



PERSONAL FINANCIAL DISCLOSURE STATEMENT

PFD-1

FOR STATE USE ONLY

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION
P.O. Box 185, Trenton, NJ 08625-0185
(609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532)
Website: www.elec.state.nj.us

ELEC RECEIVED
APR 12 2017

PLEASE PRINT OR TYPE

Candidate Name:
Mark Zinna

Legislative District:
37th

Address:
37 Hamilton Place

City:
Tenafly

State:
NJ

Zip:
07670

Election Date:
June 6, 2017

Political Party, if any:
Democrat

Amendment

Office Sought:

- Governor
Lieutenant Governor
Senate
Assembly

Calendar Year of Report: 2016

Note: The PFD-1 form covers the calendar year preceding the year of election.

CANDIDATE CERTIFICATION

I, the undersigned, do hereby certify as follows:

The information reported in this personal financial disclosure statement is true and complete. I am aware that if any of the statements contained herein are willfully false or incomplete, I may be subject to punishment.

Mark Zinna
Candidate Signature

April 11, 2017
Date

SCHEDULE I - EARNED INCOME

**IDENTIFY EACH SOURCE IN EXCESS OF \$100 WHEN AGGREGATE RECEIPTS FROM ALL SOURCES
WITHIN A CATEGORY EXCEEDS \$1,000**

Check if aggregate received in each category exceeds \$1,000	Recipient	Name and Address of Source
Salary <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	BPF DATA INC 50 East Palisade Avenue Englewood, NJ 07670
	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Borough of Tenafly 100 Riveredge Road Tenafly, NJ 07670
	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	AIG International 175 Water Street New York, NY 10038
	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	Samsung Electronics America 85 Challenger Road Ridgefield Park, NJ 07660
	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	Atterro Inc. 7301 State Highway 161 Irving, TX 75039
	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Child	Fordham University 441 East Fordham Road Bronx, NY 10458
	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input checked="" type="checkbox"/> Child	BPF DATA INC 50 East Palisade Avenue Englewood, NJ 07631
Bonus <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	AIG International 175 Water Street New York, NY 10038
	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	Samsung Electronics America 85 Challenger Road Ridgefield Park, NJ 07660
Royalties <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	

Fees <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	
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Commissions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	Consortra Translations 100 Park Avenue New York, NY 10017
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Profit Sharing <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	
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SCHEDULE II - UNEARNED INCOME

**IDENTIFY EACH SOURCE IN EXCESS OF \$100 WHEN AGGREGATE RECEIPTS FROM ALL SOURCES
WITHIN A CATEGORY EXCEEDS \$1,000**

Check if aggregate received in each category exceeds \$1,000	Recipient	Name and Address of Source
Rents <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	
Dividends <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	401k retirement plan mutual funds
*Other Income (Including Interest) <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	

***Other Income from named investments, trusts and estates.**

SCHEDULE III - HONORARIUMS AND FEES IN EXCESS OF \$100

Description	Recipient	Name and Address of Payer
	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	

SCHEDULE IV - REIMBURSEMENTS IN EXCESS OF \$100

Description	Recipient	Name and Address of Payer
	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	

SCHEDULE V - GIFTS VALUED IN EXCESS OF \$250

Recipient

Name and Address of Donor

Candidate

Spouse

Child

SCHEDULE VI

OWNERSHIP, HOLDING OR CONTROL OF AN INTEREST IN ANY LAND OR BUILDING IN ANY CITY IN WHICH CASINO GAMBLING IS AUTHORIZED, WHICH LAND OR BUILDING SHALL BE SPECIFIED

Description	Person Owning, Holding, or Controlling Interest in Land/Building	Address of Land or Building
	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	