Any loan secured by a recorded lien on property if such lien is at least equal to the value of the loan

State and Local Statement of Economic Interests

SCHEDULE B
PERSONAL DEBTS

NAME: Amy B. Jackson

The personal debts of members of my immediate family are as follows:

Table 2A. Creditor categories:

CHECK APPROPRIATE CATEGORIES	AMOUNT OF PERSONAL DEBT (check one)	
	$5,001 to $50,000	MORE THAN $50,000
Banks, credit unions, and other savings institutions	☐	☐
Other loan or finance companies	☐	☐
Issuers of credit cards	☑	☐
Insurance companies	☐	☐
Stock, commodity, or other brokerage companies	☐	☐
Private educational institutes	☐	☐

Table 2B. Other business creditors:

NAME OF CREDITOR	CREDITOR'S PRINCIPAL BUSINESS ACTIVITY	AMOUNT OF PERSONAL DEBT (check one)	
		$5,001 to $50,000	MORE THAN $50,000
		☐	☐
		☐	☐
		☐	☐

Table 2C. Individual Creditors:

NAME OF CREDITOR	CREDITOR'S PRINCIPAL BUSINESS OR OCCUPATION	AMOUNT OF PERSONAL DEBT (check one)	
		$5,001 to $50,000	MORE THAN $50,000
		☐	☐
		☐	☐
		☐	☐

State and Local Statement of Economic Interests

SCHEDULE C
SECURITIES

NAME: Amy B. Jackson

QUESTION:

Do you or a member of your immediate family, separately or together, own securities valued in excess of $5,000 invested in one business or Virginia governmental entity?

INCLUDE securities held in (i) trusts; (ii) individual retirement arrangements (IRAs); (iii) defined contribution plans, including plans established in accordance with sections 401, 403, or 457 of the Internal Revenue Code; and (iv) any other type of investment account.

INCLUDE securities not held in your name or the name of a member of your immediate family if you or a member of your immediate family retains the right to control such securities or the right to receive the income from such securities.

Yes ◉ No ○ ***If yes, complete the table for each such security.***

INSTRUCTIONS:

Disclose each business or Virginia governmental entity in which you or a member of your immediate family, separately or together, own securities valued in excess of $5,000.

INCLUDE securities held in (i) trusts; (ii) individual retirement arrangements (IRAs); (iii) defined contribution plans, including plans established in accordance with sections 401, 403, or 457 of the Internal Revenue Code; and (iv) any other type of investment account.

INCLUDE securities not held in your name or the name of a member of your immediate family if you or a member of your immediate family retains the right to control such securities or the right to receive the income from such securities.

"Securities" INCLUDES:
- Stocks
- Bonds
- Mutual funds
- Limited partnerships
- Commodity futures contracts

"Securities" EXCLUDES:
- Defined benefit plans, including pension plans
- Certificates of deposit
- Money market funds
- Annuity contracts
- Insurance policies
- Securities issued by the U.S. government or other government securities not issued by the Commonwealth or its political subdivisions.

State and Local Statement of Economic Interests

SCHEDULE C
SECURITIES

NAME: Amy B. Jackson

List the issuer and type of each security. List separately each security held in an IRA, defined contribution plan, or other type of investment account, if such security is valued in excess of $5,000.

For defined contribution plans administered by the Commonwealth or its political subdivisions, list the administering agency as the issuer of the security, unless the security is held in a self-directed brokerage account, in which case list the issuer of the security.

NAME OF ISSUER OF SECURITY	TYPE OF SECURITY (STOCKS, BONDS, MUTUAL FUNDS, IRA, ETC.)	VALUE OF SECURITY (Check one)		
		$5,001 to $50,000	$50,001 to $250,000	MORE THAN $250,000
Southern Companies	Stock	☑	☐	☐
Dominion Energy	Stock	☑	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐

State and Local Statement of Economic Interests

SCHEDULE D
BUSINESS INTERESTS AND RENTAL PROPERTY

NAME: Amy B. Jackson

QUESTIONS:

1. Do you or a member of your immediate family own, separately or together, a business that has a value in excess of $5,000?

OR

Do you or a member of your immediate family, separately or together, have an interest in a business and the interest owned by you or a member of your immediate family has a value in excess of $5,000? DO NOT INCLUDE any securities disclosed on Schedule C.

Yes ☐ No ☑ ***If yes, complete Table 1.***

2. Do you or a member of your immediate family own, separately or together, a rental property that has a value in excess of $5,000?

OR

Do you or a member of your immediate family, separately or together, have an interest in a rental property and the interest owned by you or a member of your immediate family has a value in excess of $5,000?

Yes ☑ No ☐ ***If yes, complete Table 2.***

State and Local Statement of Economic Interests

SCHEDULE D
BUSINESS INTERESTS AND RENTAL PROPERTY

NAME: Amy B. Jackson

Table 1: Business Interests

Disclose each business owned by you or a member of your immediate family with a value in excess of $5,000 and each interest in a business owned by you or a member of your immediate family with a value in excess of $5,000. DO NOT REPORT any securities disclosed on Schedule C.

If the business is owned or operated under a trade, partnership, or corporate name, list that name. If the business is not owned or operated under a trade, partnership, or corporate name, describe the nature of the business.

NAME OF BUSINESS OR NATURE OF BUSINESS	LOCATION OF BUSINESS (CITY OR COUNTY, STATE, AND COUNTRY)	GROSS INCOME (CHECK ONE)		
		$50,000 or LESS	$50,001 to $250,000	MORE THAN $250,000
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐

Table 2: Rental Property

Disclose each rental property owned by you or a member of your immediate family with a value in excess of $5,000 and each interest in rental property owned by you or a member of your immediate family with a value in excess of $5,000.

List each rental property individually.

If the rental property is owned or recorded under a trade, partnership, or corporate name, list that name. **DO NOT LIST the street address for any rental property. No address will be redacted from this table.**

NAME IN WHICH RENTAL PROPERTY IS OWNED OR RECORDED	LOCATION OF RENTAL PROPERTY (CITY OR COUNTY, STATE, AND COUNTRY)	TYPE OF RENTAL PROPERTY (RESIDENTIAL, COMMERCIAL, ETC.)	GROSS INCOME (CHECK ONE)		
			$50,000 or LESS	$50,001 to $250,000	MORE THAN $250,000
Jackson Family Trust	Bethany Beach, Delaware	Residential	☑	☐	☐
			☐	☐	☐
			☐	☐	☐

State and Local Statement of Economic Interests

SCHEDULE E
REAL ESTATE

NAME: Amy B. Jackson

QUESTION:

Do you or a member of your immediate family, separately or together, hold an interest valued at more than $5,000 in real property? DO NOT INCLUDE your principal residence or any real estate disclosed on Schedule D. INCLUDE real estate held in trust.

Yes [ ] No [X] ***If yes, complete the table below.***

INSTRUCTIONS:
Disclose all real estate in which you or a member of your immediate family holds an interest valued at more than $5,000. List each parcel individually. INCLUDE real estate held in trust.

DO NOT REPORT:

- Your principal residence
- Any real estate disclosed on Schedule D

List only the city or county, state, and country where each real estate is located. **DO NOT LIST any street addresses. No addresses will be redacted from this schedule.**
List the name or names in which the real estate is owned or recorded. If you or a member of your immediate family holds an interest in the real estate but it is owned or recorded in a name other than your name or your immediate family member's name, list that name.

TYPE OF REAL ESTATE	LOCATION OF REAL ESTATE (CITY OR COUNTY, STATE, AND COUNTRY)	NAME OR NAMES IN WHICH REAL ESTATE IS OWNED OR RECORDED

State and Local Statement of Economic Interests

SCHEDULE F
PAYMENTS FOR TALKS, MEETINGS, AND CONFERENCES

NAME: Amy B. Jackson

QUESTION:

Did you receive in your capacity as an officer or employee of your agency any lodging, transportation, money, or other thing of value with a combined value exceeding $100 during the prior calendar year for:

- your presentation of a talk or series of talks at the same event, or participation in a meeting

  OR

- your attendance at a meeting, conference, or event where your attendance at the meeting, conference, or event was designed to educate you on issues relevant to your duties as an officer or employee of your agency, or to enhance your knowledge and skills relative to your duties as an officer or employee of your agency?

DO NOT INCLUDE:
- Payments and reimbursements from the Commonwealth or its political subdivisions for meetings attended in your capacity as an officer or employee of your agency
- Payments and reimbursements from an employer already listed on Schedule A or from a source of income listed on Schedule D
- Payments and reimbursements if you returned the payment or reimbursement within 60 days

INCLUDE a payment if you donated it to a charity and claimed or plan to claim it as a charitable deduction on your taxes.

Disclose any lodging, transportation, money, or other thing of value received that does not satisfy the criteria listed above as a gift on Schedule G.

Yes ☐ No ☑ ***If yes, complete the table below.***

State and Local Statement of Economic Interests

SCHEDULE F
PAYMENTS FOR TALKS, MEETINGS, AND CONFERENCES

NAME: Amy B. Jackson

INSTRUCTIONS:

Disclose each source from which you received in your capacity as an officer or employee of your agency lodging, transportation, money, or any other thing of value with a combined value exceeding $100 for:

- your presentation of a talk or series of talks at the same event, or participation in a meeting

  OR

- your attendance at a meeting, conference, or event where your attendance at the meeting, conference, or event was designed to educate you on issues relevant to your duties as an officer or employee of your agency, or to enhance your knowledge and skills relative to your duties as an officer or employee of your agency.

SOURCE OF PAYMENT	DESCRIPTION OF EVENT	LOCATION OF EVENT (CITY OR COUNTY, STATE, AND COUNTRY)	DATE(S) OF EVENT	TOTAL VALUE	CHECK IF YOU RECEIVED A TRAVEL WAIVER FROM THE COUNCIL FOR THIS EVENT
					☐
					☐
					☐
					☐
					☐
					☐
					☐

State and Local Statement of Economic Interests

SCHEDULE G
GIFTS

NAME: Amy B. Jackson

QUESTION:

Did you or a member of your immediate family receive from any (i) lobbyist; (ii) lobbyist's principal; or (iii) contractor any gift or combination of gifts with a value exceeding $50 during the prior calendar year??

For local officers and employees, a contractor is a person, organization, or business who is or is seeking to become a party to a contract with the local agency of which you are an officer or an employee.

For state officers and employees, a contractor is a person, organization, or business who is or is seeking to become a party to a contract with the state governmental or advisory agency of which you are an officer or an employee or over which you have the authority to direct such agency's activities.

DO NOT INCLUDE gifts with a value of less than $20. Such items are exempted from the definition of a gift and should not be aggregated together or reported.

Yes ☐ No ☑ ***If yes, complete the table below.***

State and Local Statement of Economic Interests

SCHEDULE G

GIFTS

NAME: Amy B. Jackson

INSTRUCTIONS:

Disclose each lobbyist, lobbyist's principal, or contractor that, during the prior calendar year, gave you or a member of your immediate family any gift or combination of gifts with a value exceeding $50.

Identify the recipient and donor of each such gift. Disclose the exact gift or event, the date on which you accepted it, and the value of the gift. If an exemption from the $100 gift cap established in § 2.2-3103.1 applies, mark the applicable exemption.

NAME OF RECIPIENT	NAME OF DONOR	EXACT GIFT OR EVENT	DATE ACCEPTED	VALUE	GIFT CAP EXEMPTION
					☐ Widely attended event ☐ Personal friend ☐ Archived gift from a foreign dignitary
					☐ Widely attended event ☐ Personal friend ☐ Archived gift from a foreign dignitary
					☐ Widely attended event ☐ Personal friend ☐ Archived gift from a foreign dignitary

State and Local Statement of Economic Interests

SCHEDULE H

PAYMENTS FOR REPRESENTATIONS AND OTHER SERVICES GENERALLY

NAME: Amy B. Jackson

QUESTIONS:

DO NOT COMPLETE Questions 1 and 2 if you are completing this disclosure statement in your capacity as an officer or employee of a LOCAL governmental or advisory agency.

PAYMENTS FOR REPRESENTATIONS BY YOU

1. Did you represent any business before any state governmental agency during the prior calendar year for which you received compensation in excess of $5,000 for such representation?

DO NOT INCLUDE compensation for the performance of other services unrelated to the representation before the state governmental agency when calculating the amount of compensation received from a business. If you have job responsibilities other than those involving such representation, you should prorate your salary to determine the portion attributable to your representation.

DO NOT REPORT any business that you represented before a court or judicial officer, or where the representation consisted solely of the filing of mandatory papers and any subsequent representation regarding the mandatory papers.

Yes [ ] No [X] ***If yes, complete Table 1.***

PAYMENTS FOR REPRESENTATIONS BY ASSOCIATES

2. Did persons with whom you have a close financial association represent any business before any state governmental agency during the prior calendar year for which compensation was received in excess of $5,000 for such representation?

DO NOT INCLUDE members of your immediate family when determining with which individuals you have a close financial association, unless you and your immediate family member are employed by or work for the same business or organization.

DO NOT INCLUDE compensation for the performance of other services unrelated to the representation when calculating the amount of compensation received from a business. If your associate has job responsibilities other than those involving such representation, you should prorate his salary to determine the portion attributable to his representation.

DO NOT REPORT any business that such persons represented before a court or judicial officer, or where the representation consisted solely of the filing of mandatory papers and any subsequent representation regarding the mandatory papers.

Yes [ ] No [X] ***If yes, complete Table 2.***

PAYMENTS FOR OTHER SERVICES GENERALLY

3. Did you or persons with whom you have a close financial association furnish services to any business operating in Virginia during the prior calendar year for which compensation was received in excess of $5,000 for such services?

DO NOT INCLUDE members of your immediate family when determining with which individuals you have a close financial association, unless you and your immediate family member are employed by or work for the same business or organization.

DO NOT INCLUDE compensation reported on Table 1 or Table 2 of this schedule.

Yes [ ] No [✔] ***If yes, complete Table 3.***

State and Local Statement of Economic Interests

SCHEDULE H
PAYMENTS FOR REPRESENTATIONS AND OTHER SERVICES GENERALLY

NAME: Amy B. Jackson

TABLE 1
PAYMENTS FOR REPRESENTATIONS BY YOU

DO NOT COMPLETE this table if you are completing this disclosure statement in your capacity as an officer or employee of a local governmental or advisory agency.

INSTRUCTIONS:

Disclose each business that you represented before any state governmental agency during the prior calendar year for which you received compensation in excess of $5,000 for such representation.

For each business, list the type of business, the name of the state governmental agency before which you appeared on behalf of the business, and the purpose of the representation.

DO NOT INCLUDE compensation for the performance of other services unrelated to the representation before the state governmental agency when calculating the amount of compensation received from a business.

DO NOT REPORT:

- Any business that you represented before a court or judicial officer
- Any business where the representation consisted solely of the filing of mandatory papers and any subsequent representation regarding the mandatory papers

TYPE OF BUSINESS	NAME OF AGENCY	PURPOSE OF REPRESENTATION	AMOUNT OF COMPENSATION RECEIVED		
			$5,001 to $50,000	$50,001 to $250,000	MORE THAN $250,000

State and Local Statement of Economic Interests

SCHEDULE H
PAYMENTS FOR REPRESENTATIONS AND OTHER SERVICES GENERALLY

NAME: Amy B. Jackson

TABLE 2
PAYMENTS FOR REPRESENTATIONS BY ASSOCIATES

DO NOT COMPLETE this table if you are completing this disclosure statement in your capacity as an officer or employee of a local governmental or advisory agency.

INSTRUCTIONS:

Disclose each business that persons with whom you have a close financial association represented before any state governmental agency during the prior calendar year for which compensation was received in excess of $5,000 for such representation.

For each business, list the type of business, the name of the state governmental agency before which such persons appeared on behalf of the business, and the purpose of the representation.

DO NOT INCLUDE compensation for the performance of other services unrelated to the representation when calculating the amount of compensation received from a business.

DO NOT REPORT:

- Any business that such persons represented before a court or judicial officer
- Any business where the representation consisted solely of the filing of mandatory papers and any subsequent representation regarding the mandatory papers

TYPE OF BUSINESS	NAME OF AGENCY	PURPOSE OF REPRESENTATION	AMOUNT OF COMPENSATION RECEIVED		
			$5,001 to $50,000	$50,001 to $250,000	MORE THAN $250,000

State and Local Statement of Economic Interests

SCHEDULE H
PAYMENTS FOR REPRESENTATIONS AND OTHER SERVICES GENERALLY

NAME: Amy B. Jackson

TABLE 3
PAYMENTS FOR OTHER SERVICES GENERALLY

INSTRUCTIONS:

Disclose each business operating in Virginia to which you or persons with whom you have a close financial association furnished services during the prior calendar year for which compensation was received in excess of $5,000 for such services.

Identify the businesses, by category, for which services were furnished and the type of service rendered to such businesses. To calculate the amount of compensation to report for each business category, include compensation received from all businesses within each category.

DO NOT INCLUDE compensation reported on Table 1 or Table 2 of this schedule.

BUSINESS CATEGORY	TYPE OF SERVICE RENDERED	AMOUNT OF COMPENSATION RECEIVED		
		$5,001 to $50,000	$50,001 to $250,000	MORE THAN $250,000
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐

State and Local Statement of Economic Interests

SCHEDULE I
REAL ESTATE CONTRACTS WITH GOVERNMENTAL AGENCIES

NAME: Amy B. Jackson

QUESTION:
Do you or a member of your immediate family, separately or together, hold an interest valued in excess of $5,000 in real estate that is the subject of a contract with a governmental agency?

State officers and employees report only contracts with state governmental agencies. Local officers and employees report only contracts with local governmental agencies. Constitutional officers report only contracts with local governmental agencies.

Yes ☐ No ☑ ***If yes, complete the table below.***

INSTRUCTIONS:
Disclose each contract with the applicable governmental agency for the sale, exchange, or leasing of real estate in which you or a member of your immediate family holds an interest valued in excess of $5,000.

"Interest" INCLUDES:
- Options
- Land contracts
- Easements
- Corporate, partnership, or trust interests

Disclose all contracts that are currently pending or that have been completed within the prior calendar year. Disclose all contracts regardless of the disclosure of the interest or the real estate on another schedule.
You do not need to disclose a contract for the leasing of real estate if your interest is derived through an ownership interest in a business and your ownership interest does not exceed three percent of the total equity of that business.

DESCRIBE THE CONTRACT (SALE, EXCHANGE, LEASE, ETC.)	PARTIES TO THE CONTRACT		LOCATION OF REAL ESTATE (CITY OR COUNTY, AND STATE)	VALUE OF CONTRACT (CHECK ONE)		
	GOVERNMENTAL AGENCY	OTHER PARTY		$5,001-$50,000	$50,001-$250,000	MORE THAN $250,000
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐

State and Local Statement of Economic Interests

Additional Information

NAME: Amy B. Jackson

You may provide any additional information you wish to be included with your Statement of Economic Interests on this page. Please note any information you provide on this page will become part of your Statement of Economic Interests and will be open to the public. You MAY NOT add attachments as a substitute for properly filling out any part of this form.

☐

Virginia Conflict of Interest and Ethics Advisory Council
STATE AND LOCAL
STATEMENT OF ECONOMIC INTERESTS

NAME: Amy B. Jackson			
OFFICE OR POSITION HELD OR SOUGHT: Alexandria City Council Member		AGENCY NAME: City of Alexandria	ARE YOU FILING THIS FORM AS A CANDIDATE FOR ELECTION TO THIS OFFICE? ○ YES ◉ NO
BUSINESS ADDRESS: STREET: 4012 Ellicott Street		TELEPHONE:	
CITY: Alexandria	STATE: Virginia ZIP: 22304-1012	OFFICE:	HOME: (703) 597-9439
EMAIL ADDRESS: Amy4alexandria@gmail.com			
FIRST AND LAST NAMES OF MEMBERS OF IMMEDIATE FAMILY: Amy B. Jackson; Blaine C. Jackson, Jr.; Minor Child A; Minor Child B			

Online filings: **This Statement of Economic Interests will be available to the public via the searchable database on the Virginia Conflict of Interest and Ethics Advisory Council website, as required by § 30-356.**

***Local paper filings*: This Statement of Economic Interests is open for public inspection, as required by § 2.2-3115.**

REPORT TO THE BEST OF INFORMATION AND BELIEF Information required on this Statement must be provided on the basis of the best knowledge, information, and belief of the individual filing the Statement as of the date of this report.

AFFIRMATION

I swear or affirm that the information provided on this statement is full, true, and correct to the best of my knowledge.

Amy B. Jackson
Signature of Officer or Employee

January 31, 2021
Date

Any filer who knowingly and intentionally makes a false statement of a material fact on the Statement of Economic Interests is guilty of a Class 5 felony.

FOR OFFICE USE ONLY

Date Received:

Received By: _____

State and Local Statement of Economic Interests

SCHEDULE E
REAL ESTATE

NAME: Amy B. Jackson

QUESTION:

Do you or a member of your immediate family, separately or together, hold an interest valued at more than $5,000 in real property? DO NOT INCLUDE your principal residence or any real estate disclosed on Schedule D. INCLUDE real estate held in trust.

Yes [ ] No [X] ***If yes, complete the table below.***

INSTRUCTIONS:
Disclose all real estate in which you or a member of your immediate family holds an interest valued at more than $5,000. List each parcel individually. INCLUDE real estate held in trust.

DO NOT REPORT:

- Your principal residence
- Any real estate disclosed on Schedule D

List only the city or county, state, and country where each real estate is located. **DO NOT LIST any street addresses. No addresses will be redacted from this schedule.**
List the name or names in which the real estate is owned or recorded. If you or a member of your immediate family holds an interest in the real estate but it is owned or recorded in a name other than your name or your immediate family member's name, list that name.

TYPE OF REAL ESTATE	LOCATION OF REAL ESTATE (CITY OR COUNTY, STATE, AND COUNTRY)	NAME OR NAMES IN WHICH REAL ESTATE IS OWNED OR RECORDED

State and Local Statement of Economic Interests

SCHEDULE H

PAYMENTS FOR REPRESENTATIONS AND OTHER SERVICES GENERALLY

NAME: Amy B. Jackson

QUESTIONS:

DO NOT COMPLETE Questions 1 and 2 if you are completing this disclosure statement in your capacity as an officer or employee of a LOCAL governmental or advisory agency.

PAYMENTS FOR REPRESENTATIONS BY YOU

1. Did you represent any business before any state governmental agency during the prior calendar year for which you received compensation in excess of $5,000 for such representation?

DO NOT INCLUDE compensation for the performance of other services unrelated to the representation before the state governmental agency when calculating the amount of compensation received from a business. If you have job responsibilities other than those involving such representation, you should prorate your salary to determine the portion attributable to your representation.

DO NOT REPORT any business that you represented before a court or judicial officer, or where the representation consisted solely of the filing of mandatory papers and any subsequent representation regarding the mandatory papers.

Yes [ ] No [X] ***If yes, complete Table 1.***

PAYMENTS FOR REPRESENTATIONS BY ASSOCIATES

2. Did persons with whom you have a close financial association represent any business before any state governmental agency during the prior calendar year for which compensation was received in excess of $5,000 for such representation?

DO NOT INCLUDE members of your immediate family when determining with which individuals you have a close financial association, unless you and your immediate family member are employed by or work for the same business or organization.

DO NOT INCLUDE compensation for the performance of other services unrelated to the representation when calculating the amount of compensation received from a business. If your associate has job responsibilities other than those involving such representation, you should prorate his salary to determine the portion attributable to his representation.

DO NOT REPORT any business that such persons represented before a court or judicial officer, or where the representation consisted solely of the filing of mandatory papers and any subsequent representation regarding the mandatory papers.

Yes [ ] No [X] ***If yes, complete Table 2.***

PAYMENTS FOR OTHER SERVICES GENERALLY

3. Did you or persons with whom you have a close financial association furnish services to any business operating in Virginia during the prior calendar year for which compensation was received in excess of $5,000 for such services?

DO NOT INCLUDE members of your immediate family when determining with which individuals you have a close financial association, unless you and your immediate family member are employed by or work for the same business or organization.

DO NOT INCLUDE compensation reported on Table 1 or Table 2 of this schedule.

Yes [ ] No [✓] ***If yes, complete Table 3.***